



Blue Shield TotalDual Plan (HMO D-SNP)

2024 Directorio de Proveedores de

Condado: San Diego

H2819_23_380B_C 07172023

Blue Shield of California is an independent licensee of the Blue Shield Association

Blue Shield TotalDual Plan | Directorio de Proveedores de 2024

Introducción

Este Directorio de Proveedores incluye información sobre los tipos de proveedores que forman parte de Blue Shield TotalDual Plan, así como listas de todos los proveedores del plan actualizadas a la fecha de este Directorio. Las listas incluyen la dirección y la información de contacto, así como otros detalles, entre ellos, los días y horarios de atención, las especialidades y las habilidades. En el último capítulo de la Evidencia de Cobertura aparecen los términos claves y sus definiciones en orden alfabético.

Índice

A. Avisos legales	5
B. Información de partida sobre los proveedores de la red de Blue Shield TotalDual Plan	6
B1. Términos claves	6
B2. Tiempos de espera para la atención primaria y la salud de la conducta	7
B3. Cómo elegir un médico de atención primaria (PCP).....	8
B4. Proveedores de apoyo y servicios a largo plazo (LTSS).....	8
B5. Cómo obtener acceso a los proveedores de la red de Blue Shield TotalDual Plan	9
C. Lista de proveedores de la red de Blue Shield TotalDual Plan	10
C1. Lista de proveedores de la red.....	13
C3. Centros de enfermería especializada (SNF, por sus siglas en inglés)	876
D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal	881
D1. Clínicas de salud con calificación federal	881
D2. Directorio de atención primaria.....	1099
D3. Directorio de proveedores especialistas	1796
D4. Directorio de hospitales: hospital general de atención aguda.....	2417
D5. Proveedores de apoyo y servicios a largo plazo (LTSS) Proveedores de apoyo y servicios a largo plazo (LTSS)	2422
I. Atención a largo plazo (LTC) y centro de enfermería especializada (SNF).....	2422
II. Servicios de apoyo en el hogar (IHSS) del condado.....	2438
III. Servicios comunitarios para adultos (CBAS): servicios diurnos para adultos	2439
D6. Directorio de salud mental	2442
D7. Directorio de proveedores de la vista: servicios oculares y de la vista.....	2516
D8. Otros proveedores de servicios	2619
D9. Centros de atención de urgencia de Blue Shield Promise.....	2620
E. Índice de proveedores	2689

†Proveedor de DSNP que también está inscrito en Medi-Cal

Si tiene preguntas, llame a Blue Shield TotalDual Plan al 1-800-452-4413 (TTY: 711), de 8:00 a. m. a 8:00 p. m., los 7 días de la semana. La llamada es gratis. **Para obtener más información**, visite



www.blueshieldca.com/medicare.

A. Avisos legales

- ❖ En este Directorio se incluyen los profesionales de atención de la salud (como médicos, profesionales de enfermería calificados para ejercer ciertas funciones del médico [*nurse practitioners*] y psicólogos) y centros (como hospitales o clínicas). También se incluyen proveedores de apoyo y servicios a largo plazo (LTSS, por sus siglas en inglés) (como proveedores de cuidado de día para adultos y de atención de la salud en el hogar) con los que puede atenderse como miembro de Blue Shield TotalDual Plan. También incluimos las farmacias que puede usar para obtener sus medicamentos recetados.
- ❖ En este Directorio, el término “proveedores de la red” hace referencia a ellos. Estos proveedores firmaron un contrato con nosotros para brindarle servicios. Esta es una lista de los proveedores de la red de Blue Shield TotalDual Plan para el condado de San Diego.
- ❖ Puede conseguir este documento gratis en otros formatos, como letra grande, braille o audio. Llame al 1 800 452 4413 (TTY: 711), de 8:00 a. m. a 8:00 p. m., los 7 días de la semana. La llamada es gratis.
- ❖ Tenemos servicios de intérpretes gratis para responder cualquier pregunta que pueda tener sobre nuestro plan de salud o de medicamentos. Si necesita un intérprete, llámenos al 1-800-452-4413. Una persona que hable inglés, español, árabe, farsi, armenio, jemer, coreano, ruso, tagalo o vietnamita puede brindarle ayuda. El servicio es gratuito. Puede hacer un pedido permanente para conseguir este documento en un idioma que no sea inglés o en un formato alternativo ahora y en el futuro. Para hacer un pedido, comuníquese con Blue Shield TotalDual Plan. Atención al Cliente se asegurará de que sus preferencias de idioma y formato quede registradas para futuras comunicaciones. Para actualizar sus preferencias, comuníquese con Blue Shield TotalDual Plan.
- ❖ La lista está actualizada al 10/07/2024, pero debe tener en cuenta que::
 - Es posible que algunos proveedores de la red de Blue Shield TotalDual Plan se hayan agregado o quitado de nuestra red después de la publicación de este Directorio.
 - Es posible que algunos de los proveedores de Blue Shield TotalDual Plan que forman parte de nuestra red ya no acepten miembros nuevos. Si tiene problemas para encontrar un proveedor que acepte miembros nuevos, llame a Atención al Cliente al 1 800 452 4413 (TTY: 711) y le brindaremos ayuda.
 - Para obtener la información más actualizada sobre los proveedores de la red de Blue Shield TotalDual Plan en su área, visite www.blueshieldca.com/medicare o llame a Atención al Cliente al 1 800 452 4413 (TTY: 711), de 8:00 a. m. a 8:00 p. m., los 7 días de la semana. La llamada es gratis.

Los médicos y otros profesionales de atención de la salud de la red de Blue Shield TotalDual Plan aparecen en la página 13-2688.

Puede usar la Lista que está en la parte de atrás del Directorio para encontrar la página en la que aparece un proveedor o una farmacia.

B. Información de partida sobre los proveedores de la red de Blue Shield TotalDual Plan

B1. Términos claves

Esta sección explica los términos claves de nuestro Directorio.

- Los **proveedores** son profesionales como médicos, profesionales de enfermería, farmacéuticos, terapeutas y otras personas que brindan atención y servicios. Los **servicios** incluyen atención médica, apoyo y servicios a largo plazo (LTSS), suministros, medicamentos recetados, equipos y otros servicios.
 - El término “proveedores” también incluye centros, como hospitales, clínicas y otros lugares que brindan servicios y equipos médicos. También incluye a proveedores de LTSS con los que puede atenderse como miembro de Blue Shield TotalDual Plan.
 - Los proveedores que forman parte de la red de nuestro plan se llaman “proveedores de la red”.
- Los **proveedores de la red** tienen un contrato con nosotros para brindarles servicios a los miembros de nuestro plan. Los proveedores de la red participan en nuestro plan. Eso significa que aceptan miembros de nuestro plan y brindan servicios que nuestro plan cubre. Cuando se atiende con un proveedor de la red, usted generalmente no paga nada por los servicios cubiertos.
- Un **médico de atención primaria** (PCP, por sus siglas en inglés) es un profesional de medicina interna, un médico familiar o general, o un especialista que le brinda atención de la salud de rutina. Su PCP guardará sus registros médicos y sabrá cuáles son sus necesidades de salud con el paso del tiempo. Su PCP también le dará una referencia si necesita atenderse con un especialista u otro proveedor.
- Los **especialistas** son médicos que brindan servicios de atención de la salud para una enfermedad o una parte del cuerpo específicas. Hay muchos tipos de especialistas. Estos son algunos ejemplos:
 - Los oncólogos tratan a los pacientes que tienen cáncer.
 - Los cardiólogos tratan a los pacientes que tienen problemas del corazón.
 - Los ortopedas tratan a los pacientes que tienen ciertos problemas de salud en los huesos, las articulaciones o los músculos.
- Un grupo médico o una asociación de médicos independientes (IPA, por sus siglas en inglés) es una organización formada según las leyes de California que tiene contratos con planes de salud para brindarles servicios de atención de la salud a las personas inscritas en estos planes, o bien para coordinar esos servicios. Vea la sección B3 para obtener más información.
- Es posible que necesite una **referencia** o una autorización **previa** para atenderse con un

†Proveedor de DSNP que también está inscrito en Medi-Cal

Si tiene preguntas, llame a Blue Shield TotalDual Plan al 1-800-452-4413 (TTY: 711), de 8:00 a. m. a 8:00 p. m., los 7 días de la semana. La llamada es gratis. **Para obtener más información**, visite

www.blueshieldca.com/medicare.



especialista o con cualquier otro profesional que no sea su PCP. Si necesita una **referencia**, significa que su PCP de la red debe darle una aprobación antes de que pueda atenderse con el otro proveedor. Una **autorización previa** es diferente de una referencia. Significa que Blue Shield TotalDual Plan (no su PCP de la red) debe darle una aprobación **antes** de que nosotros cubramos un servicio, un artículo o un medicamento específicos, o un proveedor fuera de la red. Si usted no obtiene una referencia o una autorización previa, es posible que Blue Shield TotalDual Plan no cubra el servicio, el artículo o el medicamento.

- **No** se necesitan referencias ni autorización previa para lo siguiente:
 - Atención de emergencia.
 - Atención urgentemente necesaria.
 - Servicios de diálisis renal que reciba en un centro de diálisis certificado por Medicare si se encuentra fuera del área de servicio del plan.
 - Servicios brindados por un especialista en salud de la mujer.
 - Todos los servicios preventivos cubiertos por Medicare, incluidas las pruebas de detección y las vacunas.
- Además, si usted es elegible para recibir servicios de proveedores de salud para indígenas, puede atenderse con estos proveedores sin una referencia. Debemos pagarle al proveedor de salud para indígenas por esos servicios incluso si está fuera de la red de nuestro plan..
- Hay más información disponible sobre las referencias y la autorización previa en el Capítulo 3 de la Evidencia de Cobertura.
- También se le asignará un **Equipo de Atención**. Su **Equipo de Atención** empieza con la relación entre usted y su PCP. El Equipo de Atención puede incluir a una persona que brinda cuidados, un Coordinador de Atención de la Salud, un especialista y otros profesionales según el nivel de necesidad demostrado en su Plan de Atención. Todos los integrantes del Equipo de Atención trabajan juntos para asegurarse de que su atención esté coordinada. Esto significa que se aseguran de que usted reciba todas las pruebas, los exámenes de laboratorio y otro tipo de atención que necesite, y de que los resultados se compartan con los proveedores adecuados. También significa que su PCP debe conocer todos los medicamentos que usted toma para poder reducir cualquier efecto negativo. Su PCP siempre le pedirá permiso antes de compartir su información médica con otros proveedores. Los miembros de su Equipo de Atención pueden incluir:
 - Un **Coordinador de Atención de la Salud** que le ayuda a administrar sus proveedores y sus servicios médicos.
 - Su **médico de atención primaria**.

Su Equipo de Atención también le ayudará a encontrar otros proveedores de servicios médicos, de salud

de la conducta o de apoyo y servicios a largo plazo (LTSS) si usted necesita un especialista u otro proveedor de atención de la salud. De esta manera, usted obtendrá el proveedor adecuado para que le brinde ayuda con sus inquietudes.

B2. Tiempos de espera para la atención primaria y la salud de la conducta

Debemos brindarle acceso a los servicios de atención primaria y de salud de la conducta dentro de los siguientes plazos:

- De manera inmediata para los servicios urgentemente necesarios o de emergencia.
- Dentro de los 7 días cuando usted necesite atención médica, pero los servicios no sean urgentemente necesarios ni de emergencia.
- Dentro de los 30 días para la atención de rutina o preventiva.

B3. Cómo elegir un médico de atención primaria (PCP)

Primero, deberá elegir un médico de atención primaria (PCP). Es posible que un especialista pueda actuar como su PCP. Podrá elegir a un especialista como su PCP si este acepta brindarle todos los servicios que normalmente brindan los PCP. Para pedir que su especialista sea su PCP, comuníquese con Atención al Cliente de Blue Shield TotalDual Plan. Puede elegir a cualquier PCP de nuestra red que acepte miembros nuevos.

Los PCP de nuestro plan están afiliados con grupos médicos. Cuando elige a su PCP, también elige el grupo médico afiliado. Esto significa que su PCP le brindará referencias a especialistas y servicios que también están afiliados con el grupo médico del PCP.

- Si hay un especialista o un hospital en particular que usted desea usar, es importante saber si están afiliados con el grupo médico de su PCP. Puede buscarlo en este Directorio o pedirle a Atención al Cliente de Blue Shield TotalDual Plan que averigüe si el PCP que usted desea hace referencias a ese especialista o usa ese hospital..
- Si no se atiende dentro del grupo médico de su PCP, es posible que Blue Shield TotalDual Plan no cubra el servicio.

Para elegir un PCP, vea la lista de médicos en la página 13-2688 y elija un médico:

- con el que se atienda actualmente, **o**
- que le haya recomendado alguien de su confianza, **o**
- que tenga un consultorio al que usted pueda acceder fácilmente.
- Si no elige un PCP de nuestra red, Blue Shield TotalDual Plan elegirá uno por usted.
- Si desea ayuda para elegir un PCP, llame a Atención al Cliente al 1 800 452 4413 (TTY: 711), de 8:00 a. m. a 8:00 p. m., los 7 días de la semana. La llamada es gratis. O visite

†Proveedor de DSNP que también está inscrito en Medi-Cal

Si tiene preguntas, llame a Blue Shield TotalDual Plan al 1-800-452-4413 (TTY: 711), de 8:00 a. m. a 8:00 p. m., los 7 días de la semana. La llamada es gratis. **Para obtener más información**, visite

www.blueshieldca.com/medicare.



- Si tiene preguntas sobre si el servicio o la atención que usted desea o necesita están cubiertos, hable con su Equipo de Atención o llame a Atención al Cliente al 1-800-452-4413 (TTY: 711) y averigüe **antes** de recibirlos.

B4. Proveedores de apoyo y servicios a largo plazo (LTSS)

Como miembro de Blue Shield TotalDual Plan, si los necesita, podrá recibir apoyo y servicios a largo plazo (LTSS), como servicios comunitarios de cuidado de día para adultos (CBAS, por sus siglas en inglés), que brindan servicios de enfermería, terapia física, terapia ocupacional, terapia del habla, actividades terapéuticas y comidas en centros de la comunidad. También están disponibles los servicios de apoyo en el hogar (IHSS, por sus siglas en inglés), que es la atención que reciben en su hogar las personas que no pueden estar seguras en él sin la asistencia de una persona que brinda cuidados. El apoyo y los servicios a largo plazo (LTSS) ayudan a las personas que necesitan asistencia para hacer tareas diarias como bañarse, vestirse, cocinar y tomar medicamentos. Si bien la mayoría de estos servicios se brindan en su hogar o su comunidad, podrían brindarse también en un hogar de ancianos o en un hospital.

Si usted necesita LTSS, su Coordinador de Atención de la Salud o su MSSP pueden ayudarles a usted y a su Equipo de Atención a determinar qué opciones están disponibles para brindarle apoyo de la manera que usted desea.

B5. Cómo obtener acceso a los proveedores de la red de Blue Shield TotalDual Plan

Debe recibir todos sus servicios cubiertos a través de proveedores de nuestra red que estén afiliados con el grupo médico de su PCP. Si se atiende con proveedores que no están en la red de Blue Shield TotalDual Plan y que no están afiliados con el grupo médico de su PCP (**sin autorización previa**), **deberá pagar la factura**.

Una **autorización previa** es una aprobación de Blue Shield TotalDual Plan para buscar servicios fuera de nuestra red o para obtener servicios que habitualmente no están cubiertos por nuestra red **antes** de que usted reciba los servicios.

Las únicas excepciones a esta regla son cuando necesita atención urgente o de emergencia, o diálisis, y no puede atenderse con un proveedor del plan, como cuando está lejos de su hogar. También puede atenderse fuera del plan o del grupo médico de su PCP para otros servicios que no sean de emergencia si antes Blue Shield TotalDual Plan le da autorización.

- Puede cambiar de proveedor, dentro de la red, en cualquier momento del año. Si se ha atendido antes con un proveedor de la red, no es necesario que se siga atendiendo con ese mismo proveedor. En el caso de algunos proveedores, es posible que necesite una referencia de su PCP. El cambio de PCP será válido el primer día del mes siguiente, siempre y cuando recibamos su pedido antes del día 20 del mes actual. Para cambiar su PCP, llame a Atención al Cliente. Cuando llame, asegúrese de decirle a Atención al Cliente si actualmente se atiende con un especialista o si recibe

otros servicios cubiertos para los que se necesita la aprobación de un PCP (como los servicios de atención de la salud en el hogar y el equipo médico duradero). Atención al Cliente se asegurará de que, al cambiar de PCP, usted pueda seguir recibiendo la atención especializada y los otros servicios; también verificará que el PCP al que desea cambiarse esté aceptando pacientes nuevos, cambiará su registro de membresía para que se muestre el nombre de su nuevo PCP y le indicará cuándo se aplicará el cambio a su nuevo PCP. Además, Atención al Cliente le enviará una nueva tarjeta de membresía con el nombre y el número de teléfono de su nuevo PCP.

- Recuerde que los PCP de nuestro plan están afiliados con grupos médicos. Si cambia de PCP, es posible que también cambie de grupo médico. Cuando pida el cambio, asegúrese de decirle a Atención al Cliente si actualmente se atiende con un especialista o si recibe otros servicios cubiertos para los que se necesita la aprobación de un PCP. Atención al Cliente se asegurará de que, al cambiar de PCP, usted pueda seguir recibiendo la atención especializada y los otros servicios.
- Blue Shield TotalDual Plan trabaja con todos los proveedores de nuestra red para satisfacer las necesidades de las personas con discapacidades. Si corresponde, la lista de proveedores de la red de este Directorio incluye información sobre las adaptaciones que estos ofrecen.
- Si necesita un proveedor y no sabe con seguridad si ofrece las adaptaciones que usted necesita, Blue Shield TotalDual Plan puede brindarle ayuda. Hable con su Coordinador de Atención de la Salud para obtener ayuda.

C. Lista de proveedores de la red de Blue Shield TotalDual Plan

Esta parte del Directorio incluye una lista de los proveedores de la red de Blue Shield TotalDual Plan que aceptan y participan en Blue Shield TotalDual Plan. Incluye lo siguiente:

- **Profesionales de atención de la salud**, que incluyen proveedores de atención primaria, especialistas, proveedores de salud de la conducta, proveedores de servicios dentales y proveedores de servicios de la vista.
- **Centros**, que incluyen hospitales, centros de enfermería y centros de salud de la conducta.
- **Proveedores de servicios de apoyo**, que incluyen apoyo y servicios a largo plazo (LTSS) (por ejemplo, cuidado de día para adultos) y servicios de apoyo comunitario (por ejemplo, apoyo de los pares).

Los proveedores de la atención dental administrada de Medi-Cal aparecen en los sitios web de los planes de atención dental administrada. Actualmente, los planes de atención dental administrada son Liberty Dental Plan, Access Dental Plan y Health Net of California. Es posible buscar proveedores por nombre, dirección, ciudad, código postal, especialidad o idiomas que hablan. Para obtener ayuda e información actualizada del plan, también puede llamar a Health Care Options al 1-800-430-4263 (los usuarios del sistema TTY deben llamar al 1-800-430-7077), de lunes a viernes, de 8:00 a. m. a 6:00 p. m.

†Proveedor de DSNP que también está inscrito en Medi-Cal

Si tiene preguntas, llame a Blue Shield TotalDual Plan al 1-800-452-4413 (TTY: 711), de 8:00 a. m. a 8:00 p. m., los 7 días de la semana. La llamada es gratis. **Para obtener más información**, visite

www.blueshieldca.com/medicare.



Los proveedores dentales de pago por servicio de Medi-Cal aparecen en el Directorio de Proveedores, en el sitio web de Smile, California: www.dental.dhcs.ca.gov/find-a-dentist/home. Es posible buscar proveedores por dirección, ciudad, código postal, especialidad o idiomas que hablan. Además de las búsquedas de proveedores dentales inscritos que pueden hacerse en el Directorio de Proveedores, hay una lista de higienistas dentales registrados inscritos ordenada por condado en Smile, California.

Los servicios dentales en San Mateo están cubiertos por Health Plan of San Mateo (HPSM). El Directorio de Proveedores está en el sitio web del plan. Es posible buscar proveedores por nombre o código postal.

Los proveedores están ordenados alfabéticamente por apellido. En el Índice que está al final del Directorio también podrá encontrar el nombre del proveedor y la página en la que aparece su información de contacto adicional. En el Índice, los proveedores están ordenados alfabéticamente por apellido. Además de la información de contacto, las listas de proveedores también incluyen las especialidades y las habilidades; por ejemplo, qué idiomas hablan o si completaron el entrenamiento en competencia cultural.

El entrenamiento en competencia cultural es orientación adicional para nuestros proveedores de atención de la salud, que los ayuda a entender mejor su origen, sus valores y sus creencias, y a adaptar los servicios para satisfacer sus necesidades sociales, culturales e idiomáticas.

La red completa de Blue Shield TotalDual Plan incluye lo siguiente:

Cantidad total de PCP: 2827

Cantidad total de especialistas: 2696

Cantidad total de hospitales: 21

Cantidad total de proveedores de acupuntura y quiroprácticos: No Data

Cantidad total de proveedores dentales: No Data

Cantidad total de servicios de atención de la salud en el hogar: 1

Cantidad total de proveedores de servicios de salud mental: 356

Cantidad total de proveedores de atención de la vista: 467

Cantidad total de proveedores que brindan apoyo y servicios a largo plazo: No Data

Cantidad total de centros de salud mental: No Data

Cantidad total de centros de enfermería especializada: 87

Cantidad total de proveedores de otros servicios: 1

C1. Lista de proveedores de la red

Hospitales afiliados

**ENCOMPASS HEALTH
REHABILITATION HOSPITAL
OF MURRIETA**

Effective as of 01-AUG-20

📍 35470 WHITEWOOD RD
MURRIETA, CA 92563

**HEMET GLOBAL MEDICAL
CENTER**

Effective as of 01-JAN-20

📍 1117 E DEVONSHIRE AVE
HEMET, CA 92543

Birthing Friendly: Y

HOAG HOSPITAL IRVINE

Effective as of 01-FEB-14

📍 16200 SAND CANYON AVE
IRVINE, CA 92618

**HOAG ORTHOPEDIC
INSTITUTE**

Effective as of 01-JAN-12

📍 16250 SAND CANYON AVE
IRVINE, CA 92618

**KINDRED HOSPITAL SAN
DIEGO**

Effective as of 01-JAN-12

📍 1940 EL CAJON BLVD
SAN DIEGO, CA 92104

**MENIFEE GLOBAL MEDICAL
CENTER**

Effective as of 01-JAN-20

📍 28400 MCCALL BLVD
SUN CITY, CA 92585

**MISSION HOSPITAL LAGUNA
BEACH**

Effective as of 01-JAN-10

📍 31872 COAST HWY

LAGUNA BEACH, CA 92651

PALOMAR HEALTH

Effective as of 01-JAN-12

📍 15615 POMERADO RD
POWAY, CA 92064

Birthing Friendly: Y

PALOMAR MEDICAL CENTER

Effective as of 01-JAN-12

📍 2185 CITRACADO PKWY
ESCONDIDO, CA 92029

PARADISE VALLEY HOSPITAL

Effective as of 01-AUG-12

📍 2400 E 4TH ST
NATIONAL CITY, CA 91950

**PROVIDENCE MISSION
HOSPITAL**

Effective as of 01-JAN-10

📍 27700 MEDICAL CENTER
RD
MISSION VIEJO, CA 92691

Birthing Friendly: Y

**SADDLEBACK MEMORIAL MED
CTR**

Effective as of 01-JAN-12

📍 24451 HEALTH CENTER DR
LAGUNA HILLS, CA 92653

Birthing Friendly: Y

SCRIPPS GREEN HOSPITAL

Effective as of 01-JAN-12

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

**SCRIPPS MEMORIAL
HOSPITAL**

Effective as of 01-JAN-12

📍 9888 GENESEE AVE
LA JOLLA, CA 92037

Birthing Friendly: Y

**SCRIPPS MEMORIAL
HOSPITAL ENCINITAS**

Effective as of 01-JAN-12

📍 354 SANTA FE DR
ENCINITAS, CA 92024

Birthing Friendly: Y

SCRIPPS MERCY HOSPITAL

Effective as of 01-JAN-12

📍 4077 5TH AVE
SAN DIEGO, CA 92103

Birthing Friendly: Y

**SCRIPPS MERCY HOSPITAL
CHULA VISTA**

Effective as of 01-JAN-12

📍 435 H ST
CHULA VISTA, CA 91910

**SELECT SPECIALTY HOSPITAL
SAN DIEGO**

Effective as of 01-JAN-12

📍 555 WASHINGTON ST
SAN DIEGO, CA 92103

TRI CITY MEDICAL CTR

Effective as of 01-JAN-12

📍 4002 VISTA WAY
OCEANSIDE, CA 92056

Birthing Friendly: Y

**UC SAN DIEGO HEALTH - EAST
CAMPUS MEDICAL CENTER**

Effective as of 11-DEC-23

📍 6655 ALVARADO RD
SAN DIEGO, CA 92120

C1. Lista de proveedores de la red

Hospitales afiliados

UCSD LA JOLLA JOHN SALLY THORNTON

Effective as of 01-OCT-14

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

UCSD MEDICAL CTR

Effective as of 01-OCT-14

 200 W ARBOR DR
SAN DIEGO, CA 92103




Birthing Friendly: Y

C1. Lista de proveedores de la red




Centros de atención de urgencia

Este plan brinda cobertura para servicios urgentemente necesarios tanto dentro de la red como fuera de la red. Para obtener una lista actualizada de los centros de atención urgente de la red, comuníquese con su grupo médico.




BAHIA FAMILY MEDICAL GROUP INC

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




CONCENTRA URGENT CARE

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




CONCENTRA URGENT CARE

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

CONCENTRA URGENT CARE



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

CONCENTRA URGENT CARE




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

CONCENTRA URGENT CARE




 7862 EL CAJON BLVD

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




CONCENTRA URGENT CARE

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




CONCENTRA URGENT CARE

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




CONCENTRA URGENT CARE

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




CONCENTRA URGENT CARE

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

CONCENTRA URGENT CARE

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

CONCENTRA URGENT CARE


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

CONCENTRA URGENT CARE




 5575 RUFFIN RD STE 100

SAN DIEGO, CA 92123
 (866) 944-6046




CONCENTRA URGENT CARE

 5333 MISSION CENTER RD STE 100
SAN DIEGO, CA 92108
 (866) 944-6046




CONCENTRA URGENT CARE

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




CONCENTRA URGENT CARE

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




CONCENTRA URGENT CARE

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

DOCTORS EXPRESS OF OCEANSIDE INC

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

EAST COUNTY URGENT CARE




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

C1. Lista de proveedores de la red


Centros de atención de urgencia

SA 9:00AM-4:00PM




HOAG CLINIC

 26671 ALISO CREEK RD STE 101
ALISO VIEJO, CA 92656
 (949) 791-3107
 SU 8:00AM-5:00PM
M-F 8:00AM-8:00PM
SA 8:00AM-5:00PM




HOAG CLINIC

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




HOAG CLINIC

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

HOAG CLINIC




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

HOAG CLINIC




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

SA 8:00AM-5:00PM




MARQUE URGENT CARE

 25482 MARGUERITE PKWY STE 101
MISSION VIEJO, CA 92692
 (949) 760-9222
 SU 8:00AM-8:00PM
M-F 8:00AM-9:00PM
SA 8:00AM-8:00PM



MARQUE URGENT CARE

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




MARQUE URGENT CARE

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

MISSION HERITAGE MED GRP


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

MISSION HERITAGE MED GRP




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

OPTUM




 145 THUNDER DR
VISTA, CA 92083

 (760) 941-9002

SAND CANYON URGENT CARE MED CTR

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

SOUTHBAY URGENT CARE INC

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

CI. Lista de proveedores de la red

Proveedores de atención primaria

GENERAL PRACTICE

THOMAS, SEAN, MD^{M†}

Provider ID: 100112751013

15 MAREBLU STE 310
ALISO VIEJO, CA 92656

(949) 831-1001

French, Spanish

Effective as of 01-APR-19

INTERNAL MEDICINE

HERMAN, SAM, MD^M

Provider ID: 100414181004

26671 ALISO CREEK RD STE
206

ALISO VIEJO, CA 92656

(949) 791-3104

Effective as of 01-SEP-23

KAYE, SHAWN, MD^M

Provider ID: 100347353012

26671 ALISO CREEK RD STE
206

ALISO VIEJO, CA 92656

(949) 791-3104

Effective as of 01-JAN-21

FQHC

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE,

Provider ID: PG0094125003

1620 ALPINE BLVD STE 110
ALPINE, CA 91901

(619) 662-4100

Teleservice

Effective as of 01-JAN-21

FAMILY PRACTICE

AJIR, MAHYAR, DO^{M†}

Provider ID: 100067406005

2801 JEFFERSON ST
CARLSBAD, CA 92008

(760) 729-4952

Farsi, Persian, Spanish

Effective as of 01-APR-16

CHAVEZSANTOS, MARIA, MD^F

Provider ID: 100433794004

1295 CARLSBAD VILLAGE
DR STE 100

CARLSBAD, CA 92008

(760) 736-6767

Spanish

Effective as of 01-AUG-24

KORFF, GARY, MD^{M†}

Provider ID: 100021811011

2910 JEFFERSON ST STE
100

CARLSBAD, CA 92008

(760) 729-7186

Spanish

Effective as of 01-JAN-23

PEREZ, RONALD, MD^{M†}

Provider ID: 100323488011

1207 CARLSBAD VILLAGE
DR STE A

CARLSBAD, CA 92008

(760) 896-3030

Spanish, Tagalog

Effective as of 01-JAN-20

VOURLITIS, MELISSA, DO^{F*}

Provider ID: 100090572021

2855 CARLSBAD BLVD
CARLSBAD, CA 92008

(858) 832-2500

Teleservice

Effective as of 01-NOV-23

FQHC

TRUECARE,

Provider ID: PG0092587007

1295 CARLSBAD VILLAGE
DR STE 100

CARLSBAD, CA 92008

(760) 736-6767

Teleservice

Effective as of 01-JUL-22

GENERAL PRACTICE

KREMER, ARNOLD, DO^M

Provider ID: 100023664010

5814 VAN ALLEN WAY STE
215

CARLSBAD, CA 92008

(760) 444-5544

French, Spanish

Teleservice

Effective as of 01-APR-23

INTERNAL MEDICINE

CHONG, YOO JIN, MD^{M†}

Provider ID: 100055662004

5930 PRIESTLY DR
CARLSBAD, CA 92008

(760) 434-6060

Korean

Effective as of 01-NOV-21

CHONG, MARIBETH, MD^F

Provider ID: 100092861004

5930 PRIESTLY DR
CARLSBAD, CA 92008

(760) 434-6060

Spanish, Tagalog

Effective as of 01-NOV-21

CHONG, YOO JIN, MD^{M†}

Provider ID: 100055662003

5930 PRIESTLY DR
CARLSBAD, CA 92008

(760) 434-6060

Korean




Effective as of 01-NOV-21

CHONG, MARIBETH, MD^F



Provider ID: 100092861003

C1. Lista de proveedores de la red

Proveedores de atención primaria




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

HALL, ANDREW, MD^{M†}




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

FAMILY PRACTICE




ALANIZ, MATEO, MD^{M††}

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



ALANIZ, MATEO, MD^{M†}


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

ALB, SIMONA, MD^{F††}




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

ALB, SIMONA, MD^{F†}




Provider ID: 100033656016
 480 4TH AVE STE 202
CHULA VISTA, CA 91910
 (619) 427-3361

 Romanian
Effective as of 01-SEP-22




ALB, SIMONA, MD^{F†}

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




ALB, SIMONA, MD^{F†}

Provider ID: 100033656005
 480 4TH AVE STE 202
CHULA VISTA, CA 91910
 (619) 427-3361
 Romanian
Effective as of 01-OCT-12




ALJAWADI, GEORGIA, DO^{F††}

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

ALJAWADI, GEORGIA, DO^{F†}




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

ALJAWADI, GEORGIA, DO^{F†}




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

ALJAWADI, GEORGIA, DO^{F††}




Provider ID: 100133625018

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




ALVAREZ-ESTRADA, MIGUEL, MD^{M†}

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




ARCEGOMEZ, LAURA, MD^{F†}

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




ARCEGOMEZ, LAURA, MD^F

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

CHOU, SUSANNA, MD^F

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

ELSAYED, MOHAMMED, MD^{M†}

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

CI. Lista de proveedores de la red

Proveedores de atención primaria

Effective as of 01-MAY-18

ELSAYED, MOHAMMED, MD^{Mt}

Provider ID: 100020910032

330 OXFORD ST STE 106
CHULA VISTA, CA 91911

(619) 409-1802

Arabic, German, Spanish
Effective as of 01-NOV-20

ELSAYED, MOHAMMED, MD^{Mt}

Provider ID: 100020910031

330 OXFORD ST STE 106
CHULA VISTA, CA 91911

(619) 409-1802

Arabic, German, Spanish
Effective as of 01-JAN-21

ELSAYED, MOHAMMED, MD^{Mt}

Provider ID: 100020910029

330 OXFORD ST STE 106
CHULA VISTA, CA 91911

(619) 409-1802

Arabic, German, Spanish
Effective as of 01-JAN-21

ELSAYED, MOHAMMED, MD^{Mt}

Provider ID: 100020910030

330 OXFORD ST STE 106
CHULA VISTA, CA 91911

(619) 409-1802

Arabic, German, Spanish
Effective as of 01-JAN-21

ELSAYED, MOHAMMED, MD^{Mt}

Provider ID: 100020910028

330 OXFORD ST STE 106
CHULA VISTA, CA 91911

(619) 409-1802

Arabic, German, Spanish
Effective as of 01-AUG-20

FARRIS, REUBEN, MD^{Mt}

Provider ID: 100105788004

340 4TH AVE STE 2

CHULA VISTA, CA 91910

(619) 422-8338

Spanish

Effective as of 01-OCT-12

GARCIA, KARLA, MD^{Ft}

Provider ID: 100269760005

678 3RD AVE
CHULA VISTA, CA 91910

(619) 662-4100

Spanish

Teleservice

Effective as of 01-APR-23

GARCIA, KARLA, MD^{Ft}

Provider ID: 100269760002

678 3RD AVE
CHULA VISTA, CA 91910

(619) 662-4100

Spanish

Teleservice

Effective as of 01-MAR-16

JIMENEZ, KRYSTAL, MD^{Ft}

Provider ID: 100359300004

678 3RD AVE
CHULA VISTA, CA 91910

(619) 662-4100

Effective as of 01-JAN-21

MARTINEZ, ELADIO, MD^{Mt}

Provider ID: 100415320012

299 J ST
CHULA VISTA, CA 91910

(858) 554-1212

Spanish

Teleservice

Effective as of 01-MAY-24

MARTINEZ, ELADIO, MD^{Mt}

Provider ID: 100415320002

299 J ST
CHULA VISTA, CA 91910

(858) 554-1212

Spanish

Teleservice

Effective as of 01-OCT-23

MARTINEZ, ELADIO, MD^{Mt}

Provider ID: 100415320011

299 J ST
CHULA VISTA, CA 91910

(858) 554-1212

Spanish

Teleservice

Effective as of 01-APR-24

MARTINEZ, ELADIO, MD^{Mt}

Provider ID: 100415320005

299 J ST
CHULA VISTA, CA 91910

(858) 554-1212

Spanish

Teleservice

Effective as of 01-DEC-23

MATTHEWS, MERRITT, MD^{Mt}

Provider ID: 100021162015

752 MEDICAL CENTER CT
STE 210

CHULA VISTA, CA 91911

(619) 656-0206

Spanish, Tagalog

Effective as of 01-NOV-20

MATTHEWS, MERRITT, MD^{Mt}

Provider ID: 100021162019

752 MEDICAL CENTER CT
CHULA VISTA, CA 91911

(619) 656-0206

Spanish, Tagalog

Effective as of 01-FEB-21

MERRILL, SARAH, MD^{Ft}

Provider ID: 100214679020

678 3RD AVE
CHULA VISTA, CA 91910




(619) 662-4100

Spanish




Effective as of 01-JAN-21

C1. Lista de proveedores de la red
Proveedores de atención primaria




MONDRAGON, GUSTAVO, MD

^M
 Provider ID: 100177550031
 855 THIRD AVE
 STE 2230
 CHULA VISTA, CA 91911
 (619) 656-5252
 Spanish
 Effective as of 01-OCT-23




MONDRAGON, GUSTAVO, MD

^M
 Provider ID: 100177550016
 855 THIRD AVE
 STE 2230
 CHULA VISTA, CA 91911
 (619) 656-5252
 Spanish
 Effective as of 01-FEB-24




MONDRAGON, GUSTAVO, MD

^{Mt}
 Provider ID: 100177550027
 480 4TH AVE STE 500
 CHULA VISTA, CA 91910
 (619) 656-5252
 Spanish
 Effective as of 01-FEB-23

MONDRAGON, GUSTAVO, MD




^{Mt}
 Provider ID: 100177550028
 480 4TH AVE STE 500
 CHULA VISTA, CA 91910
 (619) 656-5252
 Spanish
 Effective as of 01-FEB-23

MOYA, MARY, MD^{F*}



Provider ID: 100099596009
 678 3RD AVE
 CHULA VISTA, CA 91910
 (619) 662-4100
 Spanish

Effective as of 01-APR-23



MOYA, MARY, MD^F

Provider ID: 100099596012
 678 3RD AVE
 CHULA VISTA, CA 91910
 (619) 662-4100
 Spanish
 Effective as of 01-JUN-24




NGUYEN, CARIE, MD^{Ft}

Provider ID: 100099766005
 678 3RD AVE
 CHULA VISTA, CA 91910
 (619) 662-4100
 Effective as of 01-NOV-20




NGUYEN, CARIE, MD^{Ft}

Provider ID: 100099766010
 678 3RD AVE
 CHULA VISTA, CA 91910
 (619) 662-4100
 Effective as of 01-APR-23


NOVENCIDO, JOSEPH, DO^{Mt}



Provider ID: 100244053020
 752 MEDICAL CENTER CT
 STE 210
 CHULA VISTA, CA 91911
 (619) 527-7700
 Spanish
 Effective as of 01-AUG-24

NOVENCIDO, JOSEPH, DO^{Mt}



Provider ID: 100244053017
 752 MEDICAL CENTER CT
 STE 210
 CHULA VISTA, CA 91911
 (619) 527-7700
 Spanish
 Effective as of 01-SEP-20

PALOMINO, MARY, MD^{Ft}



Provider ID: 100249271002
 678 3RD AVE

CHULA VISTA, CA 91910
 (619) 662-4100
 Spanish
 Effective as of 01-JUL-15




PATEL, PAAVAN, DO^M

Provider ID: 100413256007
 752 MEDICAL CENTER CT
 CHULA VISTA, CA 91911
 (619) 527-7700
 Effective as of 01-NOV-23




PATEL, PAAVAN, DO^M

Provider ID: 100413256011
 752 MEDICAL CENTER CT
 STE 210
 CHULA VISTA, CA 91911
 (619) 656-0206
 Effective as of 01-DEC-23




PIEROS, JANELLE, DO^{Ft}

Provider ID: 100220799004
 678 3RD AVE
 CHULA VISTA, CA 91910
 (619) 662-4100
 Spanish, Faroese
 Effective as of 01-OCT-15

RIZKALLAH, JEAN, MD^{Mt}

Provider ID: 100106136009
 450 4TH AVE STE 408
 CHULA VISTA, CA 91910
 (619) 691-1990
 French, Spanish
 Effective as of 01-MAR-15

RIZKALLAH, JEAN, MD^{Mt+}

Provider ID: 100106136010
 450 4TH AVE STE 408
 CHULA VISTA, CA 91910
 (619) 691-1990
 French, Spanish
 Effective as of 01-MAR-16

ROSADO, IVAN, MD^{Mt}

CI. Lista de proveedores de la red

Proveedores de atención primaria

Provider ID: 100365788004

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

☎ (619) 662-4100

Effective as of 01-FEB-21

ROSADO, IVAN, MD^{M†}

Provider ID: 100365788003

📍 1635 3RD AVE
CHULA VISTA, CA 91911

☎ (619) 662-4100

Effective as of 01-JAN-21

STILLWELL, CARLA, MD^{F†}

Provider ID: 100147691017

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

☎ (619) 427-3361

📱 Polish, Portuguese, Spanish

Effective as of 01-JAN-21

STILLWELL, CARLA, MD^{F†}

Provider ID: 100147691020

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

☎ (619) 427-3361

📱 Polish, Portuguese, Spanish

Effective as of 01-SEP-22

STILLWELL, CARLA, MD^{F†}

Provider ID: 100147691005

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

☎ (619) 427-3361

📱 Polish, Portuguese, Spanish

Effective as of 01-OCT-12

SWARTZ, JOHN, MD^{M†}

Provider ID: 100097829004

📍 678 3RD AVE
CHULA VISTA, CA 91910

☎ (619) 662-4100

📱 Spanish

Effective as of 01-JAN-14

TALAVERA, GREGORY, MD^M

Provider ID: 100334847006

📍 678 3RD AVE
CHULA VISTA, CA 91910

☎ (619) 662-4100

📱 Spanish

Teleservice

Effective as of 01-APR-23

TREJO, RAUL, MD^M

Provider ID: 100088864004

📍 678 3RD AVE
CHULA VISTA, CA 91910

☎ (619) 662-4100

📱 Spanish

Effective as of 01-JAN-14

VAZQUEZ-BOJORQUEZ,

ALEJANDRA, MD^F

Provider ID: 100391945011

📍 752 MEDICAL CENTER CT
STE 200

CHULA VISTA, CA 91911

☎ (858) 554-1212

📱 Spanish

Effective as of 01-DEC-22

VOURLITIS, MELISSA, DO^{F*}

Provider ID: 100090572020

📍 3302 BONITA RD
CHULA VISTA, CA 91910

☎ (858) 832-2500

Teleservice

Effective as of 01-NOV-23

WHITLEY, NICHOLAS, MD^{M†}

Provider ID: 100197848006

📍 678 3RD AVE
CHULA VISTA, CA 91910

☎ (619) 662-4100

📱 Spanish

Effective as of 01-JAN-21

FQHC

CHULA VISTA FAMILY HLTH CTR,

Provider ID: PG0025044035

📍 251 LANDIS AVE
CHULA VISTA, CA 91910

☎ (619) 515-2500

Effective as of 01-JAN-21

FAMILY HLTH CTR SAN

DIEGO-RICE FAM HC,

Provider ID: PG0082946004

📍 352 L ST
CHULA VISTA, CA 91911

☎ (619) 515-2325

Effective as of 01-JAN-21

SAN YSIDRO HEALTH CHULA VISTA, *†

Provider ID: PG0047560016

📍 678 3RD AVE
CHULA VISTA, CA 91910

☎ (619) 662-4100

Teleservice

Effective as of 01-JAN-21

SAN YSIDRO HEALTH SOUTH BAY LATINO RESEARCH CENTER,

Provider ID: PG0120846002

📍 780 BAY BLVD STE 200
CHULA VISTA, CA 91910

☎ (619) 662-4100

Effective as of 01-APR-23

SAN YSIDRO HEALTH SOUTH BAY PEDIATRICS,

Provider ID: PG0127835002

📍 280 E ST
CHULA VISTA, CA 91910

☎ (619) 662-4100

Teleservice

Effective as of 01-JUN-24

GENERAL PRACTICE

C1. Lista de proveedores de la red

Proveedores de atención primaria

CEPIN, MONICA, MD^{F†}

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

CEPIN, MONICA, MD^{F†}

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

FARRIS, REUBEN, MD^{M†}

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

GUEFEN, URI, MD^{M†}

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

GUEFEN, URI, MD^{M†}

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

GUEFEN, URI, MD^{M†}

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

TOLEDO-NADER, CAROLL, MD^{M†}

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

INTERNAL MEDICINE

BALDERAS-MAGALLANES, RODOLFO, MD^M

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

BALDERAS-MAGALLANES, RODOLFO, MD^M

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

BALDERAS-MAGALLANES, RODOLFO, MD^M

Provider ID: 100419155002
📍 678 THIRD AVE

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

BRACE, ELION, MD^{M†}

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

BRACE, ELION, MD^{M†}

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

CHEN, TSUH-YIN, MD^F

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

CHEN, TSUH-YIN, MD^F

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

DELAROSA, RENATO, MD^M

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

C1. Lista de proveedores de la red
Proveedores de atención primaria

Effective as of 01-SEP-22

DELAROSA, RENATO, MD^M

Provider ID: 100110262018

754 MEDICAL CENTER CT
STE 103

CHULA VISTA, CA 91911

(619) 397-5001

Spanish, Tagalog

Effective as of 01-JAN-21

DELAROSA, RENATO, MD^M

Provider ID: 100110262019

754 MEDICAL CENTER CT
STE 103

CHULA VISTA, CA 91911

(619) 397-5001

Spanish, Tagalog

Effective as of 01-JAN-21

DELAROSA, RENATO, MD^M

Provider ID: 100110262005

754 MEDICAL CENTER CT
STE 103

CHULA VISTA, CA 91911

(619) 397-5001

Spanish, Tagalog

Effective as of 01-FEB-18

HINOJOSA-VALENCIA,

ALEJANDRO, MD^M

Provider ID: 100108386019

629 THIRD AVE

CHULA VISTA, CA 91910

(619) 422-6158

Spanish

Effective as of 01-MAY-24

KAISEY, MUSHRIK, MD^{M†}

Provider ID: 100024815019

340 4TH AVE STE 9

CHULA VISTA, CA 91910

(619) 426-9731

Arabic, Spanish

Effective as of 01-JAN-21

KAISEY, MUSHRIK, MD^{M†}

Provider ID: 100024815007

340 4TH AVE STE 9

CHULA VISTA, CA 91910

(619) 426-9731

Arabic, Spanish

Effective as of 01-OCT-12

KAISEY, MUSHRIK, MD^{M†}

Provider ID: 100024815021

340 4TH AVE STE 9

CHULA VISTA, CA 91910

(619) 426-9731

Arabic, Spanish

Effective as of 01-SEP-22

KAISEY, MUSHRIK, MD^{M†}

Provider ID: 100024815009

340 4TH AVE STE 9

CHULA VISTA, CA 91910

(619) 426-9731

Arabic, Spanish

Effective as of 01-JAN-14

MAY, LOUIS, MD^{M†}

Provider ID: 100325305003

1061 TIERRA DEL REY STE
303 304 305

CHULA VISTA, CA 91910

(619) 662-4100

Spanish

Teleservice

Effective as of 01-JUN-21

OLIVER, DEANNA, MD^F

Provider ID: 100328564040

2436 FENTON ST STE
100-B

CHULA VISTA, CA 91914

(619) 264-1934

Spanish

Effective as of 01-NOV-23

OLIVER, DEANNA, MD^F

Provider ID: 100328564045

2436 FENTON ST STE
100-B

CHULA VISTA, CA 91914

(619) 264-1934

Spanish

Effective as of 01-MAR-24

OLIVER, DEANNA, MD^{F†}

Provider ID: 100328564043

1323 3RD AVE

CHULA VISTA, CA 91911

(619) 409-6900

Spanish

Effective as of 01-MAR-24

OLIVER, DEANNA, MD^{F†}

Provider ID: 100328564034

1323 3RD AVE

CHULA VISTA, CA 91911

(619) 409-6900

Spanish

Effective as of 01-SEP-22

OLIVER, DEANNA, MD^{F†}

Provider ID: 100328564027

1323 3RD AVE

CHULA VISTA, CA 91911

(619) 409-6900

Spanish

Effective as of 01-SEP-21

OLIVER, DEANNA, MD^{F†}

Provider ID: 100328564041

1323 3RD AVE

CHULA VISTA, CA 91911

(619) 409-6900

Spanish

Effective as of 01-NOV-23

PENA, JOSE, MD^{M†}

Provider ID: 100104432025

333 H ST STE 1065

CHULA VISTA, CA 91910

(619) 691-1766

C1. Lista de proveedores de la red

Proveedores de atención primaria

 Spanish


Effective as of 01-FEB-23

PENA, JOSE, MD^{M†}

Provider ID: 100104432024

 333 H ST STE 1065

CHULA VISTA, CA 91910

 (619) 691-1766

 Spanish


Effective as of 01-JUL-21

PENA, JOSE, MD^{M†}

Provider ID: 100104432022

 333 H ST STE 1065

CHULA VISTA, CA 91910


 (619) 691-1766

 Spanish


Effective as of 01-MAY-21

PENA, JOSE, MD^{M†}

Provider ID: 100104432023

 333 H ST STE 1065

CHULA VISTA, CA 91910

 (619) 691-1766

 Spanish

Effective as of 01-MAY-21


UWEDJOJEVWE, LETICIA, MD

F†

Provider ID: 100110303030

 340 4TH AVE STE 10

CHULA VISTA, CA 91910

 (619) 934-2215

 Spanish

Effective as of 01-JAN-21


UWEDJOJEVWE, LETICIA, MD

F†

Provider ID: 100110303015

 340 4TH AVE STE 10

CHULA VISTA, CA 91910

 (619) 934-2215

 Spanish

Effective as of 01-JAN-18


UWEDJOJEVWE, LETICIA, MD

F†

Provider ID: 100110303013

 340 4TH AVE STE 10

CHULA VISTA, CA 91910

 (619) 934-2215

 Spanish

Effective as of 01-DEC-17


UWEDJOJEVWE, LETICIA, MD

F†

Provider ID: 100110303031

 340 4TH AVE STE 10

CHULA VISTA, CA 91910

 (619) 934-2215


 Spanish

Effective as of 01-NOV-23


OBSTETRICS / GYNECOLOGY

ATIGA, SCHUBERT, MD^M

Provider ID: 100075572018

 678 3RD AVE

CHULA VISTA, CA 91910


 (619) 662-4100

 Spanish, Tagalog


Effective as of 01-AUG-24

KOBAYASHI, KAREN, DO^F

Provider ID: 100039829018

 678 3RD AVE

CHULA VISTA, CA 91910

 (619) 662-4100

Effective as of 01-AUG-24


PEDIATRICS

GARCIA, CARLOS, MD^{M†}

Provider ID: 100067783008

 1392 E PALOMAR ST STE
501

CHULA VISTA, CA 91913

 (619) 271-4059

 Spanish

Effective as of 01-JAN-14

INTERNAL MEDICINE


ZAKI, MICHELLE, DO^F

Provider ID: 100360975007

 3955 BEDFORD CANYON
RD

STE 103

CORONA, CA 92883

 (951) 293-4722

Teleservice

Effective as of 01-AUG-23


FAMILY PRACTICE

RIDGE, NEAL, DO^{M†}

Provider ID: 100356750005

 230 PROSPECT PL STE
340B

CORONADO, CA 92118

 (619) 522-4000


Effective as of 01-JAN-21


GAIKWAD, SHILPA, MD^{F††}

Provider ID: 100113091011

 32585 GOLDEN LANTERN
ST STE E

DANA POINT, CA 92629

 (877) 696-3622

 Hindi, Spanish

Effective as of 01-AUG-22


INTERNAL MEDICINE


PATHAK, RAJIV, MD^M

Provider ID: 100423996002

 32585 GOLDEN LANTERN
ST STE E

DANA POINT, CA 92629

 (949) 240-2555

 Gujarati, Hindi, Sindhi

Effective as of 01-MAR-24

C1. Lista de proveedores de la red
Proveedores de atención primaria

GENERAL PRACTICE

KREMER, ARNOLD, DO^{M†}

Provider ID: 100023664009

1349 CAMINO DEL MAR
STE B

DEL MAR, CA 92014

(858) 925-8233

French, Spanish

Teleservice

Effective as of 01-JAN-21

INTERNAL MEDICINE

ALAMAR, ALI, MD^M

Provider ID: 100106664017

2658 DEL MAR HEIGHTS
RD STE 504

DEL MAR, CA 92014

(619) 724-6644

Arabic, Spanish

Effective as of 01-JUL-24

FAMILY PRACTICE

ALMANSOUR, MUMTAZ, MD^{M†}

Provider ID: 100107873025

330 S MAGNOLIA AVE STE
101

EL CAJON, CA 92020

(619) 593-3007

Arabic, Spanish, Kurdish

Effective as of 01-JAN-21

ALMANSOUR, MUMTAZ, MD^{M†}

Provider ID: 100107873024

330 S MAGNOLIA AVE STE
101

EL CAJON, CA 92020

(619) 593-3007

Arabic, Spanish, Kurdish

Effective as of 01-JUL-22

ALMANSOUR, MUMTAZ, MD^{M†}

Provider ID: 100107873026

165 S 1ST ST
EL CAJON, CA 92019

(619) 312-0347

Arabic, Spanish, Kurdish

Effective as of 01-JAN-21

BEYENE, YEMISRACH, MD^{F†}

Provider ID: 100376573004

5442 SYCUAN RD
EL CAJON, CA 92019

(619) 445-0707

Amharic

Effective as of 01-SEP-22

GREEN, HANNAH, MD^F

Provider ID: 100403549002

855 E MADISON AVE
EL CAJON, CA 92020

(619) 440-2751

Spanish

Effective as of 01-APR-23

JALISI, NEJAT, MD^{F†}

Provider ID: 100114413020

1320 E MADISON AVE
EL CAJON, CA 92021

(619) 456-9800

Arabic, Farsi, Persian

Effective as of 01-SEP-22

JALISI, NEJAT, MD^{F†}

Provider ID: 100114413018

1320 E MADISON AVE
EL CAJON, CA 92021

(619) 456-9800

Arabic, Farsi, Persian

Effective as of 01-JAN-21

KASAWA, JOHN, MD^{M†}

Provider ID: 100039117021

875 EL CAJON BLVD
EL CAJON, CA 92020

(619) 662-4100

Arabic, Spanish, Chaldean
Neo-Aramaic

Teleservice

Effective as of 01-JAN-21

KASAWA, JOHN, MD^{M†}

Provider ID: 100039117023

875 EL CAJON BLVD
EL CAJON, CA 92020

(619) 662-4100

Arabic, Spanish, Chaldean
Neo-Aramaic

Teleservice

Effective as of 01-APR-23

MCHENRY, KATHRYN, DO^F

Provider ID: 100320650010

855 E MADISON AVE
EL CAJON, CA 92020

(619) 440-2751

Spanish

Effective as of 01-JAN-24

MOULD, KEVIN, MD^{M†}

Provider ID: 100112431013

855 E MADISON AVE
EL CAJON, CA 92020

(619) 440-2751

Effective as of 01-JAN-24

MOULD, KEVIN, MD^{M†}

Provider ID: 100112431012

855 E MADISON AVE
EL CAJON, CA 92020

(619) 440-2751

Effective as of 01-AUG-20

PUTRUS, RAMIZ, MD^M

Provider ID: 100348831004

183 S 1ST ST
EL CAJON, CA 92019

(619) 328-1335

Arabic




Effective as of 01-AUG-22

ROUEL, LINDA, MD^{F†}

Provider ID: 100259719024




C1. Lista de proveedores de la red

Proveedores de atención primaria

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




ROUEL, LINDA, MD^{F†}

Provider ID: 100259719007

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




ROUEL, LINDA, MD^{F†}

Provider ID: 100259719020

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




ROUEL, LINDA, MD^{F†}

Provider ID: 100259719021

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



ROUEL, LINDA, MD^{F†}

Provider ID: 100259719025

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



SALEM, RAMSEY, MD^{M†}

Provider ID: 100360207006

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

SAZEGAR, PAYAM, MD^{M†}

Provider ID: 100187888014



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

Teleservice

Effective as of 01-JUL-21

SAZEGAR, PAYAM, MD^{M†}

Provider ID: 100187888012


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

Teleservice

Effective as of 01-JUL-21

STONES, RACHEL, MD^F

Provider ID: 100387928010

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



 Spanish

Teleservice

Effective as of 01-MAY-22

STONES, RACHEL, MD^F

Provider ID: 100387928009

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



 Spanish

Teleservice

Effective as of 01-MAY-22

VOURLITIS, MELISSA, DO^{F*}

Provider ID: 100090572018

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



Teleservice

Effective as of 01-NOV-23

FQHC

CHASE AVENUE FAMILY HEALTH CTRS INC,



Provider ID: PG0025044040

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

Effective as of 01-JAN-21

FAMILY HLTH CTR SAN DIEGO-EL CAJON,



Provider ID: PG0084245003

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

Effective as of 01-JAN-21

LA MAESTRA CHC EL CAJON BROADWAY, †

Provider ID: PG0085229003

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

Teleservice

Effective as of 01-JAN-21

LA MAESTRA CHC-REA AVE,

Provider ID: PG0129902002

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

Effective as of 01-JUN-24

LA MAESTRA FAMILY CLINIC INC, †

Provider ID: PG0053396002

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

Teleservice

Effective as of 01-JAN-21

SAN YSIDRO HEALTH EL CAJON,

Provider ID: PG0111464002

CI. Lista de proveedores de la red

Proveedores de atención primaria

 875 EL CAJON BLVD
EL CAJON, CA 92020
 (619) 662-4100
Teleservice

Effective as of 01-JAN-21

GENERAL PRACTICE

MOOSAVI, MOHAMMAD, MD^{M†}

Provider ID: 100339082002



 343 E MAIN ST STE 102
EL CAJON, CA 92020
 (619) 447-6001
 Farsi

Effective as of 01-JUL-19

INTERNAL MEDICINE



AL-TAMEEMI, AHMED, MD^{M†}

Provider ID: 100338426004

 133 W MAIN ST STE 100
EL CAJON, CA 92020
 (619) 401-0404
Effective as of 01-NOV-20

AWDISHO, ALAN, DO^{M†}

Provider ID: 100381973002




 875 EL CAJON BLVD
EL CAJON, CA 92020
 (619) 662-4100
 Assyrian, Syriac

Teleservice

Effective as of 01-JAN-22

BENSON, JIMI, MD^{M†}



Provider ID: 100149523029

 1351 BROADWAY
EL CAJON, CA 92021
 (619) 383-6703
 Spanish, Vietnamese
Effective as of 01-APR-21

BENSON, JIMI, MD^{M†}




Provider ID: 100149523023

 1351 BROADWAY

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




BENSON, JIMI, MD^{M†}

Provider ID: 100149523028

 1351 BROADWAY
EL CAJON, CA 92021
 (619) 383-6703
 Spanish, Vietnamese
Effective as of 01-MAR-21




BENSON, JIMI, MD^{M†}

Provider ID: 100149523026

 1351 BROADWAY
EL CAJON, CA 92021
 (619) 383-6703
 Spanish, Vietnamese
Effective as of 01-JUN-21

BENSON, JIMI, MD^{M†}

Provider ID: 100149523031

 1351 BROADWAY
EL CAJON, CA 92021
 (619) 383-6703
 Spanish, Vietnamese
Effective as of 01-OCT-23

EL-GHONEIMY, AHMED, MD^{M†}




Provider ID: 100103500015

 165 S 1ST ST
EL CAJON, CA 92019
 (619) 312-0347
 Arabic, French, Italian
Teleservice

Effective as of 01-AUG-22




ELIAS, RAMIZ, MD^{M†}

Provider ID: 100105850047

 231 W MAIN ST FL 2
EL CAJON, CA 92020
 (619) 631-7300
 Spanish
Effective as of 01-SEP-22




JAHANPANAHA, FERESHTEH, MD^{F†}

Provider ID: 100076454021

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




JAHANPANAHA, FERESHTEH, MD^{F†}

Provider ID: 100076454017

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



JAHANPANAHA, FERESHTEH, MD^{F†}

Provider ID: 100076454007

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



KHANNA, POORNIMA, MD^F

Provider ID: 100334522011

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

MANSY, TAMARA, MD^F

Provider ID: 100363067008

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

MICHAEL, RAMI, MD^{M†}

Provider ID: 100341876009

 875 EL CAJON BLVD

CI. Lista de proveedores de la red

Proveedores de atención primaria

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

NASSIR, BASSAM, MD^{M†}
Provider ID: 100159191015
📄 875 EL CAJON BLVD
EL CAJON, CA 92020
☎ (619) 662-4100
📄 Arabic
Effective as of 01-MAY-21

NASSIR, BASSAM, MD^{M†}
Provider ID: 100159191011
📄 436 S MAGNOLIA AVE STE
101
EL CAJON, CA 92020
☎ (619) 662-4100
📄 Arabic
Effective as of 01-MAR-16

REDDY, ARJUN, MD^{M†}
Provider ID: 100050929006
📄 5442 SYCUAN RD
EL CAJON, CA 92019
☎ (619) 445-0707
📄 Spanish
Effective as of 01-JAN-21

ROUEL, WADI, MD^{M†}
Provider ID: 100246050015
📄 860 JAMACHA RD STE 107
EL CAJON, CA 92019
☎ (619) 456-9920
📄 Arabic, Assyrian, Spanish
Effective as of 01-SEP-22

ROUEL, WADI, MD^{M†}
Provider ID: 100246050016
📄 860 JAMACHA RD STE 107
EL CAJON, CA 92019
☎ (619) 456-9920

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

ROUEL, WADI, MD^{M†}
Provider ID: 100246050008
📄 860 JAMACHA RD STE 107
EL CAJON, CA 92019
☎ (619) 456-9920
📄 Arabic, Assyrian, Spanish
Effective as of 01-JAN-21

ROUEL, WADI, MD^{M†}
Provider ID: 100246050009
📄 860 JAMACHA RD STE 107
EL CAJON, CA 92019
☎ (619) 456-9920
📄 Arabic, Assyrian, Spanish
Effective as of 01-JAN-21

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

FAMILY PRACTICE

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

DUCK, CRAIG, MD^{M*}
Provider ID: 100086514008
📄 477 N EL CAMINO REAL
STE A306
ENCINITAS, CA 92024
☎ (760) 942-0118

Effective as of 01-SEP-21

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

KAKIMOTO, AMY, MD^{F†}
Provider ID: 100113530009
📄 477 N EL CAMINO REAL
STE A306
ENCINITAS, CA 92024
☎ (760) 942-0118
📄 French
Effective as of 01-SEP-21

MERCER, SCOTT, MD^{M*}
Provider ID: 100030142008
📄 320 SANTA FE DR STE 205
ENCINITAS, CA 92024
☎ (760) 944-8484
📄 Spanish
Teleservice
Effective as of 01-SEP-21

PAYNE, RICHARD, MD^{M†}
Provider ID: 100069305009
📄 477 N EL CAMINO REAL
STE A306
ENCINITAS, CA 92024
☎ (760) 942-0118
📄 Spanish
Effective as of 01-SEP-21

SEXTON, PERRY, MD^{M†}
Provider ID: 100099693003
📄 351 SANTA FE DR STE 101
ENCINITAS, CA 92024
☎ (760) 274-1385
📄 Spanish
Effective as of 01-FEB-11

C1. Lista de proveedores de la red

Proveedores de atención primaria

WILLIE, KADEN, DO^M

Provider ID: 100350661007

1130 2ND ST
ENCINITAS, CA 92024

(760) 736-6767

Portuguese

Effective as of 01-SEP-23

GENERAL PRACTICE

FARSAD, RAMIN, MD^M

Provider ID: 100028293009

477 N EL CAMINO REAL
STE A100

ENCINITAS, CA 92024

(760) 943-9111

Farsi, Persian, Turkish

Effective as of 01-JAN-21

INTERNAL MEDICINE

STEPHENSON, ROBERT, MD^{M†}

Provider ID: 100031646009

320 SANTA FE DR STE 303
ENCINITAS, CA 92024

(760) 943-6730

Spanish

Effective as of 01-SEP-21

TAGDIRI, KEVEN, MD^{M*}

Provider ID: 100064987002

4401 MANCHESTER AVE
STE 103

ENCINITAS, CA 92024

(858) 756-3021

Farsi, Spanish

Effective as of 01-MAR-03

FAMILY PRACTICE

AVILA, MICHAEL, MD^{M††}

Provider ID: 100369494002

460 N ELM ST
ESCONDIDO, CA 92025

(833) 867-4642

Effective as of 01-JUN-21

COX, VICTORIA, MD^{F†}

Provider ID: 100374049005

704 E GRAND AVE
ESCONDIDO, CA 92025

(619) 662-4100

Teleservice

Effective as of 01-AUG-22

DE ROTH, GEORGINE, MD^F

Provider ID: 100409222002

362 W MISSION AVE STE
105

ESCONDIDO, CA 92025

(760) 741-1224

French, Hungarian, Spanish

Effective as of 01-JUL-23

DE ROTH, GEORGINE, MD^F

Provider ID: 100409222004

362 W MISSION AVE STE
105

ESCONDIDO, CA 92025

(760) 741-1224

French, Hungarian, Spanish

Effective as of 01-AUG-23

DE ROTH, GEORGINE, MD^F

Provider ID: 100409222006

362 W MISSION AVE STE
105

ESCONDIDO, CA 92025

(760) 741-1224

French, Hungarian, Spanish

Effective as of 01-DEC-23

ESPARZA, SOPHIA, MD^F

Provider ID: 100402893002

488 E VALLEY PKWY STE
411

ESCONDIDO, CA 92025

(760) 466-9800

Spanish

Effective as of 01-MAR-23

HERNANDEZ RIVERA, JOSE DANIEL, MD^M

Provider ID: 100145294006

1121 E WASHINGTON AVE
ESCONDIDO, CA 92025

(760) 871-0606

Effective as of 01-MAY-24

KAUR, JATINDER, MD^F

Provider ID: 100315025010

460 N ELM ST
ESCONDIDO, CA 92025

(760) 520-8100

Hindi, Punjabi, Urdu

Effective as of 01-AUG-21

MCHENRY, KATHRYN, DO^{F†}

Provider ID: 100320650005

460 N ELM ST
ESCONDIDO, CA 92025

(760) 520-8100

Spanish

Effective as of 01-APR-21

MCHENRY, KATHRYN, DO^F

Provider ID: 100320650016

728 E VALLEY PKWY
ESCONDIDO, CA 92025

(760) 737-6900

Spanish

Effective as of 01-FEB-24

MCHENRY, KATHRYN, DO^{F†}

Provider ID: 100320650009

460 N ELM ST
ESCONDIDO, CA 92025

(760) 520-8100

Spanish

Effective as of 01-JAN-24

PATEL, JITENBHAI, MD^M

Provider ID: 100339325006

460 N ELM ST

C1. Lista de proveedores de la red

Proveedores de atención primaria

ESCONDIDO, CA 92025
☎ (760) 520-8100
Effective as of 01-JAN-24

PATEL, JITENBHAI, MD^M
Provider ID: 100339325007
📍 728 E VALLEY PKWY
ESCONDIDO, CA 92025
☎ (760) 737-6900
Effective as of 01-JAN-24

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

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

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

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

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

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

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

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

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

FQHC

ESCONDIDO FAMILY HEALTH

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

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

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

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

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

C1. Lista de proveedores de la red

Proveedores de atención primaria

Effective as of 01-JUL-22

PALOMAR FAMILY

COUNSELING SERVICES,

Provider ID: PG0125237002

1002 E GRAND AVE
ESCONDIDO, CA 92025

(760) 741-2660

Effective as of 01-DEC-23

SAN YSIDRO HEALTH

ESCONDIDO FAMILY

MEDICINE,

Provider ID: PG0094132003

704 E GRAND AVE
ESCONDIDO, CA 92025

(619) 662-4100

Teleservice

Effective as of 01-JUN-22

GENERAL PRACTICE

LOPEZ, IRMA, MD^{F†}

Provider ID: 100082249016

1035 E GRAND AVE STE 101
ESCONDIDO, CA 92025

(760) 480-4747

Spanish

Effective as of 01-JAN-21

INTERNAL MEDICINE

CARRERA, JORGE, MD^{M†}

Provider ID: 100075629010

704 E GRAND AVE
ESCONDIDO, CA 92025

(619) 662-4100

Spanish

Teleservice

Effective as of 01-FEB-22

CHEN, MARGARET, MD^{F†}

Provider ID: 100184661008

460 N ELM ST

ESCONDIDO, CA 92025

(760) 520-8100

Greek, Spanish

Effective as of 01-AUG-20

PEDIATRICS

STRAZICICH, KARLA, MD^F

Provider ID: 100080501007

426 N DATE ST
ESCONDIDO, CA 92025

(760) 690-5900

Spanish

Effective as of 01-JAN-24

FAMILY PRACTICE

CHRISTIE, PATRICIA, MD^F

Provider ID: 100407567004

1328 S MISSION RD
FALLBROOK, CA 92028

(760) 451-4720

Effective as of 01-AUG-23

DEEL, MARGARET, MD^{F†}

Provider ID: 100027747012

593 E ELDER ST STE B
FALLBROOK, CA 92028

(760) 723-5900

Spanish

Effective as of 01-AUG-20

DEEL, MARGARET, MD^{F†}

Provider ID: 100027747016

593 E ELDER ST STE B
FALLBROOK, CA 92028

(760) 723-5900

Spanish

Effective as of 01-MAR-24

DEEL, MARGARET, MD^{F†}

Provider ID: 100027747004

593 E ELDER ST STE B
FALLBROOK, CA 92028

(760) 723-5900

Spanish

Effective as of 01-OCT-14

DEEL, MARGARET, MD^{F†}

Provider ID: 100027747014

593 E ELDER ST STE B
FALLBROOK, CA 92028

(760) 723-5900

Spanish

Effective as of 01-NOV-20

DEEL, MARGARET, MD^{F†}

Provider ID: 100027747015

593 E ELDER ST STE B
FALLBROOK, CA 92028

(760) 723-5900

Spanish

Effective as of 01-SEP-22

MILLER, BRANDON, DO^{M†}

Provider ID: 100148562018

521 E ELDER ST STE 103
FALLBROOK, CA 92028

(760) 728-8344

Effective as of 01-NOV-20

MILLER, BRANDON, DO^{M†}

Provider ID: 100148562015

521 E ELDER ST STE 105
FALLBROOK, CA 92028

(760) 728-8344

Effective as of 01-DEC-18

FQHC

VISTA COMMUNITY CLINIC,

Provider ID: PG0072409011

321 E ALVARADO ST
FALLBROOK, CA 92028

(760) 723-6200

Teleservice

Effective as of 01-MAR-23

INTERNAL MEDICINE

CI. Lista de proveedores de la red

Proveedores de atención primaria

CVIJANOVIC, GORAN, MD^{M†}

Provider ID: 100370457002

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

Effective as of 01-JUN-21

STRUTZ, PETER, MD^M

Provider ID: 100092315007

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

📱 Spanish

Effective as of 01-SEP-21

FAMILY PRACTICE

ARMANIOUS, NANCY, MD^{F†}

Provider ID: 100379442002

📍 26795 PORTOLA PKWY
FOOTHILL RANCH, CA
92610

☎ (949) 829-9403

Effective as of 01-NOV-21

DECOCK, JAMES, MD^{M††}

Provider ID: 100051324014

📍 26795 PORTOLA PKWY
FOOTHILL RANCH, CA
92610

☎ (949) 829-9403

Effective as of 01-APR-15

INTERNAL MEDICINE

PATEL, BAKULKUMAR, MD^{M†}

Provider ID: 100034722006

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

☎ (949) 588-9293

📱 Gujarati, Hindi, Spanish

Effective as of 01-JAN-18

VALADEZ, JESUS, MD^{M†}

Provider ID: 100098540068

📍 26672 PORTOLA PKWY STE
104
FOOTHILL RANCH, CA
92610

☎ (949) 557-0750

📱 Spanish

Effective as of 01-JAN-21

FAMILY PRACTICE

ANDERSON, ALBERT, MD^{M†}

Provider ID: 100079441012

📍 1000 E LATHAM AVE STE G
HEMET, CA 92543

☎ (951) 391-0580

📱 Spanish

Teleservice

Effective as of 01-AUG-22

ASHRAF, HADIA, MD^{F†}

Provider ID: 100094934002

📍 903 E DEVONSHIRE AVE
STE F
HEMET, CA 92543

☎ (951) 929-1611

📱 Farsi, Hindi, Persian

Effective as of 01-OCT-98

ASHRAF, HADIA, MD^{F†}

Provider ID: 100094934008

📍 903 E DEVONSHIRE AVE
STE F
HEMET, CA 92543

☎ (951) 929-1611

📱 Farsi, Hindi, Persian

Effective as of 01-OCT-20

CARSON, MIA, MD^F

Provider ID: 100384377002

📍 949 CALHOUN PL STE G
HEMET, CA 92543

☎ (951) 765-5594

Effective as of 01-MAR-22

COMBS, MATTHEW, MD^{M†}

Provider ID: 100337168008

📍 3853 W STETSON AVE STE
200
HEMET, CA 92545

☎ (951) 225-6802

Effective as of 01-NOV-20

GANTA, SANYASI, MD^{M†}

Provider ID: 100113069011

📍 225 LAURSEN ST
HEMET, CA 92543

☎ (951) 925-6657

📱 Hindi, Spanish, Telugu

Effective as of 01-APR-21

GANTA, SANYASI, MD^{M†}

Provider ID: 100113069005

📍 225 LAURSEN ST
HEMET, CA 92543

☎ (951) 925-6657

📱 Hindi, Spanish, Telugu

Effective as of 01-JAN-17

GOHIL, RAJIT, MD^{M†}

Provider ID: 100391418005

📍 2390 E FLORIDA AVE STE
104
HEMET, CA 92544

☎ (951) 414-4011

Effective as of 01-OCT-22

GOHIL, RAJIT, MD^{M†}

Provider ID: 100391418004

📍 2390 E FLORIDA AVE STE
104
HEMET, CA 92544

☎ (951) 414-4011

Effective as of 01-OCT-22

HARRISON, AMY, MD^F

Provider ID: 100410706005

📍 2390 E FLORIDA AVE STE

C1. Lista de proveedores de la red

Proveedores de atención primaria

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

HARRISON, AMY, MD^F
Provider ID: 100410706006

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

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

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

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

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

HUNT, TYRELLE, MD^F
Provider ID: 100417653002

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

MEHARDA, SANJIWANI, MD^F
Provider ID: 100327486019

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

OBRIEN, KATHARINE, DO^{F†}

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

SANDHU, BASANT, MD^M
Provider ID: 100315195009

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

YUN, JONATHAN, DO^{M†}

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

YUN, JONATHAN, DO^{M†}

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

GENERAL PRACTICE

EL-HENAWI, IGLAL, MD^F

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

EL-HENAWI, IGLAL, MD^F

Provider ID: 100107885003
📄 4020 W FLORIDA AVE

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

EL-HENAWI, IGLAL, MD^F

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

INTERNAL MEDICINE

BARVE, PRANAV, MD^{M†}

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

BARVE, PRANAV, MD^{M†}

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

BATIN, FRANCES, MD^F

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

CHING, TSUNG, MD^{M†}

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

C1. Lista de proveedores de la red

Proveedores de atención primaria

Effective as of 01-DEC-21

CHODAY, PRITHI, MD^F

Provider ID: 100419896004

📍 1030 E FLORIDA AVE
HEMET, CA 92543

☎ (833) 867-4642

🗂 Telugu

Effective as of 01-DEC-23

CHODAY, PRITHI, MD^F

Provider ID: 100419896003

📍 422 N SAN JACINTO ST STE
A
HEMET, CA 92543

☎ (833) 867-4642

🗂 Telugu

Effective as of 01-DEC-23

HUSSAIN, ABID, MD^{M†}

Provider ID: 100108449003

📍 255 N GILBERT ST BLDG B4
HEMET, CA 92543

☎ (951) 652-0060

🗂 Punjabi, Spanish, Urdu

Teleservice

Effective as of 01-SEP-15

MATHIAS, HERMAN, MD^{M†}

Provider ID: 100037216007

📍 391 N SAN JACINTO ST
HEMET, CA 92543

☎ (951) 929-6003

🗂 Hindi

Effective as of 01-AUG-95

PATEL, REENABEN, MD^F

Provider ID: 100380064003

📍 2390 E FLORIDA AVE STE
101
HEMET, CA 92544

☎ (951) 925-1449

Effective as of 01-JAN-22

POSSAGNOLI, ISABELLA, MD^F

Provider ID: 100435063002

📍 603 E LATHAM AVE
HEMET, CA 92543

☎ (951) 502-3500

🗂 Portuguese, Spanish

Effective as of 01-AUG-24

RAJA, MANIKANDA, MD^{M†}

Provider ID: 100113362004

📍 1701 E FLORIDA AVE
HEMET, CA 92544

☎ (951) 658-4486

🗂 Tamil, Telugu

Effective as of 01-AUG-02

SALEH, HANA, MD^{F†}

Provider ID: 100246071008

📍 391 N SAN JACINTO ST
HEMET, CA 92543

☎ (951) 533-5123

🗂 Arabic, Spanish

Effective as of 01-APR-24

SALEH, HANA, MD^{F†}

Provider ID: 100246071002

📍 391 N SAN JACINTO ST
HEMET, CA 92543

☎ (951) 533-5123

🗂 Arabic, Spanish

Effective as of 01-SEP-15

SALEH, HANA, MD^{F†}

Provider ID: 100246071007

📍 391 N SAN JACINTO ST
HEMET, CA 92543

☎ (951) 533-5123

🗂 Arabic, Spanish

Effective as of 01-OCT-23

SHALABY, MOHSEN, MD^{M†}

Provider ID: 100306246002

📍 1023 E FLORIDA AVE
HEMET, CA 92543

☎ (951) 599-8403

🗂 Arabic

Effective as of 01-MAR-17

PEDIATRICS

SEYED, KAZEM, MD^{M†}

Provider ID: 100028573003

📍 750 E LATHAM AVE STE 1
HEMET, CA 92543

☎ (951) 766-6696

🗂 Persian

Effective as of 01-OCT-10

SEYED, KAZEM, MD^{M†}

Provider ID: 100028573009

📍 750 E LATHAM AVE STE 1
HEMET, CA 92543

☎ (951) 766-6696

🗂 Persian

Effective as of 01-AUG-20

FQHC

IMPERIAL BEACH HEALTH CENTER,

Provider ID: PG0005455007

📍 949 PALM AVE
IMPERIAL BEACH, CA 91932

☎ (619) 429-3733

Teleservice

Effective as of 01-JUL-22

FAMILY PRACTICE

CHANG, ALBERT, MD^{M†}

Provider ID: 100086039015

📍 15825 LAGUNA CANYON
RD STE 202
IRVINE, CA 92618

☎ (949) 585-9870

🗂 Korean, Spanish

Effective as of 01-JAN-17

CHANG, ALBERT, MD^{M†}

Provider ID: 100086039014

📍 15825 LAGUNA CANYON

C1. Lista de proveedores de la red

Proveedores de atención primaria

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

CHANG, ALBERT, MD^{M†}

Provider ID: 100086039013
📄 15825 LAGUNA CANYON
RD STE 202
IRVINE, CA 92618
☎ (949) 585-9870
📄 Korean, Spanish
Effective as of 01-JAN-17

CHANG, ALBERT, MD^M

Provider ID: 100086039033
📄 15825 LAGUNA CANYON
RD STE 104
IRVINE, CA 92618
☎ (949) 585-9870
📄 Korean, Spanish
Effective as of 01-OCT-23

HUANG, JANET, DO^{F†}

Provider ID: 100007711005
📄 18 ENDEAVOR STE 203
IRVINE, CA 92618
☎ (949) 733-0168
📄 Chinese, Mandarin,
Taiwanese
Effective as of 01-JUL-20

MACAULEY, TODD, DO^{M†}

Provider ID: 100337131058
📄 8607 IRVINE CENTER DR
IRVINE, CA 92618
☎ (949) 557-0600
Effective as of 01-JAN-21

SAAM, SHIDA, DO^{F††}

Provider ID: 100093095035
📄 16300 SAND CANYON AVE
STE 602
IRVINE, CA 92618

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

SAAM, SHIDA, DO^{F†}

Provider ID: 100093095030
📄 16300 SAND CANYON AVE
STE 602
IRVINE, CA 92618
☎ (800) 684-0717
📄 Farsi, Persian, Spanish
Effective as of 01-JUN-19

SAAM, SHIDA, DO^{F†}

Provider ID: 100093095026
📄 16300 SAND CANYON AVE
STE 602
IRVINE, CA 92618
☎ (800) 684-0717
📄 Farsi, Persian, Spanish
Effective as of 01-JUN-19

SAAM, SHIDA, DO^{F†}

Provider ID: 100093095027
📄 16300 SAND CANYON AVE
STE 602
IRVINE, CA 92618
☎ (800) 684-0717
📄 Farsi, Persian, Spanish
Effective as of 01-JUN-19

SAAM, SHIDA, DO^{F†}

Provider ID: 100093095029
📄 16300 SAND CANYON AVE
STE 602
IRVINE, CA 92618
☎ (800) 684-0717
📄 Farsi, Persian, Spanish
Effective as of 01-JUN-19

SAAM, SHIDA, DO^{F†}

Provider ID: 100093095032
📄 16300 SAND CANYON AVE
STE 602
IRVINE, CA 92618

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

YACOOB, MARLENE, MD^F

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

YACOOB, MARLENE, MD^F

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

GENERAL PRACTICE

ZAHEDI, MARCO, MD^M

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

ZAHEDI, MARCO, MD^M

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



INTERNAL MEDICINE

COUNCELBAUM, NANCY, MD

^{F††}
Provider ID: 100061502007




C1. Lista de proveedores de la red

Proveedores de atención primaria

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




HUANG, CHARLIE, DO^{M*}

Provider ID: 100325520007

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




POURBABAK, SAM, MD^M

Provider ID: 100114265021

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




POURBABAK, SAM, MD^M

Provider ID: 100114265020

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

RASHID, AHSAN, MD^{M†}


Provider ID: 100036910003

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

SERAG, RANDA, MD^{F††}




Provider ID: 100136797017

 16300 SAND CANYON AVE

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




SHUNE, HONG, MD^{F†}

Provider ID: 100196968014

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

SUN, YEMING, MD^{F*}

Provider ID: 100022013010

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

FAMILY PRACTICE

DEMBO-SMEATON, ELENA, MD^F

Provider ID: 100112789012

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

DEMBO-SMEATON, ELENA, MD^F

Provider ID: 100112789011

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

Effective as of 01-JUL-21


DEMBO-SMEATON, ELENA, MD^F

Provider ID: 100112789010

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



GOLD, MARGARET, MD^M

Provider ID: 100231182008

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



GOLD, MARGARET, MD^M

Provider ID: 100231182007

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


GOLD, MARGARET, MD^M

Provider ID: 100231182005

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



VAZQUEZ-BOJORQUEZ, ALEJANDRA, MD^F

Provider ID: 100391945014

 9850 GENESEE AVE STE
320
LA JOLLA, CA 92037




C1. Lista de proveedores de la red

Proveedores de atención primaria



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

INTERNAL MEDICINE

AL-SALEH, YADANI, MD^{F†}



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

CAMACHO, MARIAM, MD^{F*}

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




FAMILY PRACTICE

PATEL, HEMANSHU, MD^M

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

INTERNAL MEDICINE


ALAMAR, ALI, MD^{M†}


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

NGUYEN, DAT, MD^M



Provider ID: 100047564021

 5565 GROSSMONT CENTER DR STE 229
LA MESA, CA 91942




 (858) 349-3760

 Spanish, Vietnamese
Effective as of 01-MAR-24




PATEL, HEMANSHU, MD^M

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




SHAHBAZ, MAJID, MD^M

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

SHAHBAZ, MAJID, MD^M

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


SHAHBAZ, MAJID, MD^M

Provider ID: 100090790020
 8851 CENTER DR STE 408
LA MESA, CA 91942
 (619) 583-1174
 Farsi, Persian, Tagalog
Teleservice
Effective as of 01-MAR-23

SHAHBAZ, MAJID, MD^M

Provider ID: 100090790008

 8851 CENTER DR STE 408
LA MESA, CA 91942




 (619) 583-1174

 Farsi, Persian, Tagalog
Teleservice

Effective as of 01-MAR-18




FAMILY PRACTICE

WAINWRIGHT, MITCHELL, MD^M

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



INTERNAL MEDICINE

ELSANADI, RAEF, MD^{M††}



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

FAMILY PRACTICE

PANITCH, JILL, MD^{F*}

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

SZYMANSKI, JARED, DO^M

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

C1. Lista de proveedores de la red
Proveedores de atención primaria

INTERNAL MEDICINE

DEWING, JANNE, MD^F

Provider ID: 100105400007
 31862 COAST HWY STE 200
 LAGUNA BEACH, CA 92651
 (949) 340-5454
 Effective as of 01-AUG-18

FAMILY PRACTICE

CHANG, MICHAEL, DO^{M†}

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

CHANG, MICHAEL, DO^{M††}

Provider ID: 100294076007
 26538 MOULTON PKWY
 STE 38E
 LAGUNA HILLS, CA 92653
 (949) 448-0656
 Effective as of 01-AUG-18

FOSTER, MARK, MD^M

Provider ID: 100108418005
 24411 HEALTH CENTER DR
 STE 460
 LAGUNA HILLS, CA 92653
 (949) 373-7799
 Effective as of 01-JAN-18

GEE, KELLY, DO^{F†}

Provider ID: 100358387006
 23521 PASEO DE VALENCIA
 STE 311
 LAGUNA HILLS, CA 92653
 (949) 305-2660
 Effective as of 01-FEB-22

HICKS, TOMMY, MD^{M††}

Provider ID: 100093348004

23521 PASEO DE VALENCIA
 STE 108
 LAGUNA HILLS, CA 92653
 (949) 588-7262
 Effective as of 01-JAN-18

HUYNH, JUDY, DO^{F†}

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

HUYNH, JUDY, DO^{F†}

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

IERARDI, STEPHEN, MD^M

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

IERARDI, STEPHEN, MD^M

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

KHOSHREZA, HALEH, MD^{F†}

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

LEISH, BRIAN, MD^M

Provider ID: 100103119055
 24411 HEALTH CENTER DR
 STE 460
 LAGUNA HILLS, CA 92653
 (949) 373-7799
 Effective as of 01-JAN-18

MANDEL, RONALD, DO^{M†}

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

MOHINDRA, SUCHITRA, MD^{F†}

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

MUNIB, SABEEN, MD^{F†}

Provider ID: 100168805025
 23181 LA CADENA DR STE
 101
 LAGUNA HILLS, CA 92653
 (949) 647-5234
 Hindi, Punjabi, Urdu
 Effective as of 01-FEB-20

MUNIB, SABEEN, MD^{F†}

Provider ID: 100168805030
 23181 LA CADENA DR STE
 101
 LAGUNA HILLS, CA 92653
 (949) 647-5234
 Hindi, Punjabi, Urdu
 Effective as of 01-MAR-21

MUNIB, SABEEN, MD^{F†}

Provider ID: 100168805028

C1. Lista de proveedores de la red

Proveedores de atención primaria

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

RIVERO, JORGE, MD^M

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

SY, JOAN, DO^F

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

SY, JOAN, DO^F

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

YACOOB, MARLENE, MD^F

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

YACOOB, MARLENE, MD^F

Provider ID: 100010305019
23141 MOULTON PKWY STE

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

GENERAL PRACTICE

COOKE, LAWRENCE, MD^{M*}

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

HARMS, MONICA, MD^F

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

HARMS, MONICA, MD^F

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

NAPOLI, LYNN, MD^F

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

NAPOLI, LYNN, MD^F

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

INTERNAL MEDICINE

AFSHAR, YAMA, DO^M

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

ARTHUR, KRISTINE, MD^{F†}

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

ARTHUR, KRISTINE, MD^{F†}

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

ASHTARI, MOZHGAN, MD^{F†}

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

BASEN, ANGELA, MD^F

C1. Lista de proveedores de la red

Proveedores de atención primaria

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

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

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

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

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

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

📄 Spanish
Effective as of 01-JAN-14

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

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

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

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

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

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

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



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

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




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

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




C1. Lista de proveedores de la red
Proveedores de atención primaria

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




JAVAHERI, MANIJEH, MD^{F†}

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




KAURA, MAYA, MD^F

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


LEW, HOMER, DO^{M†}


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

LIN, CHI WHEI, MD^{M*}




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

LO, ALAN, MD^M




Provider ID: 100022892004
 25401 CABOT RD STE 101

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




**MORCOS-CLARK, NERMINE,
 MD^{F†}**

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




PACE, SARAH, MD^{F†}

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

POURBABAK, SAM, MD^M




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

POURBABAK, SAM, MD^M




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

SADEGHI TARI, MAHYAR, MD^{F†}




Provider ID: 100107614005

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




SIU, CURTIS, MD^{M*}

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



STERNS, DANIEL, MD^M

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


TRAN, CECILIA, MD^{F*}

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

ZAMANI, MAZIAR, MD^{M*}

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

ZAREMBA, MARK, MD^{M†}

Provider ID: 100021573002
 25401 CABOT RD STE 107

C1. Lista de proveedores de la red
Proveedores de atención primaria

LAGUNA HILLS, CA 92653
 ☎ (949) 273-8085
 Effective as of 01-JAN-13

ZAREMBA, MARK, MD^{M†}

Provider ID: 100021573005
 📄 25401 CABOT RD STE 107
 LAGUNA HILLS, CA 92653
 ☎ (949) 273-8085
 Effective as of 01-APR-18

FAMILY PRACTICE

BEDRAN, ASAD, DO^{M†}

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

BELLO, JUSTINE, MD^{F†}

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

BREWER, SARAH, MD^{F†}

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

FU, KAREN, MD^{F†}

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

LEE, SUSAN, MD^{F†}

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

INTERNAL MEDICINE

BILAL, BASSAM, MD^{M†}

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

KELLOGG, CHERYL, MD^F

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

MORTAJI, PARISA, MD^F

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

PEDIATRICS

PATEL, JYOTINKUMAR, MD^{M†}

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

***CERTIFIED NURSE
 PRACTITIONER***

MOY, TALAR, NPF^F

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

FAMILY PRACTICE

HAUSER, BRIAN, MD^M

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

VANVRANKEN, BRUCE, MD^M

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

INTERNAL MEDICINE

ROKSHADFAR, SAGHI, MD^{F†}

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

ROKSHADFAR, SAGHI, MD^{F†}

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

C1. Lista de proveedores de la red
Proveedores de atención primaria

SIEGFRIED, TRACY, MD^F
 Provider ID: 100047456004
 24331 EL TORO RD STE 330
 LAGUNA WOODS, CA
 92637
 (949) 716-0833
 Effective as of 01-JAN-18

FAMILY PRACTICE

JACKSON, ANITA, MD^{F†}
 Provider ID: 100060861006
 31736 MISSION TRL STE G
 LAKE ELSINORE, CA 92530
 (951) 674-1505
 Tagalog
 Effective as of 01-NOV-11

MONARREZ, DAVID, MD^{M†}
 Provider ID: 100102954018
 31739 RIVERSIDE DR STE A1
 LAKE ELSINORE, CA 92530
 (951) 245-0505
 Spanish
 Effective as of 01-AUG-24

TORRES, REBECCA, MD^{F†}
 Provider ID: 100187138015
 31946 MISSION TRL STE A
 LAKE ELSINORE, CA 92530
 (951) 471-1800
 Korean, Mandarin, Spanish
 Effective as of 01-DEC-14

TORRES, REBECCA, MD^{F†}
 Provider ID: 100187138016
 31946 MISSION TRL STE A
 LAKE ELSINORE, CA 92530
 (951) 471-1800
 Korean, Mandarin, Spanish
 Effective as of 01-DEC-14

GENERAL PRACTICE

ASPREC, JOSEPH, MD^M

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

MONARREZ, DAVID, MD^{M†}
 Provider ID: 100102954016
 31739 RIVERSIDE DR STE A1
 LAKE ELSINORE, CA 92530
 (951) 245-0505
 Spanish
 Effective as of 01-NOV-20

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

OLIVEIRA, THOMAS, DO^{M†}
 Provider ID: 100088827008
 506 W GRAHAM AVE STE
 107
 LAKE ELSINORE, CA 92530
 (951) 471-5116
 Italian, Spanish
 Effective as of 01-MAY-24

OLIVEIRA, THOMAS, DO^{M†}
 Provider ID: 100088827009
 506 W GRAHAM AVE STE
 107
 LAKE ELSINORE, CA 92530
 (951) 471-5116
 Italian, Spanish
 Effective as of 01-JUN-24

OLIVEIRA, THOMAS, DO^{M†}
 Provider ID: 100088827007
 506 W GRAHAM AVE STE

107
 LAKE ELSINORE, CA 92530
 (951) 471-5116
 Italian, Spanish
 Effective as of 01-APR-21

INTERNAL MEDICINE

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

SAADAT, FARID, MD^{M†}
 Provider ID: 100013848002
 425 DIAMOND DR STE 102
 LAKE ELSINORE, CA 92530
 (951) 471-5711
 Farsi, Persian, Faroese
 Effective as of 01-JUN-14

FAMILY PRACTICE

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

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

INTERNAL MEDICINE

CI. Lista de proveedores de la red
Proveedores de atención primaria

GOVASHIRI, REZA, MD^{M†}

Provider ID: 100047181008

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

MUY, MADINETH, MD^{F†}

Provider ID: 100082949013

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

FAMILY PRACTICE

MCHENRY, KATHRYN, DO^F

Provider ID: 100320650014

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

PHAM, CHRISTINE, DO^F

Provider ID: 100397531003

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

FQHC

NEIGHBORHOOD

HEALTHCARE LAKESIDE, *

Provider ID: PG0024990051

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

INTERNAL MEDICINE

MCFARLAND, NATHAN, MD^M

Provider ID: 100216268004

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

MCFARLAND, NATHAN, MD^M

Provider ID: 100216268007

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

FQHC

LEMON GROVE FAMILY HEALTH CENTER,

Provider ID: PG0085568003

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

FAMILY PRACTICE

CAMARILLO, DANIEL, MD^{M†}

Provider ID: 100110735009

30420 HAUN RD
 MENIFEE, CA 92584
 (951) 676-4193
 Spanish
 Effective as of 01-OCT-15

CAMARILLO, DANIEL, MD^{M†}

Provider ID: 100110735017

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

Spanish

Effective as of 01-NOV-20

GOHIL, RAJIT, MD^M

Provider ID: 100391418014

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

GOHIL, RAJIT, MD^M

Provider ID: 100391418013

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

HARRISON, AMY, MD^F

Provider ID: 100410706003

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

HARRISON, AMY, MD^F

Provider ID: 100410706004

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

MADRID, RICHARD, MD^{M†}

Provider ID: 100077741007

30420 HAUN RD
 MENIFEE, CA 92584
 (951) 676-4193
 Teleservice
 Effective as of 01-JAN-16

SANDHU, BASANT, MD^M

Provider ID: 100315195011

26926 CHERRY HILLS
 BLVD STE B

CI. Lista de proveedores de la red

Proveedores de atención primaria

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

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

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

ZURITA, DANIELA, MD^{F†}
Provider ID: 100396617009
📄 26926 CHERRY HILLS
BLVD STE C
MENIFEE, CA 92586
☎ (951) 216-2200
📄 Spanish
Effective as of 01-DEC-22

INTERNAL MEDICINE

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

BARVE, PRANAV, MD^M
Provider ID: 100318437034
📄 29826 HAUN RD STE 200

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

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

GONZALES, PATRICK, MD^{M†}
Provider ID: 100109580005
📄 29798 HAUN RD STE 106
MENIFEE, CA 92586
☎ (951) 301-3588
📄 Tagalog
Effective as of 01-SEP-10

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

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

GONZALES, PATRICK, MD^{M†}
Provider ID: 100109580006
📄 29798 HAUN RD STE 106
MENIFEE, CA 92586
☎ (951) 301-3588
📄 Tagalog
Effective as of 01-JUN-17

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

MARTINEZ, JORGE, MD^{M†}
Provider ID: 100096235012
📄 29826 HAUN RD STE 201
MENIFEE, CA 92586
☎ (951) 301-1100
📄 Spanish
Effective as of 01-JUN-22

FAMILY PRACTICE

**BALL-ZONDERVAN, MONICA,
MD^{F†}**
Provider ID: 100294482047
📄 26732 CROWN VALLEY
PKWY STE 170
MISSION VIEJO, CA 92691
☎ (949) 364-7246
Effective as of 01-SEP-19

BARE, IAN, MD^{M†}
Provider ID: 100110113009
📄 30492 GATEWAY PL STE
110
MISSION VIEJO, CA 92694
☎ (949) 542-7700
📄 Spanish
Effective as of 01-JUN-21

BARE, IAN, MD^{M†}
Provider ID: 100110113017
📄 30492 GATEWAY PL STE
110
MISSION VIEJO, CA 92694
☎ (949) 542-7700
📄 Spanish
Effective as of 01-JUN-21

BASICH, CANDACE, MD^{F†}

C1. Lista de proveedores de la red

Proveedores de atención primaria

Provider ID: 100073084010

📍 30707 GATEWAY PL STE A2
MISSION VIEJO, CA 92694

☎ (657) 241-8435

🗂 Spanish

Effective as of 01-DEC-21

BASICH, CANDACE, MD^{F†}

Provider ID: 100073084008

📍 30707 GATEWAY PL STE A2
MISSION VIEJO, CA 92694

☎ (657) 241-8435

🗂 Spanish

Effective as of 01-SEP-18

BISUNA, BLANCA, MD^{F†}

Provider ID: 100199166013

📍 26732 CROWN VALLEY
PKWY STE 170
MISSION VIEJO, CA 92691

☎ (949) 364-7246

Effective as of 01-MAR-16

CHO, ANTHONY, MD^{M†}

Provider ID: 100326978002

📍 30707 GATEWAY PL STE A2
MISSION VIEJO, CA 92694

☎ (657) 241-8601

Effective as of 01-APR-18

DELNITZ, DANUTA, MD^F

Provider ID: 100109319011

📍 26691 PLAZA STE 140
MISSION VIEJO, CA 92691

☎ (949) 240-8555

🗂 Polish, Spanish

Effective as of 01-APR-19

DELNITZ, DANUTA, MD^F

Provider ID: 100109319012

📍 26691 PLAZA STE 140
MISSION VIEJO, CA 92691

☎ (949) 240-8555

🗂 Polish, Spanish

Effective as of 01-APR-19

ENDSLEY, DELVIN, MD^M

Provider ID: 100413682015

📍 27725 SANTA MARGARITA
PKWY STE 101
MISSION VIEJO, CA 92691

☎ (949) 270-2100

🗂 Spanish

Effective as of 01-MAR-24

FIGHTLIN, STEFANIE, DO^{F†}

Provider ID: 100086847010

📍 26991 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691

☎ (949) 582-5430

🗂 Spanish

Effective as of 01-JAN-18

FLORES, TERESA, MD^{F†}

Provider ID: 100207722054

📍 27725 SANTA MARGARITA
PKWY STE 101
MISSION VIEJO, CA 92691

☎ (949) 270-2100

🗂 Spanish

Effective as of 01-DEC-19

FLORES, TERESA, MD^{F†}

Provider ID: 100207722053

📍 27725 SANTA MARGARITA
PKWY STE 101
MISSION VIEJO, CA 92691

☎ (949) 270-2100

🗂 Spanish

Effective as of 01-DEC-19

GEBHARD, KARL, MD^M

Provider ID: 100071312016

📍 26922 OSO PKWY STE 380
MISSION VIEJO, CA 92691

☎ (949) 305-0110

Effective as of 01-AUG-24

GEBHARD, KARL, MD^M

Provider ID: 100071312012

📍 26922 OSO PKWY STE 380
MISSION VIEJO, CA 92691

☎ (949) 305-0110

Effective as of 01-JUN-19

GEBHARD, KARL, MD^M

Provider ID: 100071312013

📍 26922 OSO PKWY STE 380
MISSION VIEJO, CA 92691

☎ (949) 305-0110

Effective as of 01-JUN-19

GEBHARD, KARL, MD^M

Provider ID: 100071312010

📍 26922 OSO PKWY STE 380
MISSION VIEJO, CA 92691

☎ (949) 305-0110

Effective as of 01-JAN-18

GEBHARD, KARL, MD^M

Provider ID: 100071312004

📍 26922 OSO PKWY STE 380
MISSION VIEJO, CA 92691

☎ (949) 305-0110

Effective as of 01-MAR-16

GONZALEZ, DAVID, MD^{M†}

Provider ID: 100096155006

📍 26732 CROWN VALLEY
PKWY STE 170
MISSION VIEJO, CA 92691

☎ (949) 364-7246

Effective as of 01-OCT-18

KUMAR, NISHCHAL, MD^{M†}

Provider ID: 100224908011

📍 23512 MADERO
MISSION VIEJO, CA 92691

☎ (949) 583-1600

🗂 Hindi, Punjabi, Spanish

Effective as of 01-NOV-19

KUMAR, NISHCHAL, MD^{M†}

Provider ID: 100224908013

📍 23512 MADERO

C1. Lista de proveedores de la red

Proveedores de atención primaria

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

LY, PHUONG, MD^{M†}

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

PEDARSANI, MARJAN, DO^{F†}

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

PEDARSANI, MARJAN, DO^{F†}

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

RUTTEN, SONIA, MD^F

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

SAMOORI, RAMA, DO^{F†}

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

Effective as of 01-SEP-15

SHOAPOUR, CAMELLIA, MD^F

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

THOMAS, CHERYL, MD^F

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

THOMAS, CHERYL, MD^F

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

THOMAS, CHERYL, MD^F

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

THOMAS, CHERYL, MD^F

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

THOMAS, CHERYL, MD^F

Provider ID: 100043536023

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

THOMAS, CHERYL, MD^F

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

YAZDANSHENAS, MARYAM, MD^{F†}

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

GENERAL PRACTICE

JANISZEWSKI, EVA, MD^F

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

INTERNAL MEDICINE

BADIE, MEHRNAZ, MD^{F†}

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

CI. Lista de proveedores de la red

Proveedores de atención primaria

BENNER, ERIC, MD^{M††}

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

CHANG, HELEN, MD^{F††}

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

COVARRUBIAS, GRACIA, MD^{F††}

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

COVARRUBIAS, GRACIA, MD^{F††}

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

LU, LESLIE, MD^{M††}

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

MAYET, KHADIJA, MD^{F†}

Provider ID: 100062204006
📍 26800 CROWN VALLEY

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

MCMILLAN, CATHERINE, DO^F

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

NABILI, SIAMAK, MD^M

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

NABILI, SIAMAK, MD^M

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

NGUYEN, VY, MD^{F††}

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

NOORIAN, NADER, MD^{M††}

Provider ID: 100052175006
📍 26800 CROWN VALLEY
PKWY STE 305

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

ROKSHADFAR, SAGHI, MD^{F†}

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

ROKSHADFAR, SAGHI, MD^{F†}

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

SELIGSOHN, BRUCE, MD^{M*}

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

SERGEYEVA, YELENA, MD^F



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

SERGEYEVA, YELENA, MD^F

Provider ID: 100403248007
📍 27800 MEDICAL CENTER
RD STE 110
MISSION VIEJO, CA 92691

C1. Lista de proveedores de la red

Proveedores de atención primaria


 (949) 364-3532
 Russian, Ukrainian,
Belarusian


Teleservice


Effective as of 01-DEC-23

SERGEYEVA, YELENA, MD^F

Provider ID: 100403248005

 27800 MEDICAL CENTER
RD STE 110
MISSION VIEJO, CA 92691

 (949) 364-3532


 Russian, Ukrainian,
Belarusian


Teleservice


Effective as of 01-DEC-23

SERGEYEVA, YELENA, MD^F

Provider ID: 100403248003

 27800 MEDICAL CENTER
RD STE 110
MISSION VIEJO, CA 92691

 (949) 364-3532

 Russian, Ukrainian,
Belarusian


Teleservice

Effective as of 01-MAR-23

STAUNTON, MICHELE, MD^{F†}

Provider ID: 100043245014

 26800 CROWN VALLEY
PKWY STE 325
MISSION VIEJO, CA 92691


 (949) 364-6000

Effective as of 01-AUG-22

STAUNTON, MICHELE, MD^{F††}

Provider ID: 100043245010

 26800 CROWN VALLEY
PKWY STE 330
MISSION VIEJO, CA 92691


 (949) 364-6000

Effective as of 01-NOV-14

SWADENER, NINA, MD^{F†}

Provider ID: 100219528002

 26800 CROWN VALLEY
PKWY STE 305
MISSION VIEJO, CA 92691

 (949) 364-6000


 Spanish


Effective as of 01-NOV-14

TRUONG, ANDREW, MD^{M††}

Provider ID: 100344383002

 26800 CROWN VALLEY
PKWY STE 305
MISSION VIEJO, CA 92691

 (949) 364-6000


 Vietnamese


Effective as of 01-JUL-19

TSAI, MON TA, MD^{M††}

Provider ID: 100060379006

 25982 PALA STE 250
MISSION VIEJO, CA 92691

 (949) 588-0051


 Chinese, Mandarin,
Taiwanese

Effective as of 01-JAN-18

WADELL, CHAD, MD^{M†}

Provider ID: 100108309006

 26800 CROWN VALLEY
PKWY STE 315
MISSION VIEJO, CA 92691


 (949) 364-6000

Effective as of 01-NOV-14

YAZDI, JANET, MD^{F††}

Provider ID: 100086097007

 26800 CROWN VALLEY
PKWY STE 305
MISSION VIEJO, CA 92691

 (949) 364-6000


Effective as of 01-MAR-13


FAMILY PRACTICE

BREWER, ANH, DO^{F†}

Provider ID: 100260727007

 27722 CLINTON KEITH RD
BLDG F
MURRIETA, CA 92562

 (951) 878-9820


 Vietnamese


Effective as of 01-NOV-20

BREWER, ANH, DO^{F†}

Provider ID: 100260727002

 27722 CLINTON KEITH RD
BLDG F
MURRIETA, CA 92562


 (951) 878-9820


 Vietnamese

Effective as of 01-FEB-16

BRIGGS, BRIDGET, MD^F

Provider ID: 100069323004

 25470 MEDICAL CENTER
DR STE 102
MURRIETA, CA 92562


 (951) 698-6090


 Spanish

Effective as of 01-SEP-10

ESTRELLA ITCHON, RHODA, MD^{F†}

Provider ID: 100010820002

 25495 MEDICAL CENTER
DR STE 301
MURRIETA, CA 92562


 (951) 461-1070


 Tagalog

Effective as of 01-SEP-04

MCKERAHAN, KELLY, DO^M

Provider ID: 100031842003

 25095 JEFFERSON AVE
STE 202
MURRIETA, CA 92562

 (951) 696-9566

Effective as of 01-JUN-03

MEHARDA, SANJIWANI, MD^F

C1. Lista de proveedores de la red
Proveedores de atención primaria

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

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

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

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

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

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

French
 Effective as of 01-JUN-19

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

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

GENERAL PRACTICE

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

INTERNAL MEDICINE

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

GONZALES, EDIVINA, MD^F
 Provider ID: 100039220007

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

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

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



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




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

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



C1. Lista de proveedores de la red
Proveedores de atención primaria

 Spanish
 Effective as of 01-FEB-21




REYNOLDS, RICHARD, MD^{M†}
 Provider ID: 100043439030
 25109 JEFFERSON AVE STE 100
 MURRIETA, CA 92562
 (951) 698-0440
 Effective as of 01-OCT-22



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

PEDIATRICS




NGUYEN, TUAN, MD^{M†}
 Provider ID: 100105070004
 28078 BAXTER RD STE 320
 MURRIETA, CA 92563
 (951) 246-4546
 Teleservice
 Effective as of 01-APR-21




FAMILY PRACTICE




ALB, SIMONA, MD^F
 Provider ID: 100033656024
 22 W 35TH ST STE 101
 NATIONAL CITY, CA 91950
 (619) 427-3361
 Romanian
 Effective as of 01-JUN-24




ALB, SIMONA, MD^F
 Provider ID: 100033656022
 22 W 35TH ST STE 101
 NATIONAL CITY, CA 91950
 (619) 427-3361




 Romanian
 Effective as of 01-MAY-24

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




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




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




CAMPBELL, BRIANNA, MD^{F†}
 Provider ID: 100360159004
 2400 E 8TH ST
 NATIONAL CITY, CA 91950
 (619) 662-4100
 Spanish
 Effective as of 01-JAN-21




CARLSON, ROBERT, MD^{M†}
 Provider ID: 100002398003
 36 N EUCLID AVE STE 105
 NATIONAL CITY, CA 91950
 (619) 255-2950
 Spanish, Tagalog
 Effective as of 01-SEP-22




CEVALLOS, JAMES, MD^{M††}




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

CEVALLOS, JAMES, MD^{M††}
 Provider ID: 100079582010
 1136 D AVE
 NATIONAL CITY, CA 91950
 (619) 662-4100
 Spanish
 Effective as of 01-JUN-24

CEVALLOS, JAMES, MD^{M††}
 Provider ID: 100079582004
 1136 D AVE
 NATIONAL CITY, CA 91950
 (619) 662-4100
 Spanish
 Effective as of 01-MAR-16

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

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

MATTHEWS, MERRITT, MD^{M†}
 Provider ID: 100021162012
 610 EUCLID AVE STE 302
 NATIONAL CITY, CA 91950
 (619) 527-7700
 Spanish, Tagalog

CI. Lista de proveedores de la red

Proveedores de atención primaria

Effective as of 01-NOV-20

MEDINA, ALEXANDER, MD^{M†}

Provider ID: 100325216002

330 E 8TH ST
NATIONAL CITY, CA 91950
(619) 662-4100
Spanish

Effective as of 01-FEB-18

MEDINA, ALEXANDER, MD^{M†}

Provider ID: 100325216016

330 E 8TH ST
NATIONAL CITY, CA 91950
(619) 662-4100
Spanish

Effective as of 01-APR-23

MEDINA, ALEXANDER, MD^M

Provider ID: 100325216019

333 E 8TH ST
NATIONAL CITY, CA 91950
(619) 662-4100
Spanish

Effective as of 01-APR-23

MEDINA, ALEXANDER, MD^M

Provider ID: 100325216026

340 E 8TH ST STE 330
NATIONAL CITY, CA 91950
(619) 662-4100
Spanish

Effective as of 01-MAY-23

MEDINA, ALEXANDER, MD^M

Provider ID: 100325216017

331 E 8TH ST
NATIONAL CITY, CA 91950
(619) 662-4100
Spanish

Effective as of 01-APR-23

MEDINA, ALEXANDER, MD^M

Provider ID: 100325216025

339 E 8TH ST

NATIONAL CITY, CA 91950
(619) 662-4100
Spanish

Effective as of 01-APR-23

MEDINA, ALEXANDER, MD^M

Provider ID: 100325216018

332 E 8TH ST
NATIONAL CITY, CA 91950
(619) 662-4100
Spanish

Effective as of 01-APR-23

MEDINA, ALEXANDER, MD^M

Provider ID: 100325216020

334 E 8TH ST
NATIONAL CITY, CA 91950
(619) 662-4100
Spanish

Effective as of 01-APR-23

MEDINA, ALEXANDER, MD^M

Provider ID: 100325216021

335 E 8TH ST
NATIONAL CITY, CA 91950
(619) 662-4100
Spanish

Effective as of 01-APR-23

MEDINA, ALEXANDER, MD^M

Provider ID: 100325216022

336 E 8TH ST
NATIONAL CITY, CA 91950
(619) 662-4100
Spanish

Effective as of 01-APR-23

MEDINA, ALEXANDER, MD^M

Provider ID: 100325216023

337 E 8TH ST
NATIONAL CITY, CA 91950
(619) 662-4100
Spanish

Effective as of 01-APR-23

MEDINA, ALEXANDER, MD^M

Provider ID: 100325216024

338 E 8TH ST
NATIONAL CITY, CA 91950
(619) 662-4100
Spanish

Effective as of 01-APR-23

NAVARRO, VANESSAMARIA, MD^{F†}

Provider ID: 100173914003

2400 E 8TH ST
NATIONAL CITY, CA 91950
(619) 662-4100
Filipino, Spanish, Tagalog

Effective as of 01-JAN-14

NOLASCO, JOANNA, MD^F

Provider ID: 100334048006

1136 D AVE
NATIONAL CITY, CA 91950
(619) 662-4100
Spanish

Effective as of 01-JUL-24

NOVENCIDO, JOSEPH, DO^{M†}

Provider ID: 100244053019

610 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
(619) 527-7700
Spanish

Effective as of 01-APR-23

NOVENCIDO, JOSEPH, DO^{M†}

Provider ID: 100244053014

610 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
(619) 527-7700
Spanish

Effective as of 01-SEP-20


OCEGUEDA, JOSHUA, MD^{M†}

Provider ID: 100377020006

1136 D AVE
NATIONAL CITY, CA 91950

CI. Lista de proveedores de la red

Proveedores de atención primaria

 (619) 662-4100


Effective as of 01-JUL-24

OCEGUEDA, JOSHUA, MD^{M†}

Provider ID: 100377020002

 1136 D AVE

NATIONAL CITY, CA 91950

 (619) 662-4100


Effective as of 01-SEP-21

PATEL, PAAVAN, DO^M

Provider ID: 100413256010

 610 EUCLID AVE STE 302

NATIONAL CITY, CA 91950

 (619) 527-7700


Effective as of 01-DEC-23

PATEL, PAAVAN, DO^M

Provider ID: 100413256006

 610 EUCLID AVE STE 302

NATIONAL CITY, CA 91950

 (619) 527-7700


Effective as of 01-NOV-23

ROBERTS, POMAI, MD^{F††}

Provider ID: 100323487002

 1136 D AVE

NATIONAL CITY, CA 91950

 (619) 662-4100

 Spanish


Effective as of 01-SEP-17

SAZEGAR, PAYAM, MD^{M†}

Provider ID: 100187888015

 217 HIGHLAND AVE

NATIONAL CITY, CA 91950

 (619) 434-7308

Teleservice


Effective as of 01-JUL-21

STILLWELL, CARLA, MD^F

Provider ID: 100147691025

 22 W 35TH ST STE 101

NATIONAL CITY, CA 91950

 (619) 427-3361

 Polish, Portuguese, Spanish


Effective as of 01-JUN-24


STILLWELL, CARLA, MD^F

Provider ID: 100147691023

 22 W 35TH ST STE 101

NATIONAL CITY, CA 91950

 (619) 427-3361

 Polish, Portuguese, Spanish


Effective as of 01-MAY-24

STONES, RACHEL, MD^F

Provider ID: 100387928006

 217 HIGHLAND AVE

NATIONAL CITY, CA 91950

 (619) 434-7308

 Spanish

Teleservice


Effective as of 01-MAY-22

VELASQUEZ, SHARON, MD^{F††}

Provider ID: 100189428010

 2400 E 8TH ST

NATIONAL CITY, CA 91950

 (619) 662-4100

 Spanish


Effective as of 01-NOV-23

VELASQUEZ, SHARON, MD^{F††}

Provider ID: 100189428004

 2400 E 8TH ST

NATIONAL CITY, CA 91950

 (619) 662-4100

 Spanish

Effective as of 01-JAN-14


FQHC

FAMILY HEALTH CTR SD NATIONAL CITY,

Provider ID: PG0085737003

 1000 EUCLID AVE

NATIONAL CITY, CA 91950

 (619) 515-2399


Effective as of 01-JAN-21

LA MAESTRA FAMILY CLINIC INC, †

Provider ID: PG0053396004

 217 HIGHLAND AVE

NATIONAL CITY, CA 91950

 (619) 434-7308


Effective as of 01-JAN-21

OPERATION SAMAHAN - NATIONAL C, †

Provider ID: PG0084147004

 2743 HIGHLAND AVE

NATIONAL CITY, CA 91950

 (844) 200-2426

Teleservice


Effective as of 01-JAN-21

OPERATION SAMAHAN GRANGER SCHOOL BASED,

Provider ID: PG0084288003

 2101 GRANGER AVE


NATIONAL CITY, CA 91950

 (844) 200-2426


Effective as of 01-JAN-21

SAN YSIDRO HEALTH NATIONAL CITY,

Provider ID: PG0047542010

 1136 D AVE

NATIONAL CITY, CA 91950

 (619) 662-4100

Teleservice


Effective as of 01-JAN-21

SAN YSIDRO HEALTH PARADISE HILLS, †

Provider ID: PG0047542011

 2400 E 8TH ST STE A

NATIONAL CITY, CA 91950

 (619) 662-4100

Teleservice

Effective as of 01-JAN-21

CI. Lista de proveedores de la red

Proveedores de atención primaria

SAN YSIDRO HEALTH SOUTH BAY,

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

GENERAL PRACTICE

MEDINA, NATALIE, MD^F

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

MEDINA, NATALIE, MD^F

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

MEDINA, NATALIE, MD^F

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

INTERNAL MEDICINE

BELLA, ARCHIE, MD^M

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

BRAVERMAN, IRA, MD^{M†}

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

BRAVERMAN, IRA, MD^{M†}

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

BRAVERMAN, IRA, MD^{M†}

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

CANTU-REYNA, GUILLERMO, MD^{M†}

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

COMUNALE, RODERICK, MD^{M†}

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

DELA PAZ, LENNIE, MD^{M†}

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

DELAROSA, RENATO, MD^M

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

EL-GHONEIMY, AHMED, MD^{M†}

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

HEKMAT, RAZI, MD^{M†}

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

HEKMAT, RAZI, MD^{M†}

Provider ID: 100081732022
📍 610 EUCLID AVE STE 201
NATIONAL CITY, CA 91950
☎ (619) 267-8181
📄 Spanish
Effective as of 01-APR-21

HEKMAT, RAZI, MD^{M†}

Provider ID: 100081732019
📍 610 EUCLID AVE STE 201
NATIONAL CITY, CA 91950
☎ (619) 267-8181

C1. Lista de proveedores de la red


Proveedores de atención primaria

 Spanish
Effective as of 01-AUG-20

MEDINA, NATALIE, MD^F

Provider ID: 100254911013

 502 EUCLID AVE STE 306
NATIONAL CITY, CA 91950

 (619) 267-1168


 Spanish

Effective as of 01-JAN-21

PRATHIPATI, LAKSHMI, MD^{F†}

Provider ID: 100041945034

 502 EUCLID AVE STE 2013
NATIONAL CITY, CA 91950

 (619) 267-0553


 Spanish, Telugu, Tagalog

Effective as of 01-SEP-22

PRATHIPATI, LAKSHMI, MD^{F†}

Provider ID: 100041945033

 502 EUCLID AVE STE 2013
NATIONAL CITY, CA 91950

 (619) 267-0553


 Spanish, Telugu, Tagalog

Effective as of 01-AUG-22

TIANGCO, IRINEO, MD^{M†}

Provider ID: 100107246016

 2340 E 8TH ST STE J
NATIONAL CITY, CA 91950

 (619) 479-0320


 Spanish, Tagalog

Effective as of 01-JAN-21

TIANGCO, IRINEO, MD^{M†}

Provider ID: 100107246018

 2340 E 8TH ST STE J
NATIONAL CITY, CA 91950

 (619) 479-0320


 Spanish, Tagalog

Effective as of 01-JAN-21

TIANGCO, IRINEO, MD^{M†}

Provider ID: 100107246005

 2340 E 8TH ST STE J
NATIONAL CITY, CA 91950

 (619) 479-0320


 Spanish, Tagalog

Effective as of 01-JAN-14

TIANGCO, IRINEO, MD^{M†}

Provider ID: 100107246017

 2340 E 8TH ST STE J
NATIONAL CITY, CA 91950

 (619) 479-0320


 Spanish, Tagalog

Effective as of 01-SEP-20

TIANGCO, IRINEO, MD^{M†}

Provider ID: 100107246019

 2340 E 8TH ST STE J
NATIONAL CITY, CA 91950

 (619) 479-0320

 Spanish, Tagalog

Effective as of 01-NOV-20

FAMILY PRACTICE


MANGOBA, LUTHER, MD^{M†}

Provider ID: 100107397011

 400 NEWPORT CENTER
DR STE 303

NEWPORT BEACH, CA

92660


 (949) 644-1300

 Spanish

Effective as of 01-APR-22


MANGOBA, LUTHER, MD^{M†}

Provider ID: 100107397012

 400 NEWPORT CENTER
DR STE 303

NEWPORT BEACH, CA

92660

 (949) 644-1300

 Spanish

Effective as of 01-APR-22

INTERNAL MEDICINE


SPRINGSTUBB, ADITI, MD^{F†}


Provider ID: 100201144014

 360 SAN MIGUEL DR STE
300

NEWPORT BEACH, CA

92660

 (949) 557-0830

 Hindi, Spanish

Effective as of 01-OCT-21


SYED, SAMEENA, DO^F

Provider ID: 100380768002

 360 SAN MIGUEL DR STE
300

NEWPORT BEACH, CA

92660

 (949) 557-0830


Effective as of 01-DEC-21

FAMILY PRACTICE

BANIADAM, BEHZAD, MD^M

Provider ID: 100069979008

 3231 WARING CT STE L
OCEANSIDE, CA 92056

 (760) 630-6300


 Spanish

Effective as of 01-MAR-21

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

Provider ID: 100358800017

 517 N HORNE ST
OCEANSIDE, CA 92054

 (760) 631-5000


 Spanish

Effective as of 01-JAN-24

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

Provider ID: 100358800016

 4700 N RIVER RD
OCEANSIDE, CA 92057

 (760) 631-5000

 Spanish

C1. Lista de proveedores de la red
Proveedores de atención primaria

Effective as of 01-JAN-24

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

Provider ID: 100358800018

818 PIER VIEW WAY
 OCEANSIDE, CA 92054

(760) 631-5000

Spanish

Effective as of 01-JAN-24

GONZALES, MICHELLE, MD^F

Provider ID: 100063095006

3601 VISTA WAY
 OCEANSIDE, CA 92056

(760) 639-1204

Spanish

Teleservice

Effective as of 01-SEP-21

KURUKULASURIYA, DAYANTHITHI, DO^F

Provider ID: 100326148005

605 CROUCH ST
 OCEANSIDE, CA 92054

(760) 736-6767

Effective as of 01-FEB-23

PONSFORD, DIANA, DO^F

Provider ID: 100350934010

517 N HORNE ST
 OCEANSIDE, CA 92054

(760) 631-5000

Effective as of 01-MAY-22

PONSFORD, DIANA, DO^F

Provider ID: 100350934011

517 N HORNE ST
 OCEANSIDE, CA 92054

(760) 631-5000

Effective as of 01-JAN-24

SAFI, ROOZCHEHR, MD^{F†}

Provider ID: 100201387012

605 CROUCH ST

OCEANSIDE, CA 92054

(760) 736-6767

Farsi

Effective as of 01-APR-14

SALAMANCA, OMAR, MD^M

Provider ID: 100333689015

605 CROUCH ST
 OCEANSIDE, CA 92054

(760) 736-6767

Spanish

Effective as of 01-SEP-24

FQHC

TRUECARE,

Provider ID: PG0092588008

2210 MESA DR STE 300
 OCEANSIDE, CA 92054

(760) 736-6767

Teleservice

Effective as of 01-JUL-22

TRUECARE VISTA WAY HEALTH CENTER STE G,

Provider ID: PG0130229002

3998 VISTA WAY STE G
 OCEANSIDE, CA 92056

(760) 736-6767

Effective as of 01-JUN-24

VISTA COMMUNITY CLINIC, †

Provider ID: PG0072409007

4700 N RIVER RD
 OCEANSIDE, CA 92057

(760) 631-5000

Teleservice

Effective as of 01-JUL-22

VISTA COMMUNITY CLINIC HORNE STREET,

Provider ID: PG0084639007

517 N HORNE ST
 OCEANSIDE, CA 92054

(760) 631-5000

Teleservice

Effective as of 01-JUL-22

VISTA COMMUNITY CLINIC PIER VIEW WAY,

Provider ID: PG0084683007

818 PIER VIEW WAY
 OCEANSIDE, CA 92054

(760) 631-5000

Teleservice

Effective as of 01-JUL-22

INTERNAL MEDICINE

ASPIRAS, JULIE, MD^{F*}

Provider ID: 100065479004

3998 VISTA WAY STE F
 OCEANSIDE, CA 92056

(760) 630-4678

Effective as of 01-SEP-21

CHONG, ILSONG, MD^M

Provider ID: 100334344008

3998 VISTA WAY STE 204
 OCEANSIDE, CA 92056

(760) 736-6767

Korean

Effective as of 01-JUN-24

CHONG, ILSONG, MD^M

Provider ID: 100334344009

3998 VISTA WAY STE 204
 OCEANSIDE, CA 92056

(760) 736-6767

Korean

Effective as of 01-JUL-24

CURRAN, PERRIN, MD^M

Provider ID: 100083095002



3601 VISTA WAY STE 201
 OCEANSIDE, CA 92056




(760) 639-1714




Effective as of 01-FEB-05




HEIFETZ, SUSAN, MD^F




C1. Lista de proveedores de la red
Proveedores de atención primaria




Provider ID: 100024397011
 3601 VISTA WAY STE 201
 OCEANSIDE, CA 92056
 (760) 529-9514
 Effective as of 01-SEP-21

LIZOTTE, PAUL, DO^{M†}
 Provider ID: 100212648008
 115 N EL CAMINO REAL STE
 A
 OCEANSIDE, CA 92058
 (760) 330-5055
 Spanish
 Effective as of 01-MAR-21




MACMURRAY, MICHAEL, MD^M
 Provider ID: 100067535007
 818 PIER VIEW WAY
 OCEANSIDE, CA 92054
 (760) 631-5000
 Spanish
 Effective as of 01-MAR-20

MACMURRAY, MICHAEL, MD^M
 Provider ID: 100067535003
 818 PIER VIEW WAY
 OCEANSIDE, CA 92054
 (760) 631-5000
 Spanish
 Effective as of 01-OCT-05




MACMURRAY, MICHAEL, MD^M
 Provider ID: 100067535012
 818 PIER VIEW WAY
 OCEANSIDE, CA 92054
 (760) 631-5000
 Spanish
 Effective as of 01-JAN-24

SAMANI, PARGOL, MD^F
 Provider ID: 100325205012
 3927 WARING RD STE C
 OCEANSIDE, CA 92056
 (619) 703-7220
 Farsi, Persian



Teleservice
 Effective as of 01-DEC-23



ZIMMERMANN, ANDRES, MD^M
 Provider ID: 100015622004
 3601 VISTA WAY STE 201
 OCEANSIDE, CA 92056
 (760) 639-1714
 Spanish
 Effective as of 01-SEP-21



FAMILY PRACTICE

MCHENRY, KATHRYN, DO^F
 Provider ID: 100320650015
 16650 HIGHWAY 76
 PAUMA VALLEY, CA 92061
 (760) 742-9919
 Spanish
 Effective as of 01-FEB-24




INTERNAL MEDICINE




SANUCCI, SHAUN, DO^F
 Provider ID: 100352649063
 524 W 4TH ST STE B
 PERRIS, CA 92570
 (951) 355-0030
 Effective as of 01-NOV-23




SANUCCI, SHAUN, DO^F
 Provider ID: 100352649064
 524 W 4TH ST STE B
 PERRIS, CA 92570
 (951) 355-0030
 Effective as of 01-FEB-24

SANUCCI, SHAUN, DO^F
 Provider ID: 100352649069
 524 W 4TH ST STE B
 PERRIS, CA 92570
 (951) 355-0030
 Effective as of 01-AUG-24



FAMILY PRACTICE

KAUR, JATINDER, MD^F
 Provider ID: 100315025013
 13010 POWAY RD
 POWAY, CA 92064
 (858) 218-3000
 Hindi, Punjabi, Urdu
 Effective as of 01-MAY-23




KAUR, JATINDER, MD^F
 Provider ID: 100315025014
 13010 POWAY RD
 POWAY, CA 92064
 (858) 218-3000
 Hindi, Punjabi, Urdu
 Effective as of 01-JAN-24

TANKSLEY, SIMON, MD^M
 Provider ID: 100353447004
 15611 POMERADO RD FL 3
 POWAY, CA 92064
 (858) 675-3210
 Spanish
 Effective as of 01-JAN-24

FQHC

**NEIGHBORHOOD
 HEALTHCARE GOLD FAMILY
 HEALTH CENTER,**
 Provider ID: PG0092632004
 13010 POWAY RD
 POWAY, CA 92064
 (858) 218-3000
 Effective as of 01-JUL-22

INTERNAL MEDICINE

RIVERA, MARCELO, MD^{M†}
 Provider ID: 100036662015
 13525 MIDLAND RD STE F
 POWAY, CA 92064
 (858) 486-9100
 Spanish, Tagalog
 Effective as of 01-JAN-21

CI. Lista de proveedores de la red

Proveedores de atención primaria

RIVERA, MARCELO, MD^{M†}

Provider ID: 100036662019

13525 MIDLAND RD STE F
POWAY, CA 92064

(858) 486-9100

Spanish, Tagalog

Effective as of 01-SEP-23

RIVERA, MARCELO, MD^M

Provider ID: 100036662021

15644 POMERADO RD STE
100
POWAY, CA 92064

(858) 485-5111

Spanish, Tagalog

Effective as of 01-SEP-23

RIVERA, MARCELO, MD^M

Provider ID: 100036662020

15644 POMERADO RD STE
100
POWAY, CA 92064

(858) 485-5111

Spanish, Tagalog

Effective as of 01-SEP-23

RIVERA, MARCELO, MD^M

Provider ID: 100036662022

15644 POMERADO RD STE
100
POWAY, CA 92064

(858) 485-5111

Spanish, Tagalog

Effective as of 01-DEC-23

RIVERA, MARCELO, MD^{M†}

Provider ID: 100036662016

15644 POMERADO RD STE
300
POWAY, CA 92064

(858) 613-8743

Spanish, Tagalog

Teleservice

Effective as of 01-JAN-21

FQHC

TRUECARE, †

Provider ID: PG0025086043

220 ROTANZI ST
RAMONA, CA 92065

(760) 736-6767

Teleservice

Effective as of 01-JUL-22

INTERNAL MEDICINE

HO, LYSA, DO^F

Provider ID: 100437431002

220 ROTANZI ST
RAMONA, CA 92065

(760) 736-6767

Vietnamese

Effective as of 01-AUG-24

YUNG, DORIS, MD^{F†}

Provider ID: 100036513005

220 ROTANZI ST
RAMONA, CA 92065

(760) 736-6767

Chinese, Mandarin, Spanish

Effective as of 01-DEC-18

FAMILY PRACTICE

BILAN, NATALIA, MD^F

Provider ID: 100112756005

29809 SANTA MARGARITA
PKWY STE 300
RANCHO SANTA
MARGARITA, CA 92688

(949) 709-5100

Russian

Effective as of 01-JAN-18

CIANCIOLA, MARK, MD^{M††}

Provider ID: 100057057005

29472 AVENIDA DE LAS
BANDERA
RANCHO SANTA

MARGARITA, CA 92688

(949) 459-9968

Effective as of 01-MAY-12

GHAZI, FARANAK, MD^{F†}

Provider ID: 100332514003

29873 SANTA MARGARITA
PKWY STE 100
RANCHO SANTA
MARGARITA, CA 92688

(949) 709-0988

Effective as of 01-AUG-18

HAUSER, BRIAN, MD^M

Provider ID: 100262507010

29472 AVENIDA DE LAS
BANDERA
RANCHO SANTA
MARGARITA, CA 92688

(949) 459-9968

Effective as of 01-JUL-24

KARIMABADI, MARJAN, MD^{F††}

Provider ID: 100196435002

29472 AVENIDA DE LAS
BANDERA
RANCHO SANTA
MARGARITA, CA 92688

(949) 459-9968

Farsi

Effective as of 01-OCT-13

INTERNAL MEDICINE

GORE, GWENDOLYN, MD^{F††}

Provider ID: 100020754005

29472 AVENIDA DE LAS
BANDERA
RANCHO SANTA
MARGARITA, CA 92688

(949) 459-9968

Effective as of 01-MAY-12

KAMAREI, SHAPARAK, MD^{F†}




Provider ID: 100132319012

C1. Lista de proveedores de la red

Proveedores de atención primaria



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

TRAN, LILIAN, MD^{F†}




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

FAMILY PRACTICE



DESILVA, PETER, MD^M

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



DAVALOS, RICARDO, MD^M

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




RAMSEY, KAYLA, DO^F

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




ROBERSON, ANDREA, DO^{F†}

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

SAFAVI, MAHSA, MD^{F†}




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

SHOKOUHI, SARA, MD^{F†}




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

INTERNAL MEDICINE



CHANG, LAWRENCE, MD^M

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




CLARK, LORI, MD^{F†}

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



GARNER, KAREN, MD^{F†}

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



NAJI, MAHTAB, MD^F

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



ONYEKWULUJE, ANNE, MD^F

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



REXINGER, KENNETH, MD^{M†}

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

UNDERWOOD JOLLY, AMY, MD^{F†}

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




WOOD, YELENA, MD^{F†}

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




C1. Lista de proveedores de la red
Proveedores de atención primaria

FAMILY PRACTICE




ALVAREZ-ESTRADA, MIGUEL, MD^{Mt}

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




ALVAREZ-ESTRADA, MIGUEL, MD^{Mt}

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




BAIK, JESSICA, MD^F

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

BAIK, JESSICA, MD^F

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




BOYD, JAMES, MD^M

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




Teleservice

Effective as of 01-DEC-23




CUTLER, MICHAEL, MD^M

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




CUTLER, MICHAEL, MD^M

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

CUTLER, MICHAEL, MD^M

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




CUTLER, MICHAEL, MD^M

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




DABO, TARAM, MD^{Mt}

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




DABO, TARAM, MD^{Mt}

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




DAO, VIET, MD^{Mt}

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




DAO, VIET, MD^{Mt}

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

DAO, VIET, MD^{Mt}

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

DAO, VIET, MD^{Mt}




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

DAO, VIET, MD^{Mt}

Provider ID: 100105020064




C1. Lista de proveedores de la red

Proveedores de atención primaria

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




DAO, VIET, MD^{M†}

Provider ID: 100105020068

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




DAO, VIET, MD^{M†}

Provider ID: 100105020067

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




DAO, VIET, MD^{M†}

Provider ID: 100105020035

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




DAO, VIET, MD^{M†}

Provider ID: 100105020069

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




DAVIS, DEIRDRE, MD^{F†}

Provider ID: 100375869006

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




DAVIS, DEIRDRE, MD^{F†}

Provider ID: 100375869002

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



DE ROTH, GEORGINE, MD^F

Provider ID: 100409222005

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



DENYSIAK, JACQUELINE, MD^{F†}

Provider ID: 100363725002

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

DENYSIAK, JACQUELINE, MD^{F†}


Provider ID: 100363725005

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

DENYSIAK, JACQUELINE, MD^{F†}

Provider ID: 100363725007

 3969 4TH AVE STE 203
SAN DIEGO, CA 92103

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

DESHPANDE, KAVITA, MD^F

Provider ID: 100427408003

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

DESHPANDE, KAVITA, MD^F

Provider ID: 100427408004

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




DIEP, BRIAN, MD^{M†}

Provider ID: 100324529013

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

DIEP, BRIAN, MD^{M†}

Provider ID: 100324529011

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


FAMBRO, CYNTHIA, MD^{F†}

Provider ID: 100350838004

 950 S EUCLID AVE
SAN DIEGO, CA 92114

C1. Lista de proveedores de la red

Proveedores de atención primaria

 (619) 662-4100

 Spanish


Effective as of 01-JAN-21

GERBATSCH-BORNEMISZA, ILDIKO, MD^F

Provider ID: 100325246016

 3490 PALM AVE

SAN DIEGO, CA 92154

 (619) 423-5616

 Spanish

Teleservice


Effective as of 01-JUL-23

GIL, GABRIEL, MD^{M†}

Provider ID: 100094547025

 909 CARDIFF ST

SAN DIEGO, CA 92114

 (619) 465-3121

 Spanish


Effective as of 01-JAN-21

GIL, GABRIEL, MD^{M†}

Provider ID: 100094547010

 903 CARDIFF ST

SAN DIEGO, CA 92114

 (619) 465-3121

 Spanish


Effective as of 01-JAN-18

GIL, GABRIEL, MD^{M†}

Provider ID: 100094547011

 903 CARDIFF ST

SAN DIEGO, CA 92114

 (619) 465-3121

 Spanish


Effective as of 01-JAN-18

GIL, GABRIEL, MD^{M†}

Provider ID: 100094547026

 903 CARDIFF ST

SAN DIEGO, CA 92114

 (619) 465-3121

 Spanish


Effective as of 01-NOV-20

GUTIERREZ, LORAINE, MD^{F†}

Provider ID: 100334279007

 4060 FAIRMOUNT AVE

SAN DIEGO, CA 92105

 (619) 255-9155

 Spanish

Teleservice


Effective as of 01-AUG-21

HAMIDI, MAHSHID, MD^{F†}

Provider ID: 100110351016

 5222 BALBOA AVE STE 31

SAN DIEGO, CA 92117

 (858) 565-6394

 Farsi, French, Persian


Effective as of 01-FEB-22

HAMIDI, MAHSHID, MD^{F†}

Provider ID: 100110351015

 5222 BALBOA AVE STE 31

SAN DIEGO, CA 92117

 (858) 565-6394

 Farsi, French, Persian


Effective as of 01-JAN-21

HAMIDI, MAHSHID, MD^{F†}

Provider ID: 100110351005

 5222 BALBOA AVE STE 31

SAN DIEGO, CA 92117

 (858) 565-6394

 Farsi, French, Persian


Effective as of 01-APR-18

HAMIDI, MAHSHID, MD^{F†}

Provider ID: 100110351013

 5222 BALBOA AVE STE 31

SAN DIEGO, CA 92117

 (858) 565-6394

 Farsi, French, Persian


Effective as of 01-AUG-20

HAMIDI, MAHSHID, MD^{F†}

Provider ID: 100110351017

 5222 BALBOA AVE STE 31

SAN DIEGO, CA 92117

 (858) 565-6394

 Farsi, French, Persian


Effective as of 01-APR-23

HEIMLER, GRAHAM, MD^M

Provider ID: 100395560005

 9333 GENESEE AVE

SAN DIEGO, CA 92121

 (800) 926-8273


Effective as of 01-JUL-23

HEINRICI, ALEKA, MD^F

Provider ID: 100244401008

 286 EUCLID AVE STE 302

SAN DIEGO, CA 92114

 (619) 662-4100

 Spanish

Teleservice

Effective as of 01-APR-23


HENRY, REBECCA, MD^F

Provider ID: 100418054002

 6386 ALVARADO CT STE

101

SAN DIEGO, CA 92120

 (858) 554-1212

Effective as of 01-NOV-23


HENRY, REBECCA, MD^F

Provider ID: 100418054007

 6386 ALVARADO CT STE

101

SAN DIEGO, CA 92120

 (858) 554-1212

Effective as of 01-MAY-24


HENRY, REBECCA, MD^F

Provider ID: 100418054008

 6386 ALVARADO CT STE

101

SAN DIEGO, CA 92120

 (858) 554-1212

Effective as of 01-MAY-24

C1. Lista de proveedores de la red
Proveedores de atención primaria

HENRY, REBECCA, MD^F

Provider ID: 100418054006

6386 ALVARADO CT STE 101

SAN DIEGO, CA 92120

(858) 554-1212

Effective as of 01-APR-24

HOUGHTON, ROBERT, MD^{M†}

Provider ID: 100034977002

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

(619) 233-4044

German, Spanish

Effective as of 01-FEB-07

JENKIN, FREDERICK, DO^{M†}

Provider ID: 100038612009

3562 GOVERNOR DR STE 1
 SAN DIEGO, CA 92122

(858) 774-5157

Effective as of 01-MAY-21

JOHN, TANNER, MD^M

Provider ID: 100415495003

3177 OCEAN VIEW BLVD
 SAN DIEGO, CA 92113

(619) 662-4100

Teleservice

Effective as of 01-OCT-23

KIDDER, BRENDAN, MD^{M†}

Provider ID: 100334556005

3177 OCEAN VIEW BLVD
 SAN DIEGO, CA 92113

(619) 662-4100

Spanish

Effective as of 01-MAY-22

LEBANO, RICHARD, MD^M

Provider ID: 100340129005

10737 CAMINO RUIZ STE 235

SAN DIEGO, CA 92126

(844) 200-2426

Spanish

Effective as of 01-OCT-23

LIU, CHIA-LIN, DO^M

Provider ID: 100102354004

2185 GARNET AVE
 SAN DIEGO, CA 92109

(858) 270-9270

Chinese, Mandarin, Spanish

Effective as of 01-APR-23

LIU, CHIA-LIN, DO^M

Provider ID: 100102354002

2185 GARNET AVE
 SAN DIEGO, CA 92109

(858) 270-9270

Chinese, Mandarin, Spanish

Effective as of 01-DEC-03

LUAN, GORDON, MD^{M†}

Provider ID: 100012685018

4320 GENESEE AVE STE 103

SAN DIEGO, CA 92117

(858) 598-6789

Chinese, Mandarin

Effective as of 01-NOV-23

LUAN, GORDON, MD^{M†}

Provider ID: 100012685016

4320 GENESEE AVE STE 103

SAN DIEGO, CA 92117

(858) 598-6789

Chinese, Mandarin

Effective as of 01-JUN-22

MARQUEZ, LUIS, MD^{M†}

Provider ID: 100078829006

4060 4TH AVE STE 540
 SAN DIEGO, CA 92103

(619) 236-8796

Italian, Spanish

Effective as of 01-NOV-21

MATSON, GARY, DO^{M†}

Provider ID: 100051901002

4501 MISSION BAY DR STE 3E

SAN DIEGO, CA 92109

(858) 270-4343

French, German, Spanish
 Teleservice

Effective as of 01-FEB-07

MONTENEGRO, CLAUDIA, DO^F

Provider ID: 100427447003

4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105

(619) 255-9155

Spanish

Teleservice

Effective as of 01-APR-24

MONTENEGRO, CLAUDIA, DO^F

Provider ID: 100427447004

4171 FAIRMOUNT AVE
 SAN DIEGO, CA 92105

(619) 269-1269

Spanish

Teleservice

Effective as of 01-APR-24

MORALES, ALEJANDRA, MD^{F†}

Provider ID: 100363732006

3177 OCEAN VIEW BLVD
 SAN DIEGO, CA 92113

(619) 662-4100

Effective as of 01-MAY-22

MORALES, ALEJANDRA, MD^{F†}

Provider ID: 100363732003

3177 OCEAN VIEW BLVD
 SAN DIEGO, CA 92113

(619) 662-4100




Effective as of 01-JAN-21

NGUYEN, LINHKIEU, MD^{F†}


Provider ID: 100073181012

C1. Lista de proveedores de la red




Proveedores de atención primaria

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




NGUYEN, LINHKIEU, MD^{Ft}

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




RECALDE, FRANCISCO, MD^{Mt}

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



RECALDE, FRANCISCO, MD^{Mt}

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




RODRIGUEZ, SEAN, MD^M

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




ROSADO, IVAN, MD^M

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



RYAN, DAVID, MD^M

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



SALEH, ANDREW, MD^{Mt}

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



SAZEGAR, PAYAM, MD^{Mt}

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


SAZEGAR, PAYAM, MD^{Mt}


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

SCOTT, LAGINA, MD^F




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

SCOTT, LAGINA, MD^F




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

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




SHAMANI, AZAM, MD^{Ft}

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



SHAMANI, AZAM, MD^{Ft}

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



SHAMANI, AZAM, MD^{Ft}

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


SHAMANI, AZAM, MD^{Ft}

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




SIVA, TENAYA, MD^M

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




C1. Lista de proveedores de la red
Proveedores de atención primaria

 Spanish
 Teleservice
 Effective as of 01-SEP-24




SIVA, TENAYA, MD^M

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




SNYDER, CHRISTOPHER, DO^{Mt}

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


SNYDER, CHRISTOPHER, DO^{Mt}



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

STONES, RACHEL, MD^F




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

STONES, RACHEL, MD^F

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

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




SZMIDT, MARIA, MD^F

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




SZMIDT, MARIA, MD^F

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

TEGUH, COLLIN, DO^{Mt}



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

**VAZQUEZ-BOJORQUEZ,
 ALEJANDRA, MD^F**




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

VILLA, MARIA, MD^{Ft}




Provider ID: 100111602016
 655 SATURN BLVD STE J

SAN DIEGO, CA 92154
 (619) 575-4442
 Spanish, Tagalog
 Effective as of 01-JAN-21




VILLA, MARIA, MD^{Ft}

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




VILLA, MARIA, MD^{Ft}

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


VILLA, MARIA, MD^{Ft}

Provider ID: 100111602005
 655 SATURN BLVD STE J
 SAN DIEGO, CA 92154
 (619) 575-4442
 Spanish, Tagalog
 Effective as of 01-FEB-18

VO, PHULUONG, DO^F

Provider ID: 100415527006
 4690 EL CAJON BLVD
 SAN DIEGO, CA 92115
 (619) 662-4100
 Spanish, Vietnamese
 Teleservice
 Effective as of 01-JUN-24

VO, PHULUONG, DO^F

Provider ID: 100415527003
 4690 EL CAJON BLVD
 SAN DIEGO, CA 92115
 (619) 662-4100
 Spanish, Vietnamese
 Teleservice

C1. Lista de proveedores de la red
Proveedores de atención primaria

Effective as of 01-NOV-23

VOURLITIS, MELISSA, DO^{F†}

Provider ID: 100090572016

📍 9800 GLEN CENTER DR
SAN DIEGO, CA 92131

☎ (858) 832-2500

Teleservice

Effective as of 01-NOV-23

WONG, CALVIN, MD^{M†}

Provider ID: 100095226007

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

☎ (619) 232-6262

📱 Chinese, Spanish

Effective as of 01-JUN-11

YUEN, SELENE, MD^{F†}

Provider ID: 100246155013

📍 4320 GENESEE AVE STE
103
SAN DIEGO, CA 92117

☎ (858) 598-6789

📱 Chinese

Teleservice

Effective as of 01-APR-22

YUEN, SELENE, MD^{F†}

Provider ID: 100246155015

📍 4320 GENESEE AVE STE
103
SAN DIEGO, CA 92117

☎ (858) 598-6789

📱 Chinese

Teleservice

Effective as of 01-JUN-22

ZINK, IRENE, MD^{F††}

Provider ID: 100324255002

📍 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

☎ (619) 662-4100

📱 German

Teleservice

Effective as of 01-AUG-17

ZINK, IRENE, MD^{F††}

Provider ID: 100324255006

📍 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

☎ (619) 662-4100

📱 German

Teleservice

Effective as of 01-APR-23

FQHC

**DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC,**

Provider ID: PG0025044041

📍 4725 MARKET ST
SAN DIEGO, CA 92102

☎ (619) 515-2560

Effective as of 01-JAN-21

**DOWNTOWN FAMILY CTR AT
CONNECTIONS, †**

Provider ID: PG0084437004

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

☎ (619) 515-2430

Effective as of 01-JAN-21

**FAMILY HEALTH CTR IBARRA,
†**

Provider ID: PG0084517004

📍 4874 POLK AVE
SAN DIEGO, CA 92105

☎ (619) 515-2426

Effective as of 01-JAN-21

**FAMILY HEALTH CTR OF SD-
ELM ST, †**

Provider ID: PG0083911003

📍 140 ELM ST
SAN DIEGO, CA 92101

☎ (619) 515-2520

Effective as of 01-JAN-21

**FAMILY HEALTH CTR SAN
DIEGO-OAK PARK,**

Provider ID: PG0084522003

📍 5160 FEDERAL BLVD
SAN DIEGO, CA 92105

☎ (619) 515-2454

Effective as of 01-JAN-21

**FAMILY HEALTH CTR SAN
DIEGO-OAK PARK,**

Provider ID: PG0084522006

📍 2114 NATIONAL AVE
SAN DIEGO, CA 92113

☎ (619) 515-2406

Effective as of 01-JAN-21

**FAMILY HLTH CTR OF SD SAN
DIEGO COMMERCIAL,**

Provider ID: PG0083950003

📍 2325 COMMERCIAL ST STE
1400
SAN DIEGO, CA 92113

☎ (619) 515-2422

Effective as of 01-JAN-21

**FAMILY HLTH CTR SAN
DIEGO- CITY COLLEGE,**

Provider ID: PG0085338003

📍 1550 BROADWAY STE 2
SAN DIEGO, CA 92101

☎ (619) 515-2525

Effective as of 01-JAN-21

**FAMILY HLTH CTR SAN
DIEGO-BEACH AREA,**

Provider ID: PG0083156003

📍 3705 MISSION BLVD
SAN DIEGO, CA 92109



☎ (619) 515-2444



Effective as of 01-JAN-21



**FAMILY HLTH CTR SD
HILLCREST, †**



Provider ID: PG0084516014



C1. Lista de proveedores de la red
Proveedores de atención primaria


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


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



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



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



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



LOGAN HEIGHTS FAMILY HEALTH CENTER,
 Provider ID: PG0025044036
 1809 NATIONAL AVE



SAN DIEGO, CA 92113
 (619) 515-2300
 Effective as of 01-JAN-21



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



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



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



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



NORTH PARK FAMILY HEALTH CENTERS,
 Provider ID: PG0025044037
 3544 30TH ST
 SAN DIEGO, CA 92104
 (619) 515-2424

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

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

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



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

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



C1. Lista de proveedores de la red
Proveedores de atención primaria

Teleservice
 Effective as of 01-JUL-22



**SAN YSIDRO HEALTH 25TH ST
 FAMILY MEDICINE,**

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



**SAN YSIDRO HEALTH CHC -
 OCEAN VIEW, †**

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


**SAN YSIDRO HEALTH
 COMMUNITY HEIGHTS FAMILY
 MED,**

Provider ID: PG0094138003
 4690 EL CAJON BLVD
 SAN DIEGO, CA 92115
 (619) 662-4100
 Teleservice
 Effective as of 01-JAN-21

**SAN YSIDRO HEALTH
 PRECISION PARK,**



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

**SHERMAN HEIGHTS FAMILY
 HLTH CTRS INC,**

Provider ID: PG0082766003
 2391 ISLAND AVE
 SAN DIEGO, CA 92102
 (619) 515-2435




Effective as of 01-JAN-21

**ST VINCENT DE PAUL VILLAGE
 FAMILY HEALTH CENTER, *†**



Provider ID: PG0086361006
 1501 IMPERIAL AVE
 SAN DIEGO, CA 92101
 (619) 233-8500
 Teleservice
 Effective as of 01-JUL-22

GENERAL PRACTICE



CAMPBELL, BRIANNA, MD^F

Provider ID: 100360159011
 950 S EUCLID AVE
 SAN DIEGO, CA 92114
 (619) 662-4100
 Spanish
 Effective as of 01-AUG-24



DABROWSKI, THOMAS, MD^M

Provider ID: 100343180013
 11865 CARME MOUNTAIN
 RD
 STE 1104
 SAN DIEGO, CA 92128
 (858) 997-2583
 Effective as of 01-JUN-24



DABROWSKI, THOMAS, MD^M

Provider ID: 100343180011
 3900 5TH AVE STE 110
 SAN DIEGO, CA 92103
 (858) 554-1212
 Effective as of 01-APR-24




DABROWSKI, THOMAS, MD^M

Provider ID: 100343180012
 3900 5TH AVE STE 110
 SAN DIEGO, CA 92103
 (858) 554-1212
 Effective as of 01-JUN-24




DENYSIAK, JACQUELINE, MD^{F†}

Provider ID: 100363725006
 3969 4TH AVE STE 203
 SAN DIEGO, CA 92103
 (619) 294-6500
 Teleservice
 Effective as of 01-JAN-21




GUEFEN, URI, MD^M

Provider ID: 100072802030
 555 W C ST STE 102
 SAN DIEGO, CA 92101
 (858) 333-4977
 Spanish
 Effective as of 01-DEC-23




JEAN-MURAT, CAROLLE, MD^F

Provider ID: 100333052014
 4276 54TH PL STE C
 SAN DIEGO, CA 92115
 (619) 501-5511
 French, Spanish, Haitian
 Creole
 Effective as of 01-JAN-24

KIDOKORO, YASUKO, MD^{F†}

Provider ID: 100075657010
 5222 BALBOA AVE STE 31
 SAN DIEGO, CA 92117
 (858) 277-9669
 Japanese
 Teleservice
 Effective as of 01-JUN-20

KIDOKORO, YASUKO, MD^{F†}




Provider ID: 100075657018
 5222 BALBOA AVE STE 31
 SAN DIEGO, CA 92117
 (858) 277-9669
 Japanese
 Teleservice
 Effective as of 01-MAY-22

KIDOKORO, YASUKO, MD^{F†}

Provider ID: 100075657015




C1. Lista de proveedores de la red

Proveedores de atención primaria

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




MIRKARIMI, MORTEZA, MD^{Mt}

Provider ID: 100084653010

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




MIRKARIMI, MORTEZA, MD^{Mt}

Provider ID: 100084653003

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




MIRKARIMI, MORTEZA, MD^{Mt}

Provider ID: 100084653009

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

RECALDE, FRANCISCO, MD^{Mt}

Provider ID: 100015266019

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

RECALDE, FRANCISCO, MD^{Mt}




Provider ID: 100015266017

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

Effective as of 01-AUG-20




RECALDE, FRANCISCO, MD^{Mt}

Provider ID: 100015266021

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

RECALDE, FRANCISCO, MD^{Mt}




Provider ID: 100015266020

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

INTERNAL MEDICINE




AL-SALEH, YADANI, MD^F

Provider ID: 100358544022

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



AL-SALEH, YADANI, MD^{Ft}

Provider ID: 100358544012

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

AL-SALEH, YADANI, MD^{Ft}




Provider ID: 100358544020

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

Effective as of 01-FEB-24




BELLA, ARCHIE, MD^M

Provider ID: 100272915018

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

BELLA, ARCHIE, MD^M

Provider ID: 100272915019

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




BUTLER, LISA, MD^{Ft}

Provider ID: 100068570008

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




CARAMBAS, CLARITA, MD^{Ft}

Provider ID: 100070756004

































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

CSAPOCZI, PETER, MD^M

Provider ID: 100187372011

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

C1. Lista de proveedores de la red
Proveedores de atención primaria

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

C1. Lista de proveedores de la red

Proveedores de atención primaria

FRANK, STEWART, MD^{M†}

Provider ID: 100018840004

4060 4TH AVE STE 605
SAN DIEGO, CA 92103

(619) 298-1318

Spanish

Effective as of 01-FEB-07

GAVRILYUK, IGOR, MD^{M†}

Provider ID: 100107169005

4060 4TH AVE STE 100
SAN DIEGO, CA 92103

(619) 718-9444

Russian, Ukrainian

Effective as of 01-SEP-09

GREEN, BILLIE, MD^{F††}

Provider ID: 100023101005

1101 FELSPAR ST
SAN DIEGO, CA 92109

(858) 483-1720

French

Effective as of 01-SEP-09

GREEN, BILLIE, MD^{F††}

Provider ID: 100023101004

1101 FELSPAR ST
SAN DIEGO, CA 92109

(858) 483-1720

French

Effective as of 01-AUG-05

GUHAROY, ASIM, MD^{M†}

Provider ID: 100107045016

4540 KEARNY VILLA RD
STE 106
SAN DIEGO, CA 92123

(858) 430-6656

Bengali, Hindi, Malayalam

Effective as of 01-OCT-23

GUHAROY, ASIM, MD^{M†}

Provider ID: 100107045009

4540 KEARNY VILLA RD
STE 106

SAN DIEGO, CA 92123

(858) 430-6656

Bengali, Hindi, Malayalam

Effective as of 01-SEP-20

GUHAROY, ASIM, MD^{M†}

Provider ID: 100107045011

4540 KEARNY VILLA RD
STE 106

SAN DIEGO, CA 92123

(858) 430-6656

Bengali, Hindi, Malayalam

Effective as of 01-JAN-21

GUHAROY, ASIM, MD^{M†}

Provider ID: 100107045012

4540 KEARNY VILLA RD
STE 106

SAN DIEGO, CA 92123

(858) 430-6656

Bengali, Hindi, Malayalam

Effective as of 01-MAR-23

GUHAROY, ASIM, MD^{M†}

Provider ID: 100107045003

4540 KEARNY VILLA RD
STE 106

SAN DIEGO, CA 92123

(858) 430-6656

Bengali, Hindi, Malayalam

Effective as of 01-APR-16

GUHAROY, ASIM, MD^M

Provider ID: 100107045014

4075 54TH ST
SAN DIEGO, CA 92105

(858) 430-6656

Bengali, Hindi, Malayalam

Effective as of 01-APR-23

HENDRICKS, MARK, MD^{M†}

Provider ID: 100055830004

2525 CAMINO DEL RIO S
STE 165

SAN DIEGO, CA 92108

(619) 543-9655

Effective as of 01-AUG-22

HENRY, ANEEL, MD^M

Provider ID: 100418814002

6386 ALVARADO CT STE
101

SAN DIEGO, CA 92120

(858) 554-1212

Effective as of 01-DEC-23

HENRY, ANEEL, MD^M

Provider ID: 100418814003

6386 ALVARADO CT STE
101

SAN DIEGO, CA 92120

(858) 554-1212

Effective as of 01-APR-24

HENRY, ANEEL, MD^{M*}

Provider ID: 100418814004

6386 ALVARADO CT STE
101

SAN DIEGO, CA 92120

(858) 554-1212

Effective as of 01-APR-24

HINOJOSA-VALENCIA, ALEJANDRO, MD^M

Provider ID: 100108386020

2939 BEYER BLVD
SAN DIEGO, CA 92154

(619) 423-0343

Spanish

Effective as of 01-MAY-24

HUA, NATHAN, MD^M

Provider ID: 100408831002

7345 LINDA VISTA RD STE A
SAN DIEGO, CA 92111

(858) 277-5463

Vietnamese

Effective as of 01-JUN-23

HUYNH, ANDREW, MD^M

C1. Lista de proveedores de la red

Proveedores de atención primaria

Provider ID: 100427366002

📍 4551 EL CAJON BLVD
SAN DIEGO, CA 92115

☎ (619) 280-7185

Teleservice

Effective as of 01-APR-24

KHANNA, POORNIMA, MD^F

Provider ID: 100334522010

📍 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

☎ (619) 255-9155

Effective as of 01-JAN-21

KHEHAR, BHUPINDER, MD^{M†}

Provider ID: 100110360008

📍 3260 3RD AVE
SAN DIEGO, CA 92103

☎ (619) 297-3737

📄 Hindi, Punjabi, Swahili

Effective as of 01-JAN-21

KINGSBURY, A GRANT, MD^{M†}

Provider ID: 100063083007

📍 4060 4TH AVE STE 102
SAN DIEGO, CA 92103

☎ (619) 298-2900

Effective as of 01-NOV-22

MAI, KENNY, DO^M

Provider ID: 100169616003

📍 8901 ACTIVITY RD STE 205
SAN DIEGO, CA 92126

☎ (858) 779-9919

📄 Vietnamese

Effective as of 01-MAY-24

MAI, KENNY, DO^M

Provider ID: 100169616004

📍 8901 ACTIVITY RD STE 205
SAN DIEGO, CA 92126

☎ (858) 779-9919

📄 Vietnamese

Effective as of 01-JUL-24

MOSSON, MARK, MD^{M†}

Provider ID: 100176768003

📍 4060 4TH AVE STE 505
SAN DIEGO, CA 92103

☎ (619) 298-1318

Effective as of 01-AUG-13

NAJAR, FAUZI, MD^{M*}

Provider ID: 100390568005

📍 3490 PALM AVE
SAN DIEGO, CA 92154

☎ (619) 423-5616

📄 Arabic

Effective as of 01-JUN-23

NAJAR, FAUZI, MD^M

Provider ID: 100390568003

📍 3490 PALM AVE
SAN DIEGO, CA 92154

☎ (619) 423-5616

📄 Arabic

Effective as of 01-DEC-22

NAJAR, FAUZI, MD^M

Provider ID: 100390568007

📍 3490 PALM AVE
SAN DIEGO, CA 92154

☎ (619) 423-5616

📄 Arabic

Effective as of 01-OCT-23

NAJAR, FAUZI, MD^M

Provider ID: 100390568002

📍 3490 PALM AVE
SAN DIEGO, CA 92154

☎ (619) 423-5616

📄 Arabic

Effective as of 01-AUG-22

NARAYANAN,

PRIYADHARSHINI, MD^F

Provider ID: 100355661006

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

☎ (858) 554-1212

Teleservice

Effective as of 01-MAY-24

OLIVER, DEANNA, MD^{F†}

Provider ID: 100328564035

📍 995 GATEWAY CENTER
WAY

SAN DIEGO, CA 92102

☎ (619) 264-1935

📄 Spanish

Effective as of 01-SEP-22

QUINONEZ, JOSE, MD^M

Provider ID: 100085905004

📍 250 MARKET ST
SAN DIEGO, CA 92101

☎ (619) 239-9675

📄 Spanish

Effective as of 01-FEB-07

RAMINENI, NEELAKANTAN, MD^{M†}

Provider ID: 100051318002

📍 4537 COLLEGE AVE
SAN DIEGO, CA 92115

☎ (619) 265-0504

📄 Spanish, Telugu

Effective as of 01-FEB-07

RAMINENI, NEELAKANTAN, MD^{M†}

Provider ID: 100051318005

📍 4537 COLLEGE AVE
SAN DIEGO, CA 92115

☎ (619) 265-0504

📄 Spanish, Telugu

Effective as of 01-NOV-18

RIADH, MAYSAM, MD^F

Provider ID: 100413125002

📍 3260 3RD AVE
SAN DIEGO, CA 92103

☎ (619) 297-3737

📄 Arabic

C1. Lista de proveedores de la red

Proveedores de atención primaria

Effective as of 01-SEP-23

SHAJAN, JOSHAN, MD^M

Provider ID: 100422554002

3863 CLAIREMONT DR
SAN DIEGO, CA 92117

(858) 483-5570

Spanish

Effective as of 01-FEB-24

SHAMSINEJAD BABAKI, ARASH, MD^M

Provider ID: 100107114026

1666 PRECISION PARK LN
SAN DIEGO, CA 92173

(619) 662-4100

Farsi

Effective as of 01-JUL-24

SHI, RONG, MD^{F†}

Provider ID: 100133432007

3260 3RD AVE
SAN DIEGO, CA 92103

(619) 297-3737

Mandarin

Effective as of 01-AUG-15

SPECKART, PAUL, MD^{M†}

Provider ID: 100053933006

3260 3RD AVE
SAN DIEGO, CA 92103

(619) 297-3737

Effective as of 01-FEB-07

SULIMAN, ASHRAF, MD^{M*}

Provider ID: 100439094002

3490 PALM AVE
SAN DIEGO, CA 92154

(619) 423-5616

Effective as of 01-OCT-24

SZMIDT, MARIA, MD^F

Provider ID: 100108398006

12395 EL CAMINO REAL
STE 100

SAN DIEGO, CA 92130

(858) 259-5655

Polish, Russian, Spanish

Effective as of 01-JUL-04

TESSIER, ADLA, MD^F

Provider ID: 100077390010

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

(619) 255-9155

Spanish

Effective as of 01-JUN-23

VASANI, DHWANISHIVA, MD^F

Provider ID: 100317624004

12843 EL CAMINO REAL
STE 203

SAN DIEGO, CA 92130

(858) 554-1212

Gujarati, Hindi, Spanish

Effective as of 01-MAY-24

VILLA, MARIA, MD^{F†}

Provider ID: 100111602014

655 SATURN BLVD STE J
SAN DIEGO, CA 92154

(619) 575-4442

Spanish, Tagalog

Effective as of 01-JAN-21

WAGNER, PAUL, MD^M

Provider ID: 100088692006

4060 4TH AVE STE 100
SAN DIEGO, CA 92103

(619) 718-9444

Spanish

Effective as of 01-JAN-08

WATTS, ELI, MD^{M†}

Provider ID: 100384223003

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114

(619) 662-4100

Spanish

Effective as of 01-MAR-22

WILLGING, STEFAN, MD^{M†}

Provider ID: 100106507003

4060 4TH AVE STE 505
SAN DIEGO, CA 92103

(619) 298-1318

German

Effective as of 01-FEB-07

WILLIAMS, HOWARD, MD^{M†}

Provider ID: 100070298003

4060 4TH AVE STE 505
SAN DIEGO, CA 92103

(619) 298-1318

Spanish

Effective as of 01-FEB-07

WOODALL, GARY, MD^{M†}

Provider ID: 100096806003

2970 5TH AVE STE 140
SAN DIEGO, CA 92103

(619) 260-3456

Effective as of 01-FEB-07

FAMILY PRACTICE

ASHIZAWA, JAMES, MD^{M††}

Provider ID: 100056553008

31001 RANCHO VIEJO RD
STE 200

SAN JUAN CAPISTRANO,
CA 92675

(949) 661-9600

Japanese, Spanish

Effective as of 01-JUL-15

GIGER, ANTON, DO^{M†}

Provider ID: 100164128006

31001 RANCHO VIEJO RD
STE 200

SAN JUAN CAPISTRANO,
CA 92675

(949) 661-9600

Effective as of 01-OCT-15

GONZALEZ, DAVID, MD^{M†}

C1. Lista de proveedores de la red

Proveedores de atención primaria

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

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

HONG, ANDREW, MD^{M†}
Provider ID: 100043550008
31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675
(949) 661-9600
Effective as of 01-OCT-15

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

NAFICY, K, MD^{M†}
Provider ID: 100104435016
30448 RANCHO VIEJO RD
STE 150
SAN JUAN CAPISTRANO,
CA 92675

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

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

PANDY, LIZANDER, DO^{M†}
Provider ID: 100113474013
31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675
(949) 661-9600
Spanish
Effective as of 01-OCT-21

PANDY, LIZANDER, DO^{M†}
Provider ID: 100113474012
31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675
(949) 661-9600
Spanish
Effective as of 01-OCT-21

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

SHRESTHA, ALINA, MD^{F*}
Provider ID: 100436871002
31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675
(949) 661-9600
Effective as of 01-NOV-24

TRINH, MIMI, MD^{F†}
Provider ID: 100105591008
31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675
(949) 661-9600
Vietnamese
Effective as of 01-JUL-15

ZHENG, VINCENT, DO^{M†}
Provider ID: 100393531003
31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675
(949) 661-9600
Effective as of 01-SEP-22

ZHENG, VINCENT, DO^{M†}
Provider ID: 100393531002
31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675
(949) 661-9600
Effective as of 01-SEP-22

INTERNAL MEDICINE

FORTMANN, DANIEL, MD^{M*}
Provider ID: 100017458004
32281 CAMINO CPSTRN
C102
SAN JUAN CAPISTRANO,

CI. Lista de proveedores de la red

Proveedores de atención primaria

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

NGUYEN, THUYTRANG, MD^{F†}

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

FAMILY PRACTICE

HALIM, NEIL, MD^M

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

ROCHA, CLAUDIA, MD^F

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

WILLIE, KADEN, DO^M

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

FQHC

TRUECARE,

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

TRUECARE,

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

INTERNAL MEDICINE

NGUYEN, MINH, MD^M

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

TOLENTINO, ARTURO, MD^M

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

WITCZAK, IZABELA, MD^{F†}

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

FAMILY PRACTICE

ALVAREZ-ESTRADA, MIGUEL, MD^{M†}

Provider ID: 100360099010

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

ALVAREZ-ESTRADA, MIGUEL, MD^{M†}

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

ARRIETA, NOEMI, DO^F

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

ARRIETA, NOEMI, DO^F

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

CARRIEDO-CENICEROS, MARIA, MD^{F†}

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

CUTLER, MICHAEL, MD^M

Provider ID: 100225708024

C1. Lista de proveedores de la red

Proveedores de atención primaria

4630 BORDER VILLAGE RD
STE H
SAN YSIDRO, CA 92173

(619) 264-2591

Russian, Spanish

Effective as of 01-APR-24

CUTLER, MICHAEL, MD^M

Provider ID: 100225708025

4630 BORDER VILLAGE RD
STE H
SAN YSIDRO, CA 92173

(619) 264-2591

Russian, Spanish

Effective as of 01-APR-24

CUTLER, MICHAEL, MD^M

Provider ID: 100225708022

4630 BORDER VILLAGE RD
STE H
SAN YSIDRO, CA 92173

(619) 264-2591

Russian, Spanish

Effective as of 01-JAN-24

DAVIS, CHARLES, MD^M

Provider ID: 100433314003

4004 BEYER BLVD
SAN YSIDRO, CA 92173

(619) 662-4100

Effective as of 01-SEP-24

LEE, JOSEPH, MD^{M†}

Provider ID: 100368709004

3364 BEYER BLVD
SAN YSIDRO, CA 92173

(619) 662-4100

Teleservice

Effective as of 01-AUG-21

LEPEZ, DAVID, MD^{M†}

Provider ID: 100255267005

4004 BEYER BLVD
SAN YSIDRO, CA 92173

(619) 662-4100

Spanish

Effective as of 01-APR-23

LEPEZ, DAVID, MD^{M†}

Provider ID: 100255267002

4004 BEYER BLVD
SAN YSIDRO, CA 92173

(619) 662-4100

Spanish

Effective as of 01-NOV-15

MANSOUR, SABAH, MD^{M*}

Provider ID: 100436982002

4004 BEYER BLVD
SAN YSIDRO, CA 92173

(619) 662-4100

Effective as of 01-AUG-24

MOYA, MARY, MD^{F*}

Provider ID: 100099596010

4004 BEYER BLVD
SAN YSIDRO, CA 92173

(619) 662-4100

Spanish

Effective as of 01-APR-23

MOYA, MARY, MD^F

Provider ID: 100099596013

4004 BEYER BLVD
SAN YSIDRO, CA 92173

(619) 662-4100

Spanish

Effective as of 01-SEP-24

NAVARRO, VANESSAMARIA, MD^{F†}

Provider ID: 100173914015

1666 PRECISION PARK LN
SAN YSIDRO, CA 92173

(619) 662-4100

Filipino, Spanish, Tagalog

Effective as of 01-AUG-22

NAVARRO, VANESSAMARIA, MD^{F†}

Provider ID: 100173914012

3364 BEYER BLVD STE 103
SAN YSIDRO, CA 92173

(619) 662-4100

Filipino, Spanish, Tagalog

Effective as of 01-JAN-21

ORTEGA, LUIS, MD^{M†}

Provider ID: 100394387007

4004 BEYER BLVD
SAN YSIDRO, CA 92173

(619) 662-4100

Spanish

Teleservice

Effective as of 01-JUN-24

ORTEGA, LUIS, MD^{M†}

Provider ID: 100394387002

4004 BEYER BLVD
SAN YSIDRO, CA 92173

(619) 662-4100

Spanish

Teleservice

Effective as of 01-OCT-22

RAJAIPOUR, NEGIN, MD^{F†}

Provider ID: 100300998007

3364 BEYER BLVD
SAN YSIDRO, CA 92173

(619) 662-4100

Farsi, Persian

Effective as of 01-JAN-21

RIDGE, NEAL, DO^{M†}

Provider ID: 100356750008

4004 BEYER BLVD
SAN YSIDRO, CA 92173

(619) 662-4100

Effective as of 01-JAN-21

RODRIGUEZ, NATALIE, MD^F


Provider ID: 100382891002




4004 BEYER BLVD
SAN YSIDRO, CA 92173



(619) 662-4100




CI. Lista de proveedores de la red



Proveedores de atención primaria

 Spanish
Teleservice
Effective as of 01-JAN-22



SNYDER, CHRISTOPHER, DO^{M†}
Provider ID: 100024789042
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 (619) 662-4100
 Spanish
Effective as of 01-JAN-21

STALEY, MICHAELA, MD^{F†}
Provider ID: 100359422003
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 (619) 662-4100
Effective as of 01-JAN-21



TALAVERA, GREGORY, MD^M
Provider ID: 100334847007
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 (619) 662-4100
 Spanish
Teleservice
Effective as of 01-APR-23



WEN, AKI YEN CHANG, DO^M
Provider ID: 100229198010
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 (619) 662-4100
Effective as of 01-AUG-24

FQHC




**SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR, †**
Provider ID: PG0047542012
 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 (619) 662-4100
Teleservice




Effective as of 01-JAN-21




**SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER, †**
Provider ID: PG0047448004
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 (619) 662-4100
Teleservice
Effective as of 01-JAN-21




**SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS,**
Provider ID: PG0047560015
 3364 BEYER BLVD
SAN YSIDRO, CA 92173
 (619) 662-4100
Teleservice
Effective as of 01-JAN-21




INTERNAL MEDICINE




DELAROSA, JOSE, MD^M
Provider ID: 100357668007
 1666 PRECISION PARK LN
SAN YSIDRO, CA 92173
 (619) 662-4100
 Tagalog
Effective as of 01-SEP-24




DELAROSA, JOSE, MD^M
Provider ID: 100357668008
 1666 PRECISION PARK LN
SAN YSIDRO, CA 92173
 (619) 662-4100
 Tagalog
Effective as of 01-SEP-24




DILLON, BENEDICT, MD^{M††}
Provider ID: 100166636010
 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 (619) 662-4100
 Spanish
Effective as of 01-JAN-21

DILLON, BENEDICT, MD^M
Provider ID: 100166636015
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 (619) 662-4100
 Spanish
Effective as of 01-SEP-24

DILLON, BENEDICT, MD^{M†}
Provider ID: 100166636014
 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 (619) 662-4100
 Spanish
Effective as of 01-SEP-24

**RAMIREZSANCHEZ, CLAUDIA,
MD^{F†}**
Provider ID: 100392011002
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 (619) 662-4100
 Spanish
Effective as of 01-AUG-22

SALERNO, MARIANA, MD^{F†}
Provider ID: 100287873007
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 (619) 662-4100
 Spanish
Teleservice
Effective as of 01-MAR-21

**SCHNEIDER-MUNOZ,
MARGARITA, MD^F**
Provider ID: 100335002005
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 (619) 662-4100
 Spanish
Effective as of 01-SEP-24

FAMILY PRACTICE

C1. Lista de proveedores de la red


Proveedores de atención primaria

ADEMA, DONALD, DO^M

Provider ID: 100086591006

 10201 MISSION GORGE RD
STE M

SANTEE, CA 92071

 (619) 596-5445


Effective as of 01-JAN-14


INTERNAL MEDICINE

CORBIN, DAVID, MD^{M†}

Provider ID: 100378968002

 120 TOWN CENTER PKWY
SANTEE, CA 92071

 (619) 662-4100

 Hungarian


Teleservice


Effective as of 01-NOV-21

CORBIN, DAVID, MD^{M†}

Provider ID: 100378968006

 120 TOWN CENTER PKWY
SANTEE, CA 92071

 (619) 662-4100

 Hungarian


Teleservice

Effective as of 01-JUN-24

GUERRA, JACQUELINE, MD^{F†}

Provider ID: 100324693009

 120 TOWN CENTER PKWY
SANTEE, CA 92071

 (619) 873-3476


Teleservice

Effective as of 01-JUN-24

GUERRA, JACQUELINE, MD^{F†}

Provider ID: 100324693006

 120 TOWN CENTER PKWY
SANTEE, CA 92071

 (619) 873-3476

Teleservice


Effective as of 01-MAR-21

FAMILY PRACTICE

VOURLITIS, MELISSA, DO^{F*}

Provider ID: 100090572017

 850 DEL MAR DOWNS RD
SOLANA BEACH, CA 92075

 (858) 832-2500

Teleservice

Effective as of 01-NOV-23

INTERNAL MEDICINE


NARAYANAN,

PRIYADHARSHINI, MD^F

Provider ID: 100355661007

 665 SAN RODOLFO DR STE
1104

SOLANA BEACH, CA 92075

 (858) 266-9551

Teleservice


Effective as of 01-MAY-24

FAMILY PRACTICE

AFFLALO, SUZANNE, MD^F

Provider ID: 100402675004

 10225 AUSTIN DR STE 105
SPRING VALLEY, CA 91978

 (858) 648-0755

Teleservice


Effective as of 01-SEP-23

FQHC

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC,

Provider ID: PG0025044038

 8788 JAMACHA RD
SPRING VALLEY, CA 91977

 (619) 515-2555


Effective as of 01-JAN-21

FAMILY PRACTICE

BEHNAWA, SUSAN, MD^{F†}

Provider ID: 100343610010

 27190 SUN CITY BLVD
SUN CITY, CA 92586

 (951) 676-4193


Teleservice

Effective as of 01-NOV-20

BEHNAWA, SUSAN, MD^{F†}

Provider ID: 100343610004

 27190 SUN CITY BLVD
SUN CITY, CA 92586


 (951) 676-4193


Teleservice

Effective as of 01-JAN-20

GANTA, SANYASI, MD^{M†}

Provider ID: 100113069012

 26960 CHERRY HILLS
BLVD STE A
SUN CITY, CA 92586

 (951) 672-2856


 Hindi, Spanish, Telugu


Teleservice

Effective as of 01-APR-21

GANTA, SANYASI, MD^{M†}

Provider ID: 100113069006

 26960 CHERRY HILLS
BLVD STE A
SUN CITY, CA 92586

 (951) 672-2856


 Hindi, Spanish, Telugu


Teleservice

Effective as of 01-AUG-16

GANTA, SANYASI, MD^{M†}

Provider ID: 100113069009

 26960 CHERRY HILLS
BLVD STE A
SUN CITY, CA 92586

 (951) 672-2856




 Hindi, Spanish, Telugu

Teleservice

Effective as of 01-NOV-17




C1. Lista de proveedores de la red
Proveedores de atención primaria

SCHOONMAKER, JOHN, DO^{M†}

Provider ID: 100064979020
 29826 HAUN RD STE 300
 SUN CITY, CA 92586
 (951) 679-7022
 Spanish
 Effective as of 01-SEP-22




GENERAL PRACTICE

JEAN-MURAT, CAROLLE, MD^{F†}




Provider ID: 100333052006
 29826 HAUN RD STE 102
 SUN CITY, CA 92586
 (619) 501-5511
 French, Spanish, Haitian Creole
 Effective as of 01-AUG-19

INTERNAL MEDICINE



NGUYEN, THANG, MD^{M†}

Provider ID: 100068936002
 27830 BRADLEY RD
 SUN CITY, CA 92586
 (951) 679-2358
 Vietnamese
 Teleservice
 Effective as of 01-SEP-09

NGUYEN, DAVID, MD^M




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

STANFORD, DAVID, MD^{M†}




Provider ID: 100030388002
 29798 HAUN RD STE 308
 SUN CITY, CA 92586
 (951) 301-7611
 Teleservice
 Effective as of 01-SEP-09

FAMILY PRACTICE




AKLADEOS, NERMEEN, MD^F

Provider ID: 100399707003
 28780 SINGLE OAK DR STE
 160
 TEMECULA, CA 92590
 (951) 676-4193
 Arabic, Swahili
 Teleservice
 Effective as of 01-AUG-23




AYON MARTINEZ, CARLOS, MD^M

Provider ID: 100152029007
 41715 WINCHESTER RD
 TEMECULA, CA 92590
 (951) 694-9449
 Spanish
 Effective as of 01-AUG-20


AYON MARTINEZ, CARLOS, MD^M



Provider ID: 100152029006
 41840 ENTERPRISE CIR N
 TEMECULA, CA 92590
 (619) 440-2751
 Spanish
 Effective as of 01-AUG-20

BAILEY, CRISTINA, MD^{F†}



Provider ID: 100060834004
 28780 SINGLE OAK DR STE
 160
 TEMECULA, CA 92590
 (951) 676-4193
 Spanish
 Effective as of 01-JUN-04

BAILEY, CRISTINA, MD^{F†}



Provider ID: 100060834010
 28780 SINGLE OAK DR STE
 160
 TEMECULA, CA 92590

 (951) 676-4193
 Spanish
 Effective as of 01-NOV-20




BERNARDO, STACEY, DO^F

Provider ID: 100377889003
 28780 SINGLE OAK DR STE
 160
 TEMECULA, CA 92590
 (951) 676-4193
 Teleservice
 Effective as of 01-DEC-21




BLOSSER, JOSHUA, DO^M

Provider ID: 100422006002
 31537 RANCHO PUEBLO
 RD STE 102
 TEMECULA, CA 92592
 (833) 867-4642
 Effective as of 01-JUL-24



BRIGGS, BRIDGET, MD^F

Provider ID: 100069323005
 31170 TEMECULA PKWY
 STE 100
 TEMECULA, CA 92592
 (951) 698-6090
 Spanish
 Effective as of 01-JAN-16

CAMARILLO, DANIEL, MD^{M†}

Provider ID: 100110735016
 28780 SINGLE OAK DR STE
 160
 TEMECULA, CA 92590
 (951) 676-4193
 Spanish
 Effective as of 01-NOV-20

CAMARILLO, DANIEL, MD^{M†}

Provider ID: 100110735008
 28780 SINGLE OAK DR STE
 160
 TEMECULA, CA 92590
 (951) 676-4193

CI. Lista de proveedores de la red

Proveedores de atención primaria

 Spanish


Effective as of 01-MAR-12

COBIAN, VANESSA, MD^F

Provider ID: 100350271006

 31537 RANCHO PUEBLO RD STE 102

TEMECULA, CA 92592


 (833) 684-4642

Effective as of 01-JUL-24

COBIAN, VANESSA, MD^F

Provider ID: 100350271003

 41840 ENTERPRISE CIR N TEMECULA, CA 92590

 (951) 225-6400


Effective as of 01-MAR-22

COMBS, MATTHEW, MD^{M†}

Provider ID: 100337168003

 28780 SINGLE OAK DR STE 160

TEMECULA, CA 92590

 (951) 676-4193


Effective as of 01-DEC-18

COMBS, WALTER, MD^{M†}

Provider ID: 100085605005

 28780 SINGLE OAK DR STE 160

TEMECULA, CA 92590

 (951) 252-8650

 Spanish


Effective as of 01-JUN-04

COMBS, WALTER, MD^{M†}

Provider ID: 100085605012

 28780 SINGLE OAK DR STE 160

TEMECULA, CA 92590

 (951) 252-8650


 Spanish

Effective as of 01-NOV-20

DORR, KASIE, DO^F

Provider ID: 100422004002

 41840 ENTERPRISE CIR N TEMECULA, CA 92590

 (951) 225-6400


Effective as of 01-JAN-24

ELKAYAM, ISAK, MD^M

Provider ID: 100400487003

 31537 RANCHO PUEBLO RD STE 102

TEMECULA, CA 92592

 (833) 867-4642

 Hebrew, Spanish


Effective as of 01-JUL-24

IM, TAE WOONG, MD^{M†}

Provider ID: 100039015004

 28780 SINGLE OAK DR STE 160

TEMECULA, CA 92590

 (951) 676-4193

 Korean


Effective as of 01-JUN-04

JACKSON, ANITA, MD^{F†}

Provider ID: 100060861005

 44274 GEORGE CUSHMAN CT STE 212

TEMECULA, CA 92592

 (951) 694-4688

 Tagalog


Effective as of 01-NOV-11

MADRID, RICHARD, MD^{M†}

Provider ID: 100077741014

 28780 SINGLE OAK DR STE 160

TEMECULA, CA 92590

 (951) 676-4193


Effective as of 01-NOV-20

MADRID, RICHARD, MD^{M†}

Provider ID: 100077741005

 28780 SINGLE OAK DR STE 160

TEMECULA, CA 92590


 (951) 676-4193


Effective as of 01-OCT-05

MAJEED, WASAN, MD^F

Provider ID: 100398263003

 41840 ENTERPRISE CIR N TEMECULA, CA 92590

 (951) 225-6400

 Arabic


Effective as of 01-MAR-23

MCDONALD, MARY, MD^F

Provider ID: 100051408003

 31493 RANCHO PUEBLO RD STE 107

TEMECULA, CA 92592

 (951) 303-3337


Effective as of 01-OCT-09

MCDONALD, ROBERT, MD^{M†}

Provider ID: 100093825003

 31493 RANCHO PUEBLO RD STE 107

TEMECULA, CA 92592


 (951) 303-3337

Effective as of 01-OCT-09

MILLER, BRANDON, DO^{M†}

Provider ID: 100148562008

 31720 TEMECULA PKWY TEMECULA, CA 92592

 (951) 676-4193


Effective as of 01-OCT-11

MILLER, BRANDON, DO^{M†}

Provider ID: 100148562007

 28780 SINGLE OAK DR STE 160

TEMECULA, CA 92590

 (951) 676-4193



Effective as of 01-OCT-11

NWOSU, MICHAEL, MD^M

Provider ID: 100367685005




C1. Lista de proveedores de la red

Proveedores de atención primaria

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




POSTE, ALETHEA, MD^F

Provider ID: 100418802002

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




RAHMAN, MAISARA, MD^{F†}

Provider ID: 100083398023

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




RAHMAN, MAISARA, MD^{F†}

Provider ID: 100083398012

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


SCHULTZ, JAMES, MD^{M†}


Provider ID: 100030577018

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

SIMMONS, PAMELA, MD^{F†}




Provider ID: 100057995006

 28780 SINGLE OAK DR STE
160
TEMECULA, CA 92590

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




SIMPSON, NEAL, MD^{M†}

Provider ID: 100080404010

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



SIMPSON, NEAL, MD^{M†}

Provider ID: 100080404014

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



SKEOCH, GORDON, MD^M

Provider ID: 100101810002

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



VINCENT, WILLIAM, MD^{M†}

Provider ID: 100320230007

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




WISE, DOUGLAS, DO^{M††}

Provider ID: 100023557005

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




ZEBARJADI, OMID, DO^M

Provider ID: 100379100008

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




ZEBRACK, DAVID, DO^{M†}

Provider ID: 100064903010

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




ZEBRACK, DAVID, DO^{M†}

Provider ID: 100064903006

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

ZURITA, DANIELA, MD^{F†}




Provider ID: 100396617008

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

GENERAL PRACTICE

JEAN-MURAT, CAROLLE, MD^{F†}

Provider ID: 100333052011

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

C1. Lista de proveedores de la red
Proveedores de atención primaria

Effective as of 01-NOV-20

JEAN-MURAT, CAROLLE, MD^{F†}

Provider ID: 100333052007

31515 RANCHO PUEBLO RD
 STE 102
 TEMECULA, CA 92592

(619) 501-5511

French, Spanish, Haitian
 Creole

Effective as of 01-AUG-19

INTERNAL MEDICINE

BASCH, MICHAEL, MD^{M†}

Provider ID: 100011399007

41593 WINCHESTER RD
 STE 101
 TEMECULA, CA 92590

(951) 719-1111

Arabic, Spanish

Effective as of 01-SEP-09

BLOSSER, NICHELE, DO^F

Provider ID: 100411369003

28780 SINGLE OAK DR STE
 160
 TEMECULA, CA 92590

(951) 676-4193

Effective as of 01-NOV-23

GISI, SYLVIA, MD^F

Provider ID: 100100126002

31493 RANCHO PUEBLO
 RD STE 206
 TEMECULA, CA 92592

(951) 303-6158

Spanish

Teleservice

Effective as of 01-AUG-19

GOMER, JEREMY, MD^{M†}

Provider ID: 100379005002

27403 YNEZ RD STE 108
 TEMECULA, CA 92591

(951) 750-7888

Effective as of 01-NOV-21

KIM, IRENE, DO^F

Provider ID: 100380710003

28780 SINGLE OAK DR STE
 160
 TEMECULA, CA 92590

(951) 676-4193

Effective as of 01-JAN-22

HERMAN, SAM, MD^M

Provider ID: 100414181005

31951 DOVE CANYON DR
 TRABUCO CANYON, CA
 92679

(949) 557-0890

Effective as of 01-SEP-23

FAMILY PRACTICE

SCHULTZ, JAMES, MD^M

Provider ID: 100030577029

28477 LIZARD ROCKS RD
 VALLEY CENTER, CA 92082

(760) 742-9919

Farsi, Greek, Spanish

Effective as of 01-JAN-24

SCHULTZ, JAMES, MD^M

Provider ID: 100030577024

28477 LIZARD ROCKS RD
 VALLEY CENTER, CA 92082

(760) 742-9919

Farsi, Greek, Spanish

Effective as of 01-MAR-23

FQHC
**NEIGHBORHOOD
 HEALTHCARE,**

Provider ID: PG0024990061

28477 LIZARD ROCKS RD
 VALLEY CENTER, CA 92082

(760) 742-9919

Teleservice

Effective as of 01-FEB-24

FAMILY PRACTICE

CASTREJON, JOSEPH, MD^{M*}

Provider ID: 100097250007

2023 W VISTA WAY STE K
 VISTA, CA 92083

(760) 806-1406

Spanish

Effective as of 01-SEP-21

CLARK, MA BELEN, MD^{F††}

Provider ID: 100015309003

1954 VIA CTR STE B
 VISTA, CA 92081

(760) 529-9700

Tagalog

Effective as of 01-DEC-15

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

Provider ID: 100358800015

134 GRAPEVINE RD
 VISTA, CA 92083

(760) 631-5000

Spanish

Effective as of 01-JAN-24

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

Provider ID: 100358800014

1000 VALE TERRACE DR
 VISTA, CA 92084

(760) 631-5000

Spanish

Effective as of 01-JAN-24

FERBER, JEFFREY, MD^{M††}

Provider ID: 100092669014

1926 VIA CTR
 VISTA, CA 92081

(760) 940-7000

Effective as of 01-SEP-21


C1. Lista de proveedores de la red

Proveedores de atención primaria

HURD, MELISSA, MD^{F†}

Provider ID: 100054491003

 161 THUNDER DR STE 103
VISTA, CA 92083

 (760) 758-1988


 Spanish


Effective as of 01-JUL-13

LEONARD, LISA, MD^{F†}

Provider ID: 100278907004

 1000 VALE TERRACE DR
VISTA, CA 92084


 (760) 631-5000


 French, Spanish

Effective as of 01-OCT-21

NOVAK, LOREN, DO^{M†}

Provider ID: 100093766013

 1926 VIA CENTRE DRIVE
SUITE A
VISTA, CA 92081

 (760) 940-7000


 Spanish

Effective as of 01-SEP-21

ONG, DONALD, MD^{M†}

Provider ID: 100033027006

 1000 VALE TERRACE DR
VISTA, CA 92084

 (760) 631-5000


 Filipino, Spanish, Tagalog

Effective as of 01-JAN-24

POP, SIMONA, MD^{F†}

Provider ID: 100021772013

 145 THUNDER DR
VISTA, CA 92083

 (760) 941-9002

 Romanian


Effective as of 01-NOV-23

TRAN, DAO, DO^M

Provider ID: 100325638002

 134 GRAPEVINE RD

VISTA, CA 92083

 (760) 631-5000


 Vietnamese


Effective as of 01-JUL-19

TRAN, DAO, DO^M

Provider ID: 100325638014

 134 GRAPEVINE RD
VISTA, CA 92083

 (760) 631-5000


 Vietnamese


Effective as of 01-JAN-24

TRAN, DAO, DO^M

Provider ID: 100325638010

 134 GRAPEVINE RD
VISTA, CA 92083


 (760) 631-5000


 Vietnamese


Effective as of 01-MAR-20

TRAN, DAO, DO^M

Provider ID: 100325638009

 1000 VALE TERRACE DR
VISTA, CA 92084

 (760) 631-5000


 Vietnamese


Effective as of 01-MAR-20

FQHC

VCC DURIAN, †

Provider ID: PG0083886011

 105 DURIAN ST STE A
VISTA, CA 92083


 (844) 308-5003

Effective as of 01-JUL-22

VISTA COMMUNITY CLINIC GRAPEVINE,

Provider ID: PG0085050004

 134 GRAPEVINE RD
VISTA, CA 92083

 (760) 631-5000

Teleservice


Effective as of 01-JUL-22

GENERAL PRACTICE

ONG, DONALD, MD^{M†}

Provider ID: 100033027003

 1000 VALE TERRACE DR
VISTA, CA 92084

 (760) 631-5000


 Filipino, Spanish, Tagalog

Effective as of 01-DEC-10

ONG, DONALD, MD^{M†}

Provider ID: 100033027005

 1000 VALE TERRACE DR
VISTA, CA 92084

 (760) 631-5000


 Filipino, Spanish, Tagalog

Effective as of 01-MAR-20

SMITH, GREGORY, MD^{M*}

Provider ID: 100062596003

 161 THUNDER DR STE 207
VISTA, CA 92083

 (760) 598-8410


Effective as of 01-DEC-06

INTERNAL MEDICINE

BOQUIN, ENRIQUE, MD^M

Provider ID: 100062570003

 1000 VALE TERRACE DR
VISTA, CA 92084

 (760) 631-5000


 Spanish

Effective as of 01-DEC-07

BOQUIN, ENRIQUE, MD^M

Provider ID: 100062570008

 1000 VALE TERRACE DR
VISTA, CA 92084

 (760) 631-5000

 Spanish

Effective as of 01-JAN-24

BOQUIN, ENRIQUE, MD^M

C1. Lista de proveedores de la red

Proveedores de atención primaria

Provider ID: 100062570005

📍 1000 VALE TERRACE DR
VISTA, CA 92084

☎ (760) 631-5000

📄 Spanish

Effective as of 01-NOV-20

BRAR, KARANBIR, MD^{M†}

Provider ID: 100305037016

📍 1926 VIA CTR STE A
VISTA, CA 92081

☎ (760) 940-7000

Effective as of 01-SEP-21

CLANCY, TARA, DO^{F†}

Provider ID: 100265397003

📍 2375 S MELROSE DR
VISTA, CA 92081

☎ (760) 305-1900

Effective as of 01-JUL-16

CLANCY, JOHN, DO^{M†}

Provider ID: 100215810013

📍 2375 S MELROSE DR
VISTA, CA 92081

☎ (760) 305-1900

Effective as of 01-SEP-21

DAO, MARC, MD^M

Provider ID: 100307890014

📍 1000 VALE TERRACE DR
VISTA, CA 92084

☎ (760) 631-5000

📄 French, Vietnamese

Effective as of 01-JUN-23

DAO, MARC, MD^M

Provider ID: 100307890016

📍 1000 VALE TERRACE DR
VISTA, CA 92084

☎ (760) 631-5000

📄 French, Vietnamese

Effective as of 01-JAN-24

DAO, MARC, MD^M

Provider ID: 100307890010

📍 1000 VALE TERRACE DR
VISTA, CA 92084

☎ (760) 631-5000

📄 French, Vietnamese

Effective as of 01-FEB-23

HALPERIN, JASON, MD^M

Provider ID: 100400241004

📍 134 GRAPEVINE RD
VISTA, CA 92083

☎ (760) 631-5000

Effective as of 01-JAN-24

KOBAYASHI, GARY, MD^{M†}

Provider ID: 100090343008

📍 145 THUNDER DR STE 1
VISTA, CA 92083

☎ (760) 941-9002

Effective as of 01-SEP-21

LI, XIANGLI, MD^{F†}

Provider ID: 100239749009

📍 1926 VIA CTR STE A
VISTA, CA 92081

☎ (760) 940-7000

📄 Chinese

Effective as of 01-SEP-21

MOASIS, KAREEM, MD^M

Provider ID: 100379398004

📍 145 THUNDER DR
VISTA, CA 92083

☎ (760) 941-9002

📄 Arabic

Effective as of 01-JAN-24

NGUYEN, ETHAN, MD^M

Provider ID: 100362686005

📍 145 THUNDER DR
VISTA, CA 92083

☎ (760) 941-9002

📄 Vietnamese

Effective as of 01-AUG-22

RHIANNON, JULIA, MD^F

Provider ID: 100382647007

📍 105 DURIAN ST STE A
VISTA, CA 92083

☎ (760) 631-5000

Effective as of 01-SEP-22

RHIANNON, JULIA, MD^F

Provider ID: 100382647008

📍 105 DURIAN ST STE B
VISTA, CA 92083

☎ (760) 631-5000

Effective as of 01-SEP-22

RHIANNON, JULIA, MD^F

Provider ID: 100382647010

📍 105 DURIAN ST STE B
VISTA, CA 92083

☎ (760) 631-5000

Effective as of 01-JAN-24

RHIANNON, JULIA, MD^F

Provider ID: 100382647009

📍 1000 VALE TERRACE DR
VISTA, CA 92084

☎ (760) 631-5000

Effective as of 01-JAN-24

RHIANNON, JULIA, MD^F

Provider ID: 100382647006

📍 1000 VALE TERRACE DR
VISTA, CA 92084

☎ (760) 631-5000

Effective as of 01-SEP-22

RHIANNON, JULIA, MD^F

Provider ID: 100382647002

📍 1000 VALE TERRACE DR
VISTA, CA 92084

☎ (760) 631-5000

Effective as of 01-JAN-22


RUTMAN, MICHAEL, DO^{M†}



Provider ID: 100024612023




📍 2355 S MELROSE DR




C1. Lista de proveedores de la red

Proveedores de atención primaria



VISTA, CA 92081 Effective as of 01-JAN-22
 (760) 598-0088
Effective as of 01-JAN-21

RUTMAN, MICHAEL, DO^{M†}
Provider ID: 100024612005
 2355 S MELROSE DR
VISTA, CA 92081
 (760) 598-0088
Effective as of 01-OCT-00



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

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

FAMILY PRACTICE

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

INTERNAL MEDICINE

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

C1. Lista de proveedores de la red Médico de atención especializada

CERTIFIED NURSE PRACTITIONER

WONG, KRISTLE, NP

Provider ID: N/A

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

DERMATOLOGY

LANDER, JEFFREY, MD†

Provider ID: N/A

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

LANDER, JEFFREY, MD†

Provider ID: N/A

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

DEVELOPMENTAL

BEHAVIORAL PEDIATRICS

FELDMAN, GARY, MD†

Provider ID: N/A

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

ENDOCRINOLOGY

METABOLISM DIABETES

NADEAU, DANIEL, MD

Provider ID: N/A

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

NADEAU, DANIEL, MD

Provider ID: N/A

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

ROBERTSON, ASHA, MD

Provider ID: N/A

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

ROBERTSON, ASHA, MD

Provider ID: N/A

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

FAMILY PRACTICE

TUNG, CHESTER, DO

Provider ID: N/A

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

HEMATOLOGY / ONCOLOGY

IYER, LAXMI, MD†

Provider ID: N/A

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

IYER, LAXMI, MD†

Provider ID: N/A

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

IYER, LAXMI, MD†

Provider ID: N/A

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

IYER, LAXMI, MD†

Provider ID: N/A

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

IYER, LAXMI, MD†

Provider ID: N/A

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

POW-ANPONGKUL, PETE, MD†

Provider ID: N/A

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

INFECTIOUS DISEASE

BAILEY, CHARLES, MD†

Provider ID: N/A

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

BAILEY, CHARLES, MD†

Provider ID: N/A

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

NEUROLOGY

BIXBY, MINDY, DO

Provider ID: N/A

**C1. Lista de proveedores de la red
Médico de atención especializada**

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

BIXBY, MINDY, DO

Provider ID: N/A

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

BIXBY, MINDY, DO

Provider ID: N/A

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

BIXBY, MINDY, DO

Provider ID: N/A

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

BIXBY, MINDY, DO

Provider ID: N/A

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

BIXBY, MINDY, DO

Provider ID: N/A

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

Effective as of 01-JAN-23

LUDEMA, THOMAS, MD†

Provider ID: N/A

☐ 15 MAREBLU STE 250
ALISO VIEJO, CA 92656
Effective as of 01-OCT-18

LUDEMA, THOMAS, MD†

Provider ID: N/A

☐ 15 MAREBLU STE 250
ALISO VIEJO, CA 92656
Effective as of 01-OCT-18

MARTINEZ, KENNETH, MD

Provider ID: N/A

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

MARTINEZ, KENNETH, MD

Provider ID: N/A

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

MARTINEZ, KENNETH, MD

Provider ID: N/A

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

MARTINEZ, KENNETH, MD

Provider ID: N/A

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

MARTINEZ, KENNETH, MD

Provider ID: N/A

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

SALEHI, HAMID, MD†

Provider ID: N/A

☐ 26895 ALISO CREEK RD STE B302
ALISO VIEJO, CA 92656
Effective as of 01-JAN-18

OPTOMETRIST

NGUYEN, LETHUY, OD†

Provider ID: N/A

☐ 27001 MOULTON PKWY STE A100
ALISO VIEJO, CA 92656
Effective as of 01-JAN-18

PEDIATRICS

FELDMAN, GARY, MD†

Provider ID: N/A

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

FELDMAN, GARY, MD†

Provider ID: N/A

☐ 11 MAREBLU STE 200
ALISO VIEJO, CA 92656
Effective as of 01-NOV-18

YANNI, ELIZABETH, MD†

Provider ID: N/A

☐ 26671 ALISO CREEK RD STE 200
ALISO VIEJO, CA 92656*
Effective as of 01-JAN-21

PHYSICIANS ASSISTANT

GREEN, TRAVIS, PA

Provider ID: N/A

☐ 26671 ALISO CREEK RD STE 101
ALISO VIEJO, CA 92656*
Effective as of 01-MAY-23

C1. Lista de proveedores de la red Médico de atención especializada

PODIATRIST

ENG, STEVE, DPM†

Provider ID: N/A

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

ENG, STEVE, DPM†

Provider ID: N/A

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

ENG, STEVE, DPM†

Provider ID: N/A

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

ENG, STEVE, DPM†

Provider ID: N/A

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

ENG, STEVE, DPM†

Provider ID: N/A

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

HEHE, KYLE, DPM

Provider ID: N/A

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

HEHE, KYLE, DPM

Provider ID: N/A

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

PSYCHIATRY

MARTINEZ, KENNETH, MD

Provider ID: N/A

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

MARTINEZ, KENNETH, MD

Provider ID: N/A

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

MARTINEZ, KENNETH, MD

Provider ID: N/A

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

MARTINEZ, KENNETH, MD

Provider ID: N/A

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

MARTINEZ, KENNETH, MD

Provider ID: N/A

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

MARTINEZ, KENNETH, MD

Provider ID: N/A

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

MARTINEZ, KENNETH, MD

Provider ID: N/A

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

MARTINEZ, KENNETH, MD

Provider ID: N/A

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

MARTINEZ, KENNETH, MD

Provider ID: N/A

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

MARTINEZ, KENNETH, MD

Provider ID: N/A

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

PULMONARY DISEASES

GALKO, BARBARA, MD

Provider ID: N/A

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

SHAHINIAN, GEORGE, MD

Provider ID: N/A

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

SHAHINIAN, GEORGE, MD

Provider ID: N/A

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

SHAHINIAN, GEORGE, MD

Provider ID: N/A

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

SHAHINIAN, GEORGE, MD

Provider ID: N/A


📄 11 MAREBLU STE 200

C1. Lista de proveedores de la red Médico de atención especializada

ALISO VIEJO, CA 92656
Effective as of 01-MAR-24

SHAHINIAN, GEORGE, MD


Provider ID: N/A

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

SURGERY GENERAL


RUSSO, MICHAEL, MD†

Provider ID: N/A

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


RUSSO, MICHAEL, MD†

Provider ID: N/A

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

RUSSO, MICHAEL, MD†

Provider ID: N/A


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

SURGERY

NEUROLOGICAL


MEHTA, VIKRAM, MD

Provider ID: N/A

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

MEHTA, VIKRAM, MD

Provider ID: N/A


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

CERTIFIED NURSE

PRACTITIONER

SANDERS, JESSICA, NP†

Provider ID: N/A

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901


Teleservice

Effective as of 01-NOV-22

CHIROPRACTOR

KELCHNER, MATTHEW, DC†


Provider ID: N/A

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

Effective as of 01-JAN-21

PHILLIPS, KATHERINE, DC

Provider ID: N/A

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

Effective as of 01-FEB-24

FAMILY PRACTICE

VANHOLLEBEKE, RACHEL, MD

Provider ID: N/A


 1620 ALPINE BLVD
ALPINE, CA 91901

Effective as of 01-JUN-23

INTERNAL MEDICINE

VANHOLLEBEKE, RACHEL, MD


Provider ID: N/A

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901*

Effective as of 01-JUL-24

VANHOLLEBEKE, RACHEL, MD

Provider ID: N/A

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

Effective as of 01-JUL-24

LICENSED CLINICAL

SOCIAL WORKER

KHALEEL, AMMAR, LCSW

Provider ID: N/A


 1620 ALPINE BLVD
ALPINE, CA 91901

Effective as of 01-NOV-22

OPHTHALMOLOGY

BINDER, NICHOLAS, MD†


Provider ID: N/A

 1620 ALPINE BLVD STE 117
ALPINE, CA 91901

Effective as of 01-JAN-21

BINDER, NICHOLAS, MD†


Provider ID: N/A

 1620 ALPINE BLVD STE 117
ALPINE, CA 91901

Effective as of 01-SEP-22

CHANG, TOM, MD†


Provider ID: N/A

 1620 ALPINE BLVD STE 117
ALPINE, CA 91901

Effective as of 01-SEP-22

PATEL, SARJAN, MD†


Provider ID: N/A

 1620 ALPINE BLVD STE 117
ALPINE, CA 91901

Effective as of 01-SEP-22

PATEL, GITANE, MD†

Provider ID: N/A


 1620 ALPINE BLVD STE 117
ALPINE, CA 91901

Effective as of 01-SEP-22

PATEL, GITANE, MD†


Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

 1620 ALPINE BLVD STE 117
ALPINE, CA 91901
Effective as of 01-MAR-18


PATEL, GITANE, MD†

Provider ID: N/A

 1620 ALPINE BLVD STE 117
ALPINE, CA 91901
Effective as of 01-AUG-20

PATEL, GITANE, MD†


Provider ID: N/A

 1620 ALPINE BLVD STE 117
ALPINE, CA 91901
Effective as of 01-JAN-21

OPTOMETRIST


AOTO, KIM, OD†

Provider ID: N/A

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


DYER, SHARON, OD†

Provider ID: N/A

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


DYER, SHARON, OD†

Provider ID: N/A

 1620 ALPINE BLVD STE 117
ALPINE, CA 91901
Effective as of 01-JAN-21

MARR, RYAN, OD

Provider ID: N/A

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

MARR, RYAN, OD


Provider ID: N/A

 1620 ALPINE BLVD STE 117

ALPINE, CA 91901
Effective as of 01-JUL-24

ZVANUT, DONALD, OD


Provider ID: N/A

 1620 ALPINE BLVD STE 117
ALPINE, CA 91901
Effective as of 01-AUG-24

PSYCHOLOGIST


FRITZ, JENNIFER, PhD†

Provider ID: N/A

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


FRITZ, JENNIFER, PhD†

Provider ID: N/A

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


SMITH, STEPHANIE, PhD†

Provider ID: N/A

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


SMITH, STEPHANIE, PhD†

Provider ID: N/A

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


TORRES, RANDALL, PSYD

Provider ID: N/A

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

TORRES, RANDALL, PSYD


Provider ID: N/A

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

OPTOMETRIST

HOLMSTROM, STEVEN, OD†


Provider ID: N/A

 31722 RAILROAD CANYON
RD
CANYON LAKE, CA 92587
Effective as of 01-JUL-23

ANESTHESIOLOGY PAIN MANAGEMENT


MADHAV, SANDIP, MD†

Provider ID: N/A

 6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Teleservice
Effective as of 01-JAN-20


MADHAV, SANDIP, MD†

Provider ID: N/A

 6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Teleservice
Effective as of 01-JAN-21


PRASAD, RUPA, MD†

Provider ID: N/A

 6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Teleservice
Effective as of 01-NOV-21

PRASAD, RUPA, MD†

Provider ID: N/A

 6010 HIDDEN VALLEY RD
STE 200

C1. Lista de proveedores de la red Médico de atención especializada

CARLSBAD, CA 92011
Teleservice
Effective as of 01-NOV-23

AUDIOLOGIST

SERENO, EMILY, AuD

Provider ID: N/A
6010 HIDDEN VALLEY RD
CARLSBAD, CA 92008
Teleservice
Effective as of 01-MAY-24

CERTIFIED NURSE PRACTITIONER

BINAVI, HOWNAZ, NP†

Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 120
CARLSBAD, CA 92011
Effective as of 01-SEP-22

BISHOP, LESLIE, NP†

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

BISHOP, LESLIE, NP†

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

HALPERN, DAVID, NP†

Provider ID: N/A
1905 CALLE BARCELONA
STE 211
CARLSBAD, CA 92009

Effective as of 01-JAN-21

HOOPER, BONNIE, NP†

Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 120
CARLSBAD, CA 92011
Effective as of 01-JAN-21

HOOPER, BONNIE, NP†

Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 120
CARLSBAD, CA 92011
Effective as of 01-JAN-21

POLIZZI, BRITTANY, NP†

Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 120
CARLSBAD, CA 92011
Effective as of 01-SEP-22

POLIZZI, BRITTANY, NP†

Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 120
CARLSBAD, CA 92011
Effective as of 01-JAN-22

RICE, ELIZABETH, NP

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

SOLIC, DIANE, NP

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

SYMANSKI, ELIZABETH, NP†

Provider ID: N/A
1905 CALLE BARCELONA
STE 211
CARLSBAD, CA 92009
Teleservice
Effective as of 01-AUG-22

CHIROPRACTOR

BERRY, MICHAEL, DC

Provider ID: N/A
6986 EL CAMINO REAL STE
F
CARLSBAD, CA 92009
Effective as of 01-APR-15

MILLER, JAMES, DC

Provider ID: N/A
6986 EL CAMINO REAL STE
F
CARLSBAD, CA 92009
Effective as of 01-JUL-17

CLINICAL

NEUROPSYCHOLOGIST

ALASANTRO, LORI, PhD†

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

ALASANTRO, LORI, PhD†

Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-FEB-18

ALASANTRO, LORI, PhD†

Provider ID: N/A
6010 HIDDEN VALLEY RD

C1. Lista de proveedores de la red Médico de atención especializada

STE 200
CARLSBAD, CA 92011
Effective as of 01-SEP-22

KAUP, ALLISON, PhD[†]

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

DERMATOLOGY

ANGRA, KUNAL, MD[†]

Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 120
CARLSBAD, CA 92011
Effective as of 01-JUL-21

BUSCH, HEIDI, MD[†]

Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 120
CARLSBAD, CA 92011
Teleservice
Effective as of 01-MAR-23

RILEY, JESSICA, DO[†]

Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 120
CARLSBAD, CA 92011
Effective as of 01-JAN-21

RILEY, JESSICA, DO[†]

Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 120
CARLSBAD, CA 92011
Effective as of 01-NOV-23

RILEY, JESSICA, DO[†]

Provider ID: N/A
6010 HIDDEN VALLEY RD

STE 120
CARLSBAD, CA 92011
Effective as of 01-JAN-21

RILEY, JESSICA, DO[†]

Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 120
CARLSBAD, CA 92011
Effective as of 01-JAN-24

ZUBAIR, RAHEEL, MD

Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 120
CARLSBAD, CA 92011
Effective as of 01-JAN-24

ZUBAIR, RAHEEL, MD

Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 120
CARLSBAD, CA 92011
Effective as of 01-MAR-24

ZUBAIR, RAHEEL, MD

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

ZUBAIR, RAHEEL, MD

Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 120
CARLSBAD, CA 92011
Effective as of 01-NOV-23

FAMILY PRACTICE

CHAVEZSANTOS, MARIA, MD

Provider ID: N/A
1295 CARLSBAD VILLAGE
DR STE 100

CARLSBAD, CA 92008
Effective as of 01-JUN-24

MADHAV, KINJAL, MD[†]

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

HEARING AID DEALER / SUPPLIER

DAVIS, KELLE, MA[†]

Provider ID: N/A
1820 MARRON RD
CARLSBAD, CA 92008
Effective as of 01-JAN-21

DAVIS, KELLE, MA[†]

Provider ID: N/A
1820 MARRON RD STE 102
CARLSBAD, CA 92008
Effective as of 01-SEP-22

GALLAGHER, JEFFERY, MA

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

NEPHROLOGY

SAVANI, AMAN, MD

Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Teleservice
Effective as of 01-AUG-23

NEUROLOGY

C1. Lista de proveedores de la red Médico de atención especializada

BAKER, DAVID, DO

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Teleservice

Effective as of 01-JAN-24

BAKER, DAVID, DO

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Teleservice

Effective as of 01-JUN-24

BAKER, DAVID, DO

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Teleservice

Effective as of 01-DEC-23

CHOUDRY, BILAL, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-FEB-16

CHOUDRY, BILAL, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-FEB-16

CHOUDRY, BILAL, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-JAN-21

CHOUDRY, BILAL, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-JAN-21

DELANEY, MICHAEL, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Teleservice

Effective as of 01-JAN-21

DELANEY, MICHAEL, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Teleservice

Effective as of 01-NOV-22

DELANEY, MICHAEL, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Teleservice

Effective as of 01-SEP-21

DROKER, BRIAN, MD

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Teleservice

Effective as of 01-MAR-24

DROKER, BRIAN, MD

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Teleservice

Effective as of 01-DEC-23

DROKER, BRIAN, MD

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Teleservice

Effective as of 01-SEP-24

FARNSWORTH, WILLIAM, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Teleservice

Effective as of 01-FEB-22

FARNSWORTH, WILLIAM, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Teleservice

Effective as of 01-NOV-21

FARNSWORTH, WILLIAM, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Teleservice

Effective as of 01-JUN-24

FARNSWORTH, WILLIAM, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Teleservice

Effective as of 01-NOV-21

FRISHBERG, BENJAMIN, MD†

**C1. Lista de proveedores de la red
Médico de atención especializada**

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-SEP-21

FRISHBERG, BENJAMIN, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-SEP-22

FRISHBERG, BENJAMIN, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-FEB-16

FRISHBERG, BENJAMIN, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-FEB-16

FRISHBERG, BENJAMIN, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-21

HALL, JACOB, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-24

HAMILTON, ROSS, MD

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200

CARLSBAD, CA 92011*

Effective as of 01-OCT-24

HO, GILBERT, MD

Provider ID: N/A

5814 VAN ALLEN WAY STE
209
CARLSBAD, CA 92008
Effective as of 01-JAN-21

LANE, RICHARD, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-21

LANE, RICHARD, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-SEP-22

LANE, RICHARD, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-APR-24

LANE, RICHARD, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-DEC-23

LUHAR, RIYA, DO

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Teleservice

Effective as of 01-AUG-23

LUHAR, RIYA, DO

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Teleservice
Effective as of 01-JAN-23

LUHAR, RIYA, DO

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Teleservice
Effective as of 01-JAN-23

NIELSEN, AMY, DO†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-21

NIELSEN, AMY, DO†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-16

NIELSEN, AMY, DO†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-FEB-16

NIELSEN, AMY, DO†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-SEP-21

**C1. Lista de proveedores de la red
Médico de atención especializada**

NIELSEN, AMY, DO†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-MAR-21

OH, IRENE, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-SEP-22

OH, IRENE, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-FEB-16

OH, IRENE, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-21

OH, IRENE, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-21

OMURO, ARTHUR, DO†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-SEP-22

OMURO, ARTHUR, DO†

Provider ID: N/A

6010 HIDDEN VALLEY RD

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

PADUGA, REMIA, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-FEB-16

PADUGA, REMIA, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-24

QUESNELL, TARA, DO†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-24

QUESNELL, TARA, DO†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-NOV-23

QUESNELL, TARA, DO†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-SEP-21

SADOFF, MARK, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-FEB-16

SADOFF, MARK, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-FEB-16

SADOFF, MARK, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-21

SADOFF, MARK, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-21

SAVANI, AMAN, MD

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Teleservice

Effective as of 01-NOV-23

SAVANI, AMAN, MD

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Teleservice

Effective as of 01-JUN-24

SAVANI, AMAN, MD

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Teleservice

Effective as of 01-JUL-24

**C1. Lista de proveedores de la red
Médico de atención especializada**

SCHIM, JACK, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-FEB-16

SCHIM, JACK, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-21

SCHIM, JACK, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-21

WANG, ANCHI, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-21

WANG, ANCHI, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-21

WANG, CHUNYANG, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-21

WANG, CHUNYANG, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-FEB-16

WANG, ANCHI, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-FEB-16

WANG, CHUNYANG, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-FEB-16

WANG, ANCHI, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-FEB-16

WANG, ANCHI, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-SEP-21

WANG, CHUNYANG, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-24

WRIGHT, BRENTON, MD

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-AUG-23

YOSHII-CONTRERAS, JUNE, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-23

**NEUROPHYSIOLOGY
CLINICAL**

PADUGA, REMIA, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-NOV-23

OTOLARYNGOLOGY

ABDOU, RAMI, MD†

Provider ID: N/A

2390 FARADAY AVE
CARLSBAD, CA 92008
Effective as of 01-AUG-22

CALZADA, AUDREY, MD†

Provider ID: N/A

2390 FARADAY AVE
CARLSBAD, CA 92008
Effective as of 01-OCT-22

CHANG, EDWARD, MD

Provider ID: N/A

2390 FARADAY AVE
CARLSBAD, CA 92008
Effective as of 01-MAR-24

CHANG, EDWARD, MD

Provider ID: N/A

2390 FARADAY AVE
CARLSBAD, CA 92008
Effective as of 01-AUG-24

C1. Lista de proveedores de la red Médico de atención especializada

CHANG, EDWARD, MD

Provider ID: N/A

📍 2390 FARADAY AVE
CARLSBAD, CA 92008
Effective as of 01-SEP-24

DATE, AMIT, MD

Provider ID: N/A

📍 2390 FARADAY AVE
CARLSBAD, CA 92008
Teleservice
Effective as of 01-MAY-23

DONALDSON, CHADWICK, MD†

Provider ID: N/A

📍 2390 FARADAY AVE
CARLSBAD, CA 92008
Teleservice
Effective as of 01-JAN-21

DONALDSON, CHADWICK, MD†

Provider ID: N/A

📍 2390 FARADAY AVE
CARLSBAD, CA 92008
Teleservice
Effective as of 01-JAN-21

GOLDSZTEIN, HERNAN, MD†

Provider ID: N/A

📍 6010 HIDDEN VALLEY RD
STE 210
CARLSBAD, CA 92011
Effective as of 01-FEB-18

PAUL, SUPRITI, MD†

Provider ID: N/A

📍 6010 HIDDEN VALLEY RD
STE 210
CARLSBAD, CA 92011
Effective as of 01-FEB-22

SALGADO, MOSES, MD

Provider ID: N/A

📍 6010 HIDDEN VALLEY RD
STE 210
CARLSBAD, CA 92011
Effective as of 01-FEB-18

TIAN, QING, MD†

Provider ID: N/A

📍 2390 FARADAY AVE
CARLSBAD, CA 92008
Teleservice
Effective as of 01-JAN-21

TIAN, QING, MD†

Provider ID: N/A

📍 2390 FARADAY AVE
CARLSBAD, CA 92008
Teleservice
Effective as of 01-NOV-21

PHYSICAL MEDICINE / REHABILITATION

CURRY, JASON, MD†

Provider ID: N/A

📍 6121 PASEO DEL NORTE
STE 200
CARLSBAD, CA 92011
Teleservice
Effective as of 01-SEP-21

MADHAV, SANDIP, MD†

Provider ID: N/A

📍 6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Teleservice
Effective as of 01-JAN-21

TAHAEI, SEYED, MD†

Provider ID: N/A

📍 6010 HIDDEN VALLEY RD
STE 110
CARLSBAD, CA 92011

Teleservice

Effective as of 01-OCT-22

PHYSICIANS ASSISTANT

DEVERA, SARAH, PA

Provider ID: N/A

📍 2659 GATEWAY RD STE 106
CARLSBAD, CA 92009
Teleservice
Effective as of 01-APR-24

DRILLING, KATHERINE, PA

Provider ID: N/A

📍 1905 CALLE BARCELONA
STE 211
CARLSBAD, CA 92009
Effective as of 01-MAR-23

DU, SARAH, PA

Provider ID: N/A

📍 2390 FARADAY AVE
CARLSBAD, CA 92008
Teleservice
Effective as of 01-APR-24

FANNIN, HANA AH, PA

Provider ID: N/A

📍 2659 GATEWAY RD STE 106
CARLSBAD, CA 92009
Effective as of 01-JAN-23

GONZALEZ, NICOLETTE, PA

Provider ID: N/A

📍 1905 CALLE BARCELONA
STE 211
CARLSBAD, CA 92009
Teleservice
Effective as of 01-JUN-24

HASHAM, SOPHIA, PA

Provider ID: N/A

📍 2659 GATEWAY RD STE 106
CARLSBAD, CA 92009

**C1. Lista de proveedores de la red
Médico de atención especializada**

Teleservice

Effective as of 01-JUN-24

HERMANSON, KATHLEEN, PA†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-SEP-22

HERMANSON, KATHLEEN, PA†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-JAN-21

HUANG, STEPHANIE, PA†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-OCT-22

HUANG, STEPHANIE, PA†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-JAN-21

INOCELDA, ANDREW, PA†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-JAN-21

INOCELDA, ANDREW, PA†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-SEP-22

JOHNSON, RYAN, PA

Provider ID: N/A

6121 PASEO DEL NORTE
CARLSBAD, CA 92011

Teleservice

Effective as of 01-JUN-24

MEGALI, NICOLE, PA

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Teleservice

Effective as of 01-APR-24

MEGALI, NICOLE, PA

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Teleservice

Effective as of 01-JAN-24

MORENO, SYDNIE, PA

Provider ID: N/A

1905 CALLE BARCELONA
STE 211
CARLSBAD, CA 92009

Effective as of 01-APR-24

POGGI, SARA, PA

Provider ID: N/A

2390 FARADAY AVE
CARLSBAD, CA 92008

Teleservice

Effective as of 01-APR-24

**POLLINGTON, CHRISTOPHER,
PA**

Provider ID: N/A

6121 PASEO DEL NORTE
CARLSBAD, CA 92011

Teleservice

Effective as of 01-OCT-23

RAHIM, ARIANNA, PA

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

Effective as of 01-OCT-23

PSYCHIATRY

CAI, SHEILA, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 115
CARLSBAD, CA 92011

Effective as of 01-OCT-23

CAI, SHEILA, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 115
CARLSBAD, CA 92011

Effective as of 01-OCT-23

CAI, SHEILA, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 115
CARLSBAD, CA 92011

Effective as of 01-OCT-23

CAI, SHEILA, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 115
CARLSBAD, CA 92011

Effective as of 01-OCT-23

**PAULITSCH-BUCKINGHAM,
ANDREA, MD†**

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 115
CARLSBAD, CA 92011

Effective as of 01-OCT-23

CI. Lista de proveedores de la red Médico de atención especializada

**PAULITSCH-BUCKINGHAM,
ANDREA, MD[†]**

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 115

CARLSBAD, CA 92011

Effective as of 01-OCT-23

**PAULITSCH-BUCKINGHAM,
ANDREA, MD[†]**

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 115

CARLSBAD, CA 92011

Effective as of 01-OCT-23

**PAULITSCH-BUCKINGHAM,
ANDREA, MD[†]**

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 115

CARLSBAD, CA 92011

Effective as of 01-OCT-23

PSYCHIATRY CHILD

CAI, SHEILA, MD[†]

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 115

CARLSBAD, CA 92011

Effective as of 01-OCT-23

CAI, SHEILA, MD[†]

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 115

CARLSBAD, CA 92011

Effective as of 01-OCT-23

CAI, SHEILA, MD[†]

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 115

CARLSBAD, CA 92011

Effective as of 01-OCT-23

CAI, SHEILA, MD[†]

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 115

CARLSBAD, CA 92011

Effective as of 01-OCT-23

PSYCHOLOGIST

KAUP, ALLISON, PhD[†]

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200

CARLSBAD, CA 92011

Effective as of 01-JAN-24

KAUP, ALLISON, PhD[†]

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200

CARLSBAD, CA 92011

Effective as of 01-NOV-23

KAUP, ALLISON, PhD[†]

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200

CARLSBAD, CA 92011

Effective as of 01-JAN-24

KAUP, ALLISON, PhD[†]

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200

CARLSBAD, CA 92011

Effective as of 01-NOV-23

NOEL, NANCY, PhD

Provider ID: N/A

6768 PASEO DEL VIS
CARLSBAD, CA 92009

Effective as of 01-FEB-23

NOEL, NANCY, PhD

Provider ID: N/A

6768 PASEO DEL VIS
CARLSBAD, CA 92009

Effective as of 01-FEB-23

NOEL, NANCY, PhD

Provider ID: N/A

6768 PASEO DEL VIS
CARLSBAD, CA 92009

Effective as of 01-FEB-23

NOEL, NANCY, PhD

Provider ID: N/A

6768 PASEO DEL VIS
CARLSBAD, CA 92009

Effective as of 01-FEB-23

ROSEN, JAY, PhD[†]

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200

CARLSBAD, CA 92011

Effective as of 01-SEP-22

ROSEN, JAY, PhD[†]

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200

CARLSBAD, CA 92011

Effective as of 01-JAN-21

ROSEN, JAY, PhD[†]

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200

CARLSBAD, CA 92011

Effective as of 01-SEP-22

ROSEN, JAY, PhD[†]

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200

CARLSBAD, CA 92011

Effective as of 01-JAN-21

**C1. Lista de proveedores de la red
Médico de atención especializada**

**REGISTERED PHYSICAL
THERAPIST**

AMBROSE, CHRISTOPHER, PT

Provider ID: N/A

3070 MADISON ST
CARLSBAD, CA 92008

Effective as of 01-JAN-21

DOULL, MATTHEW, PT

Provider ID: N/A

6121 PASEO DEL NORTE
CARLSBAD, CA 92011

Teleservice

Effective as of 01-JUN-23

GARBER, MARC, PT

Provider ID: N/A

6121 PASEO DEL NORTE
CARLSBAD, CA 92011

Teleservice

Effective as of 01-OCT-21

MCGEE, JACQUELINE, PT

Provider ID: N/A

3070 MADISON ST
CARLSBAD, CA 92008

Effective as of 01-JAN-21

TAMAYO, SYDNIE, PT

Provider ID: N/A

6121 PASEO DEL NORTE
STE 200
CARLSBAD, CA 92011

Teleservice

Effective as of 01-OCT-23

SLEEP MEDICINE

MADHAV, KINJAL, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200

CARLSBAD, CA 92011

Teleservice

Effective as of 01-JAN-21

MADHAV, KINJAL, MD†

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200

CARLSBAD, CA 92011

Teleservice

Effective as of 01-OCT-19

**SURGERY
NEUROLOGICAL**

MURTHY, NIKHIL, MD

Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200

CARLSBAD, CA 92011

Effective as of 01-JUL-23

**ADVANCED HEART
FAILURE AND
TRANSPLANT
CARDIOLOGY**

DURAN, ANTONIO, MD

Provider ID: N/A

890 EASTLAKE PKWY STE
205

CHULA VISTA, CA 91914

Teleservice

Effective as of 01-JUL-23

HOAGLAND, PETER, MD†

Provider ID: N/A

890 EASTLAKE PKWY STE
205

CHULA VISTA, CA 91914

Effective as of 01-JAN-21

JASKI, BRIAN, MD†

Provider ID: N/A

890 EASTLAKE PKWY STE
205

CHULA VISTA, CA 91914

Teleservice

Effective as of 01-JAN-21

ALLERGY IMMUNOLOGY

SHARMA, KUSUM, MD

Provider ID: N/A

765 MEDICAL CENTER CT
STE 216

CHULA VISTA, CA 91911

Effective as of 01-JAN-23

SHARMA, KUSUM, MD

Provider ID: N/A

765 MEDICAL CENTER CT
STE 216

CHULA VISTA, CA 91911

Effective as of 01-JUN-22

ANESTHESIOLOGY

GLASSER, MARGA, MD†

Provider ID: N/A

2452 FENTON ST STE C101
CHULA VISTA, CA 91914

Effective as of 01-SEP-21

GLASSER, MARGA, MD†

Provider ID: N/A

2452 FENTON ST STE C203
CHULA VISTA, CA 91914

Effective as of 01-SEP-21

GLASSER, MARGA, MD†

Provider ID: N/A

2452 FENTON ST STE C101
CHULA VISTA, CA 91914

Effective as of 01-OCT-21

MACCHIO, GREGORY, MD†

Provider ID: N/A

CI. Lista de proveedores de la red Médico de atención especializada

2452 FENTON ST STE C101
CHULA VISTA, CA 91914
Effective as of 01-JUL-22

ROMERO, KENNETH, MD†
Provider ID: N/A

752 MEDICAL CENTER CT
STE 206
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

VERDOLIN, MICHAEL, MD
Provider ID: N/A

2452 FENTON ST STE 205
CHULA VISTA, CA 91914
Effective as of 01-JAN-21

ANESTHESIOLOGY

CRITICAL CARE MEDICINE

MACCHIO, GREGORY, MD†
Provider ID: N/A

2452 FENTON ST STE C101
CHULA VISTA, CA 91914
Effective as of 01-SEP-22

MACCHIO, GREGORY, MD†
Provider ID: N/A

2452 FENTON ST STE C203
CHULA VISTA, CA 91914
Effective as of 01-SEP-22

ANESTHESIOLOGY PAIN MANAGEMENT

BROWNLOW, ROY, MD
Provider ID: N/A

344 F ST STE 203
CHULA VISTA, CA 91910
Effective as of 01-APR-24

DAIRO, BRANDON, MD†
Provider ID: N/A

340 4TH AVE STE 19

CHULA VISTA, CA 91910
Teleservice
Effective as of 01-NOV-22

GLASSER, MARGA, MD†
Provider ID: N/A

2452 FENTON ST STE C203
CHULA VISTA, CA 91914
Effective as of 01-JAN-22

LEE, INSUN, MD†
Provider ID: N/A

344 F ST STE 203
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-APR-24

MACCHIO, GREGORY, MD†
Provider ID: N/A

2452 FENTON ST STE C101
CHULA VISTA, CA 91914
Effective as of 01-DEC-18

NAVARRO, ROSA, MD†
Provider ID: N/A

2452 FENTON ST STE C101
CHULA VISTA, CA 91914
Effective as of 01-JAN-14

NAVARRO, ROSA, MD†
Provider ID: N/A

2452 FENTON ST STE C203
CHULA VISTA, CA 91914
Effective as of 01-AUG-17

NAVARRO, ROSA, MD†
Provider ID: N/A

2452 FENTON ST STE C101
CHULA VISTA, CA 91914
Effective as of 01-SEP-15

NAVARRO, ROSA, MD†
Provider ID: N/A

2452 FENTON ST STE C203
CHULA VISTA, CA 91914

Effective as of 01-SEP-22

NAVARRO, ROSA, MD†
Provider ID: N/A

2452 FENTON ST STE C101
CHULA VISTA, CA 91914
Effective as of 01-SEP-22

NAVARRO, ROSA, MD†
Provider ID: N/A

2452 FENTON ST STE C101
CHULA VISTA, CA 91914
Effective as of 01-JUL-22

ROMERO, KENNETH, MD†
Provider ID: N/A

752 MEDICAL CENTER CT
STE 103
CHULA VISTA, CA 91911
Effective as of 01-JUN-19

VERDOLIN, MICHAEL, MD
Provider ID: N/A

2452 FENTON ST STE 205
CHULA VISTA, CA 91914
Effective as of 01-MAR-22

AUDIOLOGIST

JESPERSEN, RHONDA, AuD
Provider ID: N/A

310 3RD AVE STE B21
CHULA VISTA, CA 91910
Effective as of 01-AUG-24

SERENO, EMILY, AuD
Provider ID: N/A

577 THIRD AVE
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JUL-24

CARDIAC

ELECTROPHYSIOLOGY

C1. Lista de proveedores de la red Médico de atención especializada

ATHILL, CHARLES, MD†

Provider ID: N/A

890 EASTLAKE PKWY STE 205
CHULA VISTA, CA 91914
Effective as of 01-JAN-21

BERMAN, BRETT, MD†

Provider ID: N/A

321 E ST STE A
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-MAR-16

DAWOOD, FARAH, MD†

Provider ID: N/A

752 MEDICAL CENTER CT STE 207
CHULA VISTA, CA 91911
Effective as of 01-DEC-20

LERNER, JONATHAN, MD

Provider ID: N/A

765 MEDICAL CENTER CT STE 211
CHULA VISTA, CA 91911
Effective as of 01-JUL-23

LERNER, JONATHAN, MD

Provider ID: N/A

865 THIRD AVE STE 133
CHULA VISTA, CA 91911
Effective as of 01-JUL-23

PUGH, MATTHEW, DO†

Provider ID: N/A

765 MEDICAL CENTER CT STE 205
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-NOV-21

PUGH, MATTHEW, DO†

Provider ID: N/A

765 MEDICAL CENTER CT STE 205
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-SEP-21

SHAH, ABHISHEK, MD†

Provider ID: N/A

765 MEDICAL CENTER CT STE 211
CHULA VISTA, CA 91911
Effective as of 01-JAN-23

SHAH, ABHISHEK, MD

Provider ID: N/A

865 3RD AVE STE 133
CHULA VISTA, CA 91911
Effective as of 01-JAN-23

CARDIOVASCULAR DISEASE

ABELHAD, NADIA, MD

Provider ID: N/A

765 MEDICAL CENTER CT STE 211
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

AIZIN, VITALI, MD†

Provider ID: N/A

321 E ST STE A
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

AIZIN, VITALI, MD†

Provider ID: N/A

321 E ST STE A
CHULA VISTA, CA 91910
Effective as of 01-MAR-21

AIZIN, VITALI, MD†

Provider ID: N/A

321 E ST STE A
CHULA VISTA, CA 91910

Effective as of 01-JUN-16

BERMAN, BRETT, MD†

Provider ID: N/A

321 E ST STE A
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-FEB-21

CARLSON, STEVEN, MD†

Provider ID: N/A

751 MEDICAL CENTER CT STE 211
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

CARLSON, STEVEN, MD†

Provider ID: N/A

765 MEDICAL CENTER CT STE 211
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-APR-21

CARLSON, STEVEN, MD†

Provider ID: N/A

765 MEDICAL CENTER CT STE 211
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-SEP-22

CEPIN, DANIEL, MD†

Provider ID: N/A

890 EASTLAKE PKWY STE 205
CHULA VISTA, CA 91914
Effective as of 01-FEB-21

COX, JUSTIN, MD†

Provider ID: N/A

890 EASTLAKE PKWY STE 205
CHULA VISTA, CA 91914
Teleservice

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-MAY-24

COX, JUSTIN, MD†

Provider ID: N/A

890 EASTLAKE PKWY STE 205
CHULA VISTA, CA 91914

Teleservice

Effective as of 01-SEP-21

DAWOOD, FARAH, MD†

Provider ID: N/A

752 MEDICAL CENTER CT STE 207
CHULA VISTA, CA 91911

Effective as of 01-SEP-22

DAWOOD, FARAH, MD†

Provider ID: N/A

752 MEDICAL CENTER CT STE 207
CHULA VISTA, CA 91911

Effective as of 01-AUG-21

DO, HULBERT, MD

Provider ID: N/A

765 MEDICAL CENTER CT STE 211
CHULA VISTA, CA 91911

Effective as of 01-OCT-23

DO, HULBERT, MD

Provider ID: N/A

865 THIRD AVE STE 133
CHULA VISTA, CA 91911

Effective as of 01-OCT-23

FERNANDEZ, GENARO, MD†

Provider ID: N/A

752 MEDICAL CENTER CT STE 207
CHULA VISTA, CA 91911

Effective as of 01-AUG-21

GOLLAPUDI, RAGHAVA, MD†

Provider ID: N/A

450 4TH AVE STE 215
CHULA VISTA, CA 91910

Effective as of 01-NOV-23

HOURLANI, RAYAN, MD

Provider ID: N/A

890 EASTLAKE PKWY STE 205
CHULA VISTA, CA 91914

Teleservice

Effective as of 01-FEB-23

KAFRI, HASSAN, MD†

Provider ID: N/A

429 BROADWAY
CHULA VISTA, CA 91910

Effective as of 01-AUG-22

KHAN, HASHIM, MD†

Provider ID: N/A

890 EASTLAKE PKWY STE 205
CHULA VISTA, CA 91914

Effective as of 01-APR-21

KHARAZI, ALEXANDRA, MD†

Provider ID: N/A

345 F ST STE 200
CHULA VISTA, CA 91910

Effective as of 01-SEP-22

KIM, JAMES, MD†

Provider ID: N/A

754 MEDICAL CENTER CT STE 101
CHULA VISTA, CA 91911

Teleservice

Effective as of 01-JUN-21

KIM, JAMES, MD†

Provider ID: N/A

754 MEDICAL CENTER CT

STE 101

CHULA VISTA, CA 91911

Teleservice

Effective as of 01-JUN-23

LY, NANCY, MD†

Provider ID: N/A

754 MEDICAL CENTER CT STE 101
CHULA VISTA, CA 91911

Effective as of 01-JUN-23

LY, NANCY, MD†

Provider ID: N/A

754 MEDICAL CENTER CT STE 101
CHULA VISTA, CA 91911

Effective as of 01-JUN-21

LY, NANCY, MD†

Provider ID: N/A

754 MEDICAL CENTER CT STE 101
CHULA VISTA, CA 91911

Effective as of 01-NOV-23

MEHTA, HIRSCH, MD†

Provider ID: N/A

890 EASTLAKE PKWY STE 205
CHULA VISTA, CA 91914

Effective as of 01-JAN-21

MOHAMEDALI, BURHAN, MD†

Provider ID: N/A

765 MEDICAL CENTER CT STE 211
CHULA VISTA, CA 91911

Effective as of 01-SEP-22

MONDRAGON, GUSTAVO, MD

Provider ID: N/A

855 THIRD AVE STE 2230
CHULA VISTA, CA 91911

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-OCT-23

MONDRAGON, GUSTAVO, MD

Provider ID: N/A

855 THIRD AVE
STE 2230
CHULA VISTA, CA 91911

Effective as of 01-FEB-24

MONDRAGON, GUSTAVO, MD†

Provider ID: N/A

480 4TH AVE STE 500
CHULA VISTA, CA 91910

Effective as of 01-NOV-20

NAGHI, JESSE, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 207
CHULA VISTA, CA 91911

Effective as of 01-AUG-21

NARAYANAN, MEENA, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911

Effective as of 01-APR-21

NARAYANAN, MEENA, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911

Effective as of 01-SEP-22

NISHIMURA-KAMINSKI,

MARIN, MD

Provider ID: N/A

890 EASTLAKE PKWY STE
205
CHULA VISTA, CA 91914

Teleservice

Effective as of 01-MAR-23

OMRAN, JAD, MD

Provider ID: N/A

890 EASTLAKE PKWY STE
205
CHULA VISTA, CA 91914

Teleservice

Effective as of 01-FEB-23

OVIDO-LINARES, RAUL, MD†

Provider ID: N/A

754 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911

Effective as of 01-JUN-21

OVIDO-LINARES, RAUL, MD†

Provider ID: N/A

754 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911

Effective as of 01-JUN-23

PARIKH, MILIND, DO†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911

Effective as of 01-SEP-22

PARIKH, MILIND, DO†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911

Effective as of 01-SEP-22

PARIZO, JUSTIN, MD†

Provider ID: N/A

890 EASTLAKE PKWY STE
205
CHULA VISTA, CA 91914

Teleservice

Effective as of 01-SEP-21

PONCE, SONIA, MD†

Provider ID: N/A

480 4TH AVE STE 401
CHULA VISTA, CA 91910

Effective as of 01-AUG-20

PONCE, SONIA, MD†

Provider ID: N/A

450 4TH AVE STE 215
CHULA VISTA, CA 91910

Effective as of 01-SEP-22

PONCE, SONIA, MD†

Provider ID: N/A

340 4TH AVE STE 11
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-APR-21

PONCE, SONIA, MD†

Provider ID: N/A

340 4TH AVE STE 11
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-JAN-21

PONCE, SONIA, MD†

Provider ID: N/A

340 4TH AVE STE 11
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-MAR-24

ROUGH, STEVEN, MD

Provider ID: N/A

754 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911

Teleservice

Effective as of 01-AUG-23

SARSAM, LUAY, MD

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211

C1. Lista de proveedores de la red Médico de atención especializada

CHULA VISTA, CA 91911
Effective as of 01-JUL-23

SARSAM, LUAY, MD


Provider ID: N/A

 765 MEDICAL CENTER CT
STE 211

CHULA VISTA, CA 91911
Effective as of 01-JUL-23

SARSAM, LUAY, MD

Provider ID: N/A

 865 3RD AVE STE 133
CHULA VISTA, CA 91911

Effective as of 01-JUL-23

SARSAM, LUAY, MD

Provider ID: N/A

 865 3RD AVE STE 133
CHULA VISTA, CA 91911

Effective as of 01-JUL-23

SHAH, KULIN, MD†

Provider ID: N/A

 865 3RD AVE STE 133
CHULA VISTA, CA 91911

Effective as of 01-JAN-23

SHAH, KULIN, MD†

Provider ID: N/A

 765 MEDICAL CENTER CT
STE 211

CHULA VISTA, CA 91911
Effective as of 01-JAN-23

SHAH, ABHISHEK, MD†

Provider ID: N/A

 765 MEDICAL CENTER CT
STE 211

CHULA VISTA, CA 91911
Effective as of 01-SEP-22

SHARF, ALBERT, MD

Provider ID: N/A

 1310 3RD AVE STE B4

CHULA VISTA, CA 91911
Effective as of 01-JAN-24

SHEREV, DIMITRI, MD†

Provider ID: N/A

 752 MEDICAL CENTER CT
STE 207

CHULA VISTA, CA 91911
Effective as of 01-AUG-21

SHEREV, DIMITRI, MD

Provider ID: N/A

 340 FOURTH AVE
STE 4

CHULA VISTA, CA 91910
Effective as of 01-SEP-23

SUDHAKAR, DEEPTHI, MD†


Provider ID: N/A

 765 MEDICAL CENTER CT
STE 211

CHULA VISTA, CA 91911
Effective as of 01-JAN-23

SUDHAKAR, DEEPTHI, MD†

Provider ID: N/A

 865 3RD AVE STE 133
CHULA VISTA, CA 91911

Effective as of 01-JAN-23

WYSOCZANSKI, MARIUSZ, MD†

Provider ID: N/A

 754 MEDICAL CENTER CT
STE 101

CHULA VISTA, CA 91911
Effective as of 01-JUN-21

WYSOCZANSKI, MARIUSZ, MD†

Provider ID: N/A

 754 MEDICAL CENTER CT
STE 101

CHULA VISTA, CA 91911
Effective as of 01-JUN-23

WYSOCZANSKI, MARIUSZ, MD†

Provider ID: N/A

 754 MEDICAL CENTER CT
STE 101

CHULA VISTA, CA 91911
Effective as of 01-JAN-23

YAU, STEPHEN, MD†

Provider ID: N/A

 429 BROADWAY
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-AUG-22

YAU, STEPHEN, MD†

Provider ID: N/A

 429 BROADWAY
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-MAR-23

ZAVARO, SUHAIL, MD

Provider ID: N/A

 890 EASTLAKE PKWY STE
205

CHULA VISTA, CA 91914
Teleservice

Effective as of 01-FEB-23

CERTIFIED

ACUPUNCTURIST

LAM, KHANH, LAC†

Provider ID: N/A

 340 4TH AVE STE 19
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-SEP-21

WILCOX, WENONAH, LAC†

Provider ID: N/A

 786 3RD AVE STE B
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

C1. Lista de proveedores de la red Médico de atención especializada

CERTIFIED NURSE PRACTITIONER

ARMSTON, LINDSEY, NPF

Provider ID: N/A

📍 450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-AUG-24

BRACEY-ASIEDU, ALEKSANDRYA, NP

Provider ID: N/A

📍 450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-AUG-24

BRACEY-ASIEDU, ALEKSANDRYA, NP

Provider ID: N/A

📍 450 4TH AVE STE 215
CHULA VISTA, CA 91910*
Effective as of 01-OCT-24

BRAYTENBAH, MELANIE, NP†

Provider ID: N/A

📍 752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-JAN-21

BRAYTENBAH, MELANIE, NP†

Provider ID: N/A

📍 752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-SEP-22

BURKE, ALICIA, NP

Provider ID: N/A

📍 765 3RD AVE STE 100
CHULA VISTA, CA 91910
Teleservice

Effective as of 01-DEC-22

CARRION GELABERT, ANA, NPF

Provider ID: N/A

📍 450 FOURTH AVE
STE 215
CHULA VISTA, CA 91910
Effective as of 01-NOV-23

CORREA, CARINA, NP

Provider ID: N/A

📍 299 J ST
CHULA VISTA, CA 91910
Effective as of 01-AUG-22

IBARRA, MARTHA, NP

Provider ID: N/A

📍 855 THIRD AVE
STE 2220
CHULA VISTA, CA 91911
Effective as of 01-JUL-24

JOHNSON, KIMBERLY, NP†

Provider ID: N/A

📍 429 BROADWAY
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-AUG-21

KANTAS, PARIS, NP†

Provider ID: N/A

📍 678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-AUG-22

KELLER, YESENIA, NP

Provider ID: N/A

📍 340 FOURTH AVE
STE 11
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-FEB-24

KELLER, YESENIA, NP

Provider ID: N/A

📍 340 FOURTH AVE
STE 11
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JUL-23

MAGANDA, JESSICA, NP

Provider ID: N/A

📍 340 FOURTH AVE
STE 11
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-APR-24

MAGANDA, JESSICA, NP

Provider ID: N/A

📍 340 FOURTH AVE
STE 11
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-MAY-24

OLESCO, JENNIFER, NP†

Provider ID: N/A

📍 752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-NOV-22

PANTOJA, DANICA-ELLA, NP

Provider ID: N/A

📍 340 FOURTH AVE
STE 9
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-MAR-24

RADMAN, MIRKA, NP†

Provider ID: N/A

📍 1111 BROADWAY STE 305
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-AUG-24

C1. Lista de proveedores de la red Médico de atención especializada

ROSS, CRYSTAL, NP†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-AUG-24

ROSS, CRYSTAL, NP†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-MAY-21

SHAKYA, KELLY, NPF

Provider ID: N/A

752 MEDICAL CENTER CT
STE 200
CHULA VISTA, CA 91911

Teleservice

Effective as of 01-JUN-24

SHAW, MARILYNN, NP

Provider ID: N/A

890 EASTLAKE PKWY STE
205
CHULA VISTA, CA 91914

Effective as of 01-MAR-23

SICKLES, MAGGIE, NP

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910

Effective as of 01-DEC-21

SPAULDING, ENJOLI, NP†

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

TOMICICH, STEPHANIE, NP

Provider ID: N/A

752 MEDICAL CENTER CT

STE 101
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

VAZQUEZ-ERLBECK, MARTHA, NP

Provider ID: N/A

880 THIRD AVE
STE A
CHULA VISTA, CA 91911
Effective as of 01-MAY-24

YALDO, ATHMAR, NP†

Provider ID: N/A

429 BROADWAY
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-DEC-21

CHIROPRACTOR

WENDEL, TREVOR, DC

Provider ID: N/A

535 H ST
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

DERMATOLOGY

ANGRA, KUNAL, MD†

Provider ID: N/A

2300 BOSWELL RD STE 130
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-DEC-22

MCKESEY, JACQUELINE, MD

Provider ID: N/A

256 LANDIS AVE FL 3
CHULA VISTA, CA 91910
Effective as of 01-FEB-23

RULLAN, JENNIFER, MD†

Provider ID: N/A

256 LANDIS AVE STE 300

CHULA VISTA, CA 91910
Effective as of 01-MAR-14

RULLAN, PETER, MD†

Provider ID: N/A

256 LANDIS AVE STE 300
CHULA VISTA, CA 91910
Effective as of 01-SEP-15

STEIN, ALEXANDER, MD†

Provider ID: N/A

340 4TH AVE STE 14
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

STEIN, ALEXANDER, MD†

Provider ID: N/A

340 4TH AVE STE 14
CHULA VISTA, CA 91910
Effective as of 01-NOV-23

STEIN, ALEXANDER, MD†

Provider ID: N/A

340 4TH AVE STE 14
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

TOMPKINS, STACY, MD†

Provider ID: N/A

2300 BOSWELL RD STE 130
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-AUG-22

TOMPKINS, STACY, MD†

Provider ID: N/A

2300 BOSWELL RD STE 130
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-DEC-22

TOMPKINS, STACY, MD†

Provider ID: N/A

2300 BOSWELL RD STE 130
CHULA VISTA, CA 91914

C1. Lista de proveedores de la red Médico de atención especializada

Teleservice

Effective as of 01-DEC-22

TOMPKINS, STACY, MD†

Provider ID: N/A

📄 2300 BOSWELL RD STE 130
CHULA VISTA, CA 91914

Teleservice

Effective as of 01-NOV-23

ZALESKI-LARSEN, LISA, DO

Provider ID: N/A

📄 2300 BOSWELL RD STE 130
CHULA VISTA, CA 91914

Teleservice

Effective as of 01-NOV-23

ZALESKI-LARSEN, LISA, DO

Provider ID: N/A

📄 2300 BOSWELL RD STE 130
CHULA VISTA, CA 91914

Teleservice

Effective as of 01-JAN-24

ZALESKI-LARSEN, LISA, DO

Provider ID: N/A

📄 2300 BOSWELL RD STE 130
CHULA VISTA, CA 91914

Teleservice

Effective as of 01-MAY-23

EMERGENCY MEDICINE

AZAM, ARSALAN, MD

Provider ID: N/A

📄 333 H ST STE 2080
CHULA VISTA, CA 91910

Effective as of 01-FEB-24

BRODAK, DANIKA, MD

Provider ID: N/A

📄 333 H ST STE 2080
CHULA VISTA, CA 91910

Effective as of 01-FEB-24

BROWN, MITCHELL, MD

Provider ID: N/A

📄 333 H ST STE 2080
CHULA VISTA, CA 91910

Effective as of 01-AUG-24

CORTES, JAMES, MD

Provider ID: N/A

📄 333 H ST STE 2080
CHULA VISTA, CA 91910

Effective as of 01-AUG-24

DILLMAN, ARIANA, MD†

Provider ID: N/A

📄 333 H ST STE 2080
CHULA VISTA, CA 91910

Effective as of 01-JUL-22

DILLMAN, ARIANA, MD†

Provider ID: N/A

📄 333 H ST STE 2080
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

EINSTEIN, ERIC, MD†

Provider ID: N/A

📄 333 H ST STE 2080
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

EINSTEIN, ERIC, MD†

Provider ID: N/A

📄 333 H ST STE 2080
CHULA VISTA, CA 91910

Effective as of 01-JUL-22

FAIQ, NADIA, MD

Provider ID: N/A

📄 333 H ST STE 2080
CHULA VISTA, CA 91910

Effective as of 01-AUG-24

FRENCH, TONIANNE, MD†

Provider ID: N/A

📄 333 H ST STE 2080

CHULA VISTA, CA 91910

Effective as of 01-JUL-22

FRENCH, TONIANNE, MD†

Provider ID: N/A

📄 333 H ST STE 2080
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

GALASSO, MADISON, MD†

Provider ID: N/A

📄 333 H ST STE 2080
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

GALASSO, MADISON, MD†

Provider ID: N/A

📄 333 H ST STE 2080
CHULA VISTA, CA 91910

Effective as of 01-JUL-22

GRIESINGER, MICHAEL, MD†

Provider ID: N/A

📄 333 H ST STE 2080
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

GRIESINGER, MICHAEL, MD†

Provider ID: N/A

📄 333 H ST STE 2080
CHULA VISTA, CA 91910

Effective as of 01-JUL-22

HARE, MARC, MD†

Provider ID: N/A

📄 1111 BROADWAY STE 305
CHULA VISTA, CA 91911

Teleservice

Effective as of 01-APR-23

HARE, MARC, MD†

Provider ID: N/A

📄 1111 BROADWAY STE 305
CHULA VISTA, CA 91911

Teleservice

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-MAR-24

HARRELL-BRUDER, BEVERLY, MD†

Provider ID: N/A

333 H ST STE 280
CHULA VISTA, CA 91910
Effective as of 01-MAY-24

HARRELL-BRUDER, BEVERLY, MD†

Provider ID: N/A

333 H ST STE 280
CHULA VISTA, CA 91910
Effective as of 01-FEB-21

JOURDAIN, VICTOR, MD†

Provider ID: N/A

333 H ST STE 280
CHULA VISTA, CA 91910
Effective as of 01-FEB-21

JOURDAIN, VICTOR, MD†

Provider ID: N/A

333 H ST STE 280
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

MARMON, JULIE, MD

Provider ID: N/A

333 H ST STE 280
CHULA VISTA, CA 91910
Effective as of 01-AUG-24

MCMILLAN, MONICA, MD†

Provider ID: N/A

333 H ST STE 280
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

NARDI, SEAN, DO†

Provider ID: N/A

333 H ST STE 280
CHULA VISTA, CA 91910
Effective as of 01-DEC-21

PORTILLO, TANIA, MD†

Provider ID: N/A

333 H ST STE 280
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

QUENZER, FAITH, DO†

Provider ID: N/A

333 H ST STE 280
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

QUENZER, FAITH, DO†

Provider ID: N/A

333 H ST STE 280
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

REARDON, JACQUELINE, DO†

Provider ID: N/A

333 H ST STE 280
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

REARDON, JACQUELINE, DO†

Provider ID: N/A

333 H ST STE 280
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

ROXAS, ROGER, MD†

Provider ID: N/A

333 H ST STE 280
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

ROXAS, ROGER, MD†

Provider ID: N/A

333 H ST STE 280
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

SBIROLI, EMILY, MD†

Provider ID: N/A

333 H ST STE 280
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

SBIROLI, EMILY, MD†

Provider ID: N/A

333 H ST STE 280
CHULA VISTA, CA 91910
Effective as of 01-AUG-21

TOVAR, JUAN, MD†

Provider ID: N/A

333 H ST STE 280
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

TRESENITTER, MEGAN, MD†

Provider ID: N/A

333 H ST STE 280
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

TRESENITTER, MEGAN, MD†

Provider ID: N/A

333 H ST STE 280
CHULA VISTA, CA 91910
Effective as of 01-AUG-21

WHITLEY, NICHOLAS, MD†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910*
Effective as of 01-AUG-18

YAU, STEPHEN, MD†

Provider ID: N/A

429 BROADWAY
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-APR-23

ENDOCRINOLOGY METABOLISM DIABETES

ARGOUD, GEORGES, MD†

CI. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

📍 340 4TH AVE STE 7A
CHULA VISTA, CA 91910
Effective as of 01-JUN-19

ARGOUD, GEORGES, MD†

Provider ID: N/A

📍 340 4TH AVE STE 7A
CHULA VISTA, CA 91910*
Effective as of 01-JAN-21

ARGOUD, GEORGES, MD†

Provider ID: N/A

📍 340 4TH AVE STE 7A
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

ARGOUD, GEORGES, MD†

Provider ID: N/A

📍 340 4TH AVE STE 7A
CHULA VISTA, CA 91910
Effective as of 01-SEP-20

ARGOUD, GEORGES, MD†

Provider ID: N/A

📍 340 4TH AVE STE 7A
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

ARGOUD, GEORGES, MD†

Provider ID: N/A

📍 340 4TH AVE STE 7A
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

CARRILLO, MARITZA, MD†

Provider ID: N/A

📍 678 3RD AVE
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JUL-22

CARRILLO, MARITZA, MD†

Provider ID: N/A

📍 678 3RD AVE

CHULA VISTA, CA 91910

Teleservice

Effective as of 01-JAN-22

ROGERS, MEGAN, MD†

Provider ID: N/A

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

Effective as of 01-AUG-22

ROGERS, MEGAN, MD†

Provider ID: N/A

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

Effective as of 01-JUL-22

ROGERS, MEGAN, MD†

Provider ID: N/A

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

Effective as of 01-JUL-22

VINCENT, LAUREN, MD†

Provider ID: N/A

📍 678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

VINCENT, LAUREN, MD†

Provider ID: N/A

📍 678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

FAMILY PRACTICE

DILLON, MAYRA, MD

Provider ID: N/A

📍 880 THIRD AVE
A
CHULA VISTA, CA 91911

Effective as of 01-JUL-24

RODRIGUEZ, NATALIE, MD

Provider ID: N/A

📍 480 PALOMAR ST
CHULA VISTA, CA 91911*
Effective as of 01-NOV-23

ROJAS, SARAH, MD

Provider ID: N/A

📍 678 THIRD AVE
CHULA VISTA, CA 91910
Effective as of 01-JUL-24

SHAFT, ALEXANDER, MD†

Provider ID: N/A

📍 303 H ST STE 103
CHULA VISTA, CA 91910
Teleservice

Effective as of 01-FEB-23

SHAFT, ALEXANDER, MD†

Provider ID: N/A

📍 303 H ST STE 103
CHULA VISTA, CA 91910
Teleservice

Effective as of 01-MAR-22

SPAK, DARYL, MD

Provider ID: N/A

📍 678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-SEP-24

GASTROENTEROLOGY

ALAYO, ERICK, MD†

Provider ID: N/A

📍 400 E ST
CHULA VISTA, CA 91910
Effective as of 01-OCT-21

ALAYO, ERICK, MD†

Provider ID: N/A

📍 400 E ST

C1. Lista de proveedores de la red Médico de atención especializada

CHULA VISTA, CA 91910
Effective as of 01-OCT-21

ALAYO, ERICK, MD†

Provider ID: N/A

📍 400 E ST
CHULA VISTA, CA 91910
Effective as of 01-OCT-21

BAIG, NABIL, DO†

Provider ID: N/A

📍 303 H ST STE 103
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-OCT-22

DESTA, TADDESE, MD

Provider ID: N/A

📍 296 H ST STE 301
CHULA VISTA, CA 91910
Effective as of 01-JAN-23

DUQUE, JOHN, MD†

Provider ID: N/A

📍 480 4TH AVE STE 316
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

DUQUE, JOHN, MD†

Provider ID: N/A

📍 480 4TH AVE STE 316
CHULA VISTA, CA 91910
Effective as of 01-JAN-14

DUQUE, JOHN, MD†

Provider ID: N/A

📍 480 4TH AVE STE 316
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

DUQUE, JOHN, MD†

Provider ID: N/A

📍 480 4TH AVE STE 316
CHULA VISTA, CA 91910
Effective as of 01-SEP-15

HASSANEIN, TAREK, MD†

Provider ID: N/A

📍 303 H ST STE 103
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-MAY-21

HASSANEIN, TAREK, MD†

Provider ID: N/A

📍 303 H ST STE 103
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JAN-22

HASSANEIN, TAREK, MD†

Provider ID: N/A

📍 303 H ST STE 103
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JUL-21

HASSANEIN, TAREK, MD†

Provider ID: N/A

📍 256 LANDIS AVE STE 204
CHULA VISTA, CA 91910
Effective as of 01-SEP-15

HASSANEIN, TAREK, MD†

Provider ID: N/A

📍 256 LANDIS AVE STE 202
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

HASSANEIN, TAREK, MD†

Provider ID: N/A

📍 256 LANDIS AVE STE 202
CHULA VISTA, CA 91910
Effective as of 01-MAR-18

HASSANEIN, TAREK, MD†

Provider ID: N/A

📍 1323 3RD AVE
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

KORN, ERROL, MD

Provider ID: N/A

📍 769 MEDICAL CENTER CT
STE 303
CHULA VISTA, CA 91911
Effective as of 01-MAY-23

KORN, ERROL, MD

Provider ID: N/A

📍 769 MEDICAL CENTER CT
STE 303
CHULA VISTA, CA 91911
Effective as of 01-JUL-23

NOVO, MEGAN, MD

Provider ID: N/A

📍 296 H ST STE 301
CHULA VISTA, CA 91910
Effective as of 01-AUG-24

SWEET, PATRICK, MD†

Provider ID: N/A

📍 353 CHURCH AVE STE A
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-MAY-22

THOMAS, CARLTON, MD†

Provider ID: N/A

📍 296 H ST
CHULA VISTA, CA 91910
Effective as of 01-APR-21

WIENER, GREGORY, MD†

Provider ID: N/A

📍 353 CHURCH AVE STE A
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

WIENER, GREGORY, MD†

Provider ID: N/A

📍 353 CHURCH AVE STE A
CHULA VISTA, CA 91910
Effective as of 01-AUG-20

C1. Lista de proveedores de la red Médico de atención especializada

WIENER, GREGORY, MD†

Provider ID: N/A

📄 353 CHURCH AVE STE A
CHULA VISTA, CA 91910
Effective as of 01-JAN-14

WIENER, GREGORY, MD†

Provider ID: N/A

📄 353 CHURCH AVE STE A
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

WIENER, GREGORY, MD†

Provider ID: N/A

📄 353 CHURCH AVE STE A
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

WIENER, GREGORY, MD†

Provider ID: N/A

📄 353 CHURCH AVE STE A
CHULA VISTA, CA 91910*
Effective as of 01-SEP-15

HEARING AID DEALER / SUPPLIER

ANDERSON, ELAINE, MA†

Provider ID: N/A

📄 310 3RD AVE STE C11
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

ANDERSON, ELAINE, MA†

Provider ID: N/A

📄 310 3RD AVE STE B21/C11
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

DAVIS, KELLE, MA†

Provider ID: N/A

📄 310 3RD AVE STE C11
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

GALLAGHER, JEFFERY, MA

Provider ID: N/A

📄 577 THIRD AVE
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-AUG-24

HEMATOLOGY / ONCOLOGY

ANDREY, JEFFREY, MD†

Provider ID: N/A

📄 450 4TH AVE STE 311
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

BASERI, BABAK, MD†

Provider ID: N/A

📄 450 4TH AVE STE 311
CHULA VISTA, CA 91910
Effective as of 01-MAY-24

BASERI, BABAK, MD†

Provider ID: N/A

📄 450 4TH AVE STE 311
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

BASERI, BABAK, MD†

Provider ID: N/A

📄 450 4TH AVE STE 311
CHULA VISTA, CA 91910
Effective as of 01-FEB-24

BASERI, BABAK, MD†

Provider ID: N/A

📄 450 4TH AVE STE 311
CHULA VISTA, CA 91910
Effective as of 01-DEC-23

ITURBE-ALESSIO, IGNACIO, MD†

Provider ID: N/A

📄 855 3RD AVE STE 3330
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-FEB-22

JOHNSON, KENNETH, MD†

Provider ID: N/A

📄 769 MEDICAL CENTER CT
STE 202
CHULA VISTA, CA 91911
Effective as of 01-MAY-15

MOOLANI, RAMESH, MD†

Provider ID: N/A

📄 855 3RD AVE STE 3330
CHULA VISTA, CA 91911
Effective as of 01-FEB-22

MOOLANI, RAMESH, MD†

Provider ID: N/A

📄 855 3RD AVE STE 3330
CHULA VISTA, CA 91911
Effective as of 01-APR-23

NORTON, MARILYN, MD†

Provider ID: N/A

📄 769 MEDICAL CENTER CT
STE 202
CHULA VISTA, CA 91911
Effective as of 01-MAY-15

NORTON, MARILYN, MD†

Provider ID: N/A

📄 769 MEDICAL CENTER CT
STE 202
CHULA VISTA, CA 91911
Effective as of 01-FEB-22

QUIROZ, ELISA, MD†

Provider ID: N/A

📄 678 3RD AVE
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-OCT-21

C1. Lista de proveedores de la red Médico de atención especializada

SAUNDERS, PHILLIP, DO†

Provider ID: N/A

☒ 450 4TH AVE STE 311
CHULA VISTA, CA 91910
Effective as of 01-NOV-22

SCHWERKOSKE, JOHN, MD†

Provider ID: N/A

☒ 450 4TH AVE STE 311
CHULA VISTA, CA 91910
Effective as of 01-MAY-22

SCHWERKOSKE, JOHN, MD†

Provider ID: N/A

☒ 450 4TH AVE STE 311
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

HEPATOLOGY

HASSANEIN, TAREK, MD†

Provider ID: N/A

☒ 303 H ST STE 103
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-SEP-24

HASSANEIN, TAREK, MD

Provider ID: N/A

☒ 2436 FENTON ST STE
100-B
CHULA VISTA, CA 91914
Effective as of 01-SEP-24

INTERNAL MEDICINE

BALDERAS-MAGALLANES, RODOLFO, MD

Provider ID: N/A

☒ 678 THIRD AVE
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-APR-24

CHITKARA, PUJA, MD†

Provider ID: N/A

☒ 765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

HILES, DANIEL, MD

Provider ID: N/A

☒ 880 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-SEP-24

JAIN, SUPRABHA, MD

Provider ID: N/A

☒ 765 3RD AVE STE 10
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-OCT-22

LIRA, JOSE, MD†

Provider ID: N/A

☒ 841 KUHN DR STE 200
CHULA VISTA, CA 91914
Effective as of 01-NOV-23

LIRA, JOSE, MD†

Provider ID: N/A

☒ 841 KUHN DR STE 200
CHULA VISTA, CA 91914
Effective as of 01-JAN-24

LIU, ANDREW, MD

Provider ID: N/A

☒ 752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-SEP-23

MEYER, JILL, MD†

Provider ID: N/A

☒ 752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-MAY-24

MEYER, JILL, MD†

Provider ID: N/A

☒ 340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-MAY-24

MEYER, JILL, MD†

Provider ID: N/A

☒ 752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

MOOLANI, UJJALA, MD

Provider ID: N/A

☒ 340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-MAY-23

MOOLANI, UJJALA, MD†

Provider ID: N/A

☒ 752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-MAY-23

NARAYANAN, MEENA, MD†

Provider ID: N/A

☒ 765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911*
Effective as of 01-JAN-21

NARULA, ARVIN, MD†

Provider ID: N/A

☒ 890 EASTLAKE PKWY STE
205
CHULA VISTA, CA 91914
Effective as of 01-JAN-21

OLIVER, DEANNA, MD†

Provider ID: N/A

☒ 303 H ST STE 103
CHULA VISTA, CA 91910
Effective as of 01-MAY-21

CI. Lista de proveedores de la red Médico de atención especializada

OLIVER, DEANNA, MD†

Provider ID: N/A

303 H ST STE 103
CHULA VISTA, CA 91910*
Effective as of 01-OCT-22

PATEL, AMAR, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-NOV-23

PONCE, SONIA, MD†

Provider ID: N/A

429 BROADWAY
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

REDDY, SMITHA, MD†

Provider ID: N/A

272 CHURCH AVE STE 1
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

SOLTERO, RICARDO, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-OCT-21

INTERVENTIONAL CARDIOLOGY

AIZIN, VITALI, MD†

Provider ID: N/A

321 E ST STE A
CHULA VISTA, CA 91910
Effective as of 01-FEB-16

BARVALIA, MIHIR, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 207

CHULA VISTA, CA 91911
Effective as of 01-NOV-22

BERMAN, BRETT, MD†

Provider ID: N/A

321 E ST STE A
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-MAR-16

BERMAN, BRETT, MD†

Provider ID: N/A

321 E ST STE A
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-SEP-22

BERMAN, BRETT, MD†

Provider ID: N/A

321 E ST STE A
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JAN-21

CEPIN, DANIEL, MD†

Provider ID: N/A

890 EASTLAKE PKWY STE
205
CHULA VISTA, CA 91914
Effective as of 01-DEC-22

FERNANDEZ, GENARO, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 207
CHULA VISTA, CA 91911
Effective as of 01-MAR-23

GOLLAPUDI, RAGHAVA, MD†

Provider ID: N/A

890 EASTLAKE PKWY STE
205
CHULA VISTA, CA 91914
Effective as of 01-JAN-21

GOLLAPUDI, RAGHAVA, MD†

Provider ID: N/A

890 EASTLAKE PKWY STE
205
CHULA VISTA, CA 91914
Effective as of 01-JUN-21

JOHN, ALAN, MD

Provider ID: N/A

865 3RD AVE STE 133
CHULA VISTA, CA 91911
Effective as of 01-MAY-23

JOHN, ALAN, MD

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911
Effective as of 01-MAY-23

KAFRI, HASSAN, MD†

Provider ID: N/A

429 BROADWAY
CHULA VISTA, CA 91910
Effective as of 01-AUG-20

KAFRI, HASSAN, MD†

Provider ID: N/A

429 BROADWAY
CHULA VISTA, CA 91910
Effective as of 01-APR-21

KAFRI, HASSAN, MD†

Provider ID: N/A

429 BROADWAY
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

KAFRI, HASSAN, MD†

Provider ID: N/A

429 BROADWAY
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

KIM, JAMES, MD†

**C1. Lista de proveedores de la red
Médico de atención especializada**

Provider ID: N/A

 754 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911*

Teleservice

Effective as of 01-OCT-24

LY, NANCY, MD†


Provider ID: N/A

 754 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911

Effective as of 01-JUN-24

MOHAMEDALI, BURHAN, MD†

Provider ID: N/A

 765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911

Effective as of 01-JAN-21

MONDRAGON, GUSTAVO, MD†


Provider ID: N/A

 480 4TH AVE STE 500
CHULA VISTA, CA 91910*

Effective as of 01-JAN-21

NAGHI, JESSE, MD†


Provider ID: N/A

 752 MEDICAL CENTER CT
STE 207
CHULA VISTA, CA 91911

Effective as of 01-JAN-21

OVIEDO-LINARES, RAUL, MD†

Provider ID: N/A

 754 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911

Effective as of 01-FEB-24

OVIEDO-LINARES, RAUL, MD†

Provider ID: N/A

 754 MEDICAL CENTER CT
STE 101

CHULA VISTA, CA 91911

Effective as of 01-OCT-23

PONCE, SONIA, MD†

Provider ID: N/A

 450 4TH AVE STE 215
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

PONCE, SONIA, MD†

Provider ID: N/A


 340 4TH AVE STE 11
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-SEP-22

PONCE, SONIA, MD†

Provider ID: N/A


 340 4TH AVE STE 11
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-JUL-21

ROUGH, STEVEN, MD

Provider ID: N/A


 754 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911

Teleservice

Effective as of 01-JAN-24

ROUGH, STEVEN, MD

Provider ID: N/A


 754 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911

Teleservice

Effective as of 01-NOV-23

ROUGH, STEVEN, MD

Provider ID: N/A


 754 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911

Teleservice

Effective as of 01-OCT-23

RUBIO GARCIA, MANOLO, MD†


Provider ID: N/A

 765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911

Effective as of 01-MAY-23

RUBIO GARCIA, MANOLO, MD†


Provider ID: N/A

 765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911

Effective as of 01-DEC-22

RUBIO GARCIA, MANOLO, MD†


Provider ID: N/A

 865 3RD AVE STE 133
CHULA VISTA, CA 91911

Effective as of 01-MAY-23

RUBIO GARCIA, MANOLO, MD†


Provider ID: N/A

 865 3RD AVE STE 133
CHULA VISTA, CA 91911

Effective as of 01-DEC-22

SHAH, KULIN, MD†

Provider ID: N/A

 765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911

Effective as of 01-APR-23

SHEREV, DIMITRI, MD†

Provider ID: N/A


 752 MEDICAL CENTER CT
STE 207
CHULA VISTA, CA 91911

Effective as of 01-SEP-22

SHEREV, DIMITRI, MD†


Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

 752 MEDICAL CENTER CT
STE 207
CHULA VISTA, CA 91911
Effective as of 01-OCT-19


SHETABI, KAMBIZ, MD

Provider ID: N/A

 754 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-APR-24

SUDHAKAR, DEEPTHI, MD†

Provider ID: N/A

 765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911
Effective as of 01-APR-23


SUDHAKAR, DEEPTHI, MD†

Provider ID: N/A

 865 3RD AVE STE 133
CHULA VISTA, CA 91911
Effective as of 01-APR-23


WYSOCZANSKI, MARIUSZ, MD†

Provider ID: N/A

 754 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

WYSOCZANSKI, MARIUSZ, MD†

Provider ID: N/A

 750 MEDICAL CENTER CT
STE 3
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

MARRIAGE FAMILY THERAPIST

CAMARGO, SANDRA, MFT


Provider ID: N/A

 880 3RD AVE STE A

CHULA VISTA, CA 91911
Effective as of 01-APR-24


CASTELLANOS, GRACIELA, MFT†

Provider ID: N/A

 1061 TIERRA DEL REY STE
305
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-DEC-21


CASTELLANOS, GRACIELA, MFT†

Provider ID: N/A

 1061 TIERRA DEL REY STE
304
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-DEC-21


CASTELLANOS, GRACIELA, MFT†

Provider ID: N/A

 1061 TIERRA DEL REY STE
303
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-DEC-21

SHIELDS, SEBASTIAN, MFT


Provider ID: N/A

 678 3RD AVE
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JUN-23

NEPHROLOGY


AL-DAHAN, ZAID, MD

Provider ID: N/A

 340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-MAY-23


FERNANDEZ, RODRIGO, MD†

Provider ID: N/A

 450 4TH AVE STE 201
CHULA VISTA, CA 91910
Effective as of 01-MAY-21


HOREISH, ADAM, MD†

Provider ID: N/A

 340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-AUG-15


HOREISH, ADAM, MD†

Provider ID: N/A

 340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JUL-22


HOREISH, ADAM, MD†

Provider ID: N/A

 340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JAN-21


HOREISH, ADAM, MD†

Provider ID: N/A

 340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JUL-15


HOREISH, ADAM, MD†

Provider ID: N/A

 340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

KAYAL, ANAS, MD†

Provider ID: N/A

 296 H ST STE 304
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-SEP-22

KHAING, KATHY, MD†

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

KHAING, KATHY, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-APR-19

KHAING, KATHY, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

KHAING, KATHY, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

LOZADA-PASTORIO, ELIZABETH, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

LOZADA-PASTORIO, ELIZABETH, MD†

Provider ID: N/A

340 4TH AVE STE 14
CHULA VISTA, CA 91910
Effective as of 01-SEP-20

LOZADA-PASTORIO, ELIZABETH, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

LOZADA-PASTORIO,

ELIZABETH, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

LOZADA-PASTORIO, ELIZABETH, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JUL-15

LOZADA-PASTORIO, ELIZABETH, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

LOZADA-PASTORIO, ELIZABETH, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-NOV-16

LOZADA-PASTORIO, ELIZABETH, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-JUL-22

MEYER, JILL, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-JUL-22

MEYER, JILL, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-AUG-14

MEYER, JILL, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

MEYER, JILL, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

MEYER, JILL, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JAN-14

MEYER, JILL, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

MEYER, JILL, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-SEP-20

MOOLANI, UJJALA, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-NOV-22

C1. Lista de proveedores de la red Médico de atención especializada

MOOLANI, UJJALA, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-JAN-23

MOOLANI, UJJALA, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-FEB-23

PATEL, AMAR, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-FEB-20

PATEL, AMAR, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JAN-24

PATEL, AMAR, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JAN-21

PHAM, JENNIFER, MD

Provider ID: N/A

340 FOURTH AVE
STE 4
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JAN-24

PHAM, JENNIFER, MD

Provider ID: N/A

340 FOURTH AVE
STE 4
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-MAY-24

PHAM, JENNIFER, MD

Provider ID: N/A

340 FOURTH AVE
STE 4
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-NOV-23

SOLTERO, RICARDO, MD†

Provider ID: N/A

340 4TH AVE STE 14
CHULA VISTA, CA 91910
Effective as of 01-APR-17

SOLTERO, RICARDO, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JAN-14

SOLTERO, RICARDO, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

SOLTERO, RICARDO, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

SOLTERO, RICARDO, MD†

Provider ID: N/A

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

SOLTERO, RICARDO, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

VIDEEN, JOHN, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-SEP-20

VIDEEN, JOHN, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-JUL-22

VIDEEN, JOHN, MD†

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

VIDEEN, JOHN, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

VIDEEN, JOHN, MD†

Provider ID: N/A

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

VIDEEN, JOHN, MD†

Provider ID: N/A


752 MEDICAL CENTER CT
STE 302

C1. Lista de proveedores de la red Médico de atención especializada

CHULA VISTA, CA 91911
Effective as of 01-JAN-21

YUAN, HENRY, MD†


Provider ID: N/A

 340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

NEUROLOGY


BINDAL, ANKUR, MD†

Provider ID: N/A

 765 3RD AVE STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-SEP-22


FARHIDVASH, FARIBA, MD†

Provider ID: N/A

 450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-DEC-22


FARHIDVASH, FARIBA, MD†

Provider ID: N/A

 450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-AUG-22


FARHIDVASH, FARIBA, MD†

Provider ID: N/A

 450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-JUL-24

FARHIDVASH, FARIBA, MD†

Provider ID: N/A

 450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-SEP-24

GRATIANNE, ROBERTO, MD†


Provider ID: N/A

 450 4TH AVE STE 215

CHULA VISTA, CA 91910
Effective as of 01-JAN-22


GRATIANNE, ROBERTO, MD†

Provider ID: N/A

 450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-MAY-22

GUPTA, MONIKA, MD†

Provider ID: N/A

 450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-JUN-22


GUPTA, MONIKA, MD†

Provider ID: N/A

 450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-JUL-24


GUPTA, MONIKA, MD†

Provider ID: N/A

 450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-JAN-21


HOSSEINZADEHMALEKI, ANA, MD

Provider ID: N/A

 450 FOURTH AVE
STE 215
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-MAR-24


HOSSEINZADEHMALEKI, ANA, MD

Provider ID: N/A

 450 FOURTH AVE
STE 215
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-MAR-24


HUISA-GARATE, BRANKO, MD†

Provider ID: N/A

 450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-MAR-24


HUISA-GARATE, BRANKO, MD†

Provider ID: N/A

 450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-FEB-21


HUISA-GARATE, BRANKO, MD†

Provider ID: N/A

 450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-JAN-21


MANDEVILLE, ROSS, MD

Provider ID: N/A

 450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-SEP-24


MAREK, MAKSYM, MD

Provider ID: N/A

 450 FOURTH AVE
STE 215
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-FEB-24


MAREK, MAKSYM, MD

Provider ID: N/A

 450 FOURTH AVE
STE 215
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-MAY-24

MAREK, MAKSYM, MD

Provider ID: N/A

 450 FOURTH AVE
STE 215

C1. Lista de proveedores de la red Médico de atención especializada

CHULA VISTA, CA 91910
Teleservice
Effective as of 01-OCT-23

MAREK, MAKSYM, MD

Provider ID: N/A
450 FOURTH AVE
STE 215
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-MAY-24

MAREK, MAKSYM, MD

Provider ID: N/A
450 FOURTH AVE
STE 215
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-MAR-24

MCGEHRIN, KEVIN, MD

Provider ID: N/A
450 FOURTH AVE
STE 215
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-MAR-24

MCGEHRIN, KEVIN, MD

Provider ID: N/A
450 FOURTH AVE
STE 215
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-MAY-24

MCGEHRIN, KEVIN, MD

Provider ID: N/A
450 FOURTH AVE
STE 215
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-AUG-23

MOHAMMAD, AHMADSHAH, MD†

Provider ID: N/A
750 MEDICAL CENTER CT
STE 6
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

MOHAMMAD, AHMADSHAH, MD†

Provider ID: N/A
750 MEDICAL CENTER CT
STE 6
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

OLENSKI, KLARI, DO†

Provider ID: N/A
450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-JUN-22

OLENSKI, KLARI, DO†

Provider ID: N/A
450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-MAY-24

PHAM, ALISE, DO

Provider ID: N/A
450 4TH AVE STE 215
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-AUG-24

PHAM, JENNIFER, MD

Provider ID: N/A
340 FOURTH AVE
STE 4
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-MAR-24

PHAM, ALISE, DO

Provider ID: N/A
450 4TH AVE STE 215
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-SEP-24

PHAM, ALISE, DO

Provider ID: N/A
450 FOURTH AVE STE 215
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JUN-24

SILVER, BRENT, MD†

Provider ID: N/A
450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-SEP-24

SILVER, BRENT, MD†

Provider ID: N/A
450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-DEC-22

SILVER, BRENT, MD†

Provider ID: N/A
450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-NOV-22

SORIALOPEZ, JOSE, MD†

Provider ID: N/A
450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-SEP-21

SORIALOPEZ, JOSE, MD†

Provider ID: N/A
450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-MAR-21

NEUROLOGY CHILD

CI. Lista de proveedores de la red Médico de atención especializada

OLENSKI, KLARI, DO[†]

Provider ID: N/A

📍 450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-MAY-22

OBSTETRICS / GYNECOLOGY

ANGUIANO, FRANCISCO, MD[†]

Provider ID: N/A

📍 765 MEDICAL CENTER CT
STE 209
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

ATIGA, SCHUBERT, MD[†]

Provider ID: N/A

📍 752 MEDICAL CENTER CT
STE 106
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

ATIGA, SCHUBERT, MD[†]

Provider ID: N/A

📍 752 MEDICAL CENTER CT
STE 106
CHULA VISTA, CA 91911
Effective as of 01-AUG-20

ATIGA, SCHUBERT, MD[†]

Provider ID: N/A

📍 752 MEDICAL CENTER CT
STE 106
CHULA VISTA, CA 91911
Effective as of 01-JUL-22

ATIGA, SCHUBERT, MD[†]

Provider ID: N/A

📍 752 MEDICAL CENTER CT
STE 106
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

CHAC, RICK, MD[†]

Provider ID: N/A

📍 660 OLD TELEGRAPH
CANYON RD
CHULA VISTA, CA 91910
Effective as of 01-SEP-16

CHAC, RICK, MD[†]

Provider ID: N/A

📍 660 OLD TELEGRAPH
CANYON RD
CHULA VISTA, CA 91910
Effective as of 01-SEP-20

CHAC, RICK, MD[†]

Provider ID: N/A

📍 660 OLD TELEGRAPH
CANYON RD
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

CHAC, RICK, MD[†]

Provider ID: N/A

📍 660 OLD TELEGRAPH
CANYON RD
CHULA VISTA, CA 91910
Effective as of 01-AUG-20

MENDEZ, DIEGO, MD[†]

Provider ID: N/A

📍 678 3RD AVE
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-NOV-21

SHORT, ABIADE, MD[†]

Provider ID: N/A

📍 678 3RD AVE
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-DEC-22

OCCUPATIONAL THERAPIST

CUA, NICOLE, OT

Provider ID: N/A

📍 88 E BONITA RD STE C
CHULA VISTA, CA 91910
Effective as of 01-MAR-24

CUA, NICOLE, OT

Provider ID: N/A

📍 88 E BONITA RD STE C
CHULA VISTA, CA 91910
Effective as of 01-APR-24

HUGHES, ELISA, OT[†]

Provider ID: N/A

📍 880 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-JUN-22

LOPEZ, ALYSSA-NICOLE, OT

Provider ID: N/A

📍 88 E BONITA RD STE C
CHULA VISTA, CA 91910
Effective as of 01-DEC-23

LOPEZ, ALYSSA-NICOLE, OT

Provider ID: N/A

📍 88 E BONITA RD STE C
CHULA VISTA, CA 91910
Effective as of 01-OCT-23

MORRIS, SHEILA, OT[†]

Provider ID: N/A

📍 1020 TIERRA DEL REY STE
A-1
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

PORTER, EILEEN, OT

Provider ID: N/A

📍 88 E BONITA RD STE C
CHULA VISTA, CA 91910
Effective as of 01-AUG-23

PORTER, EILEEN, OT

Provider ID: N/A

📍 88 E BONITA RD STE C

C1. Lista de proveedores de la red Médico de atención especializada

CHULA VISTA, CA 91910
Effective as of 01-JAN-22

OPHTHALMOLOGY

ABDALLAH, WALID, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-APR-24

BRYANT, DUANE, MD†

Provider ID: N/A

342 F ST
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JUN-19

BRYANT, DUANE, MD†

Provider ID: N/A

342 F ST
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JAN-21

BRYANT, DUANE, MD†

Provider ID: N/A

342 F ST
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JAN-21

BRYANT, DUANE, MD†

Provider ID: N/A

342 F ST
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-OCT-19

CARRABY, ARNETT, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-AUG-20

CARRABY, ARNETT, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-JUL-22

CARRABY, ARNETT, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

COCKERHAM, KIMBERLY, MD

Provider ID: N/A

342 F ST
CHULA VISTA, CA 91910
Effective as of 01-DEC-23

DELENGOCKY, TAYSON, DO†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-JUL-22

DELENGOCKY, TAYSON, DO†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

GOLDMAN, DAVID, MD

Provider ID: N/A

311 DEL MAR AVE
CHULA VISTA, CA 91910
Effective as of 01-JUL-24

GOMEZ, JESSICA, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-JUN-24

MANI, MAJID, MD†

Provider ID: N/A

835 3RD AVE STE A

CHULA VISTA, CA 91911
Effective as of 01-SEP-22

MANI, MAJID, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-JUL-22

MASLIN, JESSICA, MD

Provider ID: N/A

311 DEL MAR AVE
CHULA VISTA, CA 91910
Effective as of 01-FEB-23

MASLIN, JESSICA, MD

Provider ID: N/A

311 DEL MAR AVE
CHULA VISTA, CA 91910
Effective as of 01-AUG-24

MASLIN, JESSICA, MD

Provider ID: N/A

311 DEL MAR AVE
CHULA VISTA, CA 91910
Effective as of 01-FEB-23

MASLIN, JESSICA, MD

Provider ID: N/A

311 DEL MAR AVE
CHULA VISTA, CA 91910
Effective as of 01-FEB-23

MASLIN, JESSICA, MD

Provider ID: N/A

480 FOURTH AVE
STE 201
CHULA VISTA, CA 91910
Effective as of 01-AUG-23

MCDONNELL, EMMA, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-APR-23

C1. Lista de proveedores de la red Médico de atención especializada

MCDONNELL, EMMA, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

PAPASTERGIOU, GEORGIOS, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

PAPASTERGIOU, GEORGIOS, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

PAPASTERGIOU, GEORGIOS, MD†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JUL-22

PEAIRS, JAMES, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

PEAIRS, JAMES, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-AUG-20

PONS, MAURICIO, MD†

Provider ID: N/A

835 3RD AVE STE A

CHULA VISTA, CA 91911
Effective as of 01-AUG-22

PONS, MAURICIO, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-JUL-22

PONS, MAURICIO, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

PONS, MAURICIO, MD†

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

RAJSBAUM, MARTIN, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

RAJSBAUM, MARTIN, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-JUL-22

SASSANI, PATRICK, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-APR-24

SASSANI, PATRICK, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-MAR-23

SASSANI, PATRICK, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

SCHER, BARRY, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

SCHER, BARRY, MD†

Provider ID: N/A

480 4TH AVE STE 201
CHULA VISTA, CA 91910
Effective as of 01-JAN-24

SCHER, BARRY, MD†

Provider ID: N/A

480 4TH AVE STE 201
CHULA VISTA, CA 91910
Effective as of 01-MAR-19

SCHER, BARRY, MD

Provider ID: N/A

311 DEL MAR AVE
CHULA VISTA, CA 91910
Effective as of 01-JUL-23

SKAF, AYHAM, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

SKAF, AYHAM, MD†

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

SKAF, AYHAM, MD†

Provider ID: N/A

835 3RD AVE STE A

C1. Lista de proveedores de la red Médico de atención especializada

CHULA VISTA, CA 91911
Effective as of 01-JUL-22

SKAF, AYHAM, MD†

Provider ID: N/A
📄 678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

STAINER, GREGORY, MD†

Provider ID: N/A
📄 835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

ZABANEH, ALEXANDER, MD†

Provider ID: N/A
📄 342 F ST
CHULA VISTA, CA 91910
Effective as of 01-JAN-24

ZABANEH, ALEXANDER, MD†

Provider ID: N/A
📄 342 F ST
CHULA VISTA, CA 91910
Effective as of 01-JUL-20

ZABANEH, ALEXANDER, MD†

Provider ID: N/A
📄 342 F ST
CHULA VISTA, CA 91910
Effective as of 01-NOV-23

ZABANEH, ALEXANDER, MD†

Provider ID: N/A
📄 342 F ST
CHULA VISTA, CA 91910
Effective as of 01-NOV-20

ZABANEH, ALEXANDER, MD†

Provider ID: N/A
📄 342 F ST
CHULA VISTA, CA 91910
Effective as of 01-NOV-23

OPTOMETRIST

CHAIN, PEI CHI, OD

Provider ID: N/A
📄 342 F ST
CHULA VISTA, CA 91910
Effective as of 01-APR-23

EL-MOGHRABI, ROULA, OD†

Provider ID: N/A
📄 835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

EL-MOGHRABI, NANCY, OD†

Provider ID: N/A
📄 835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

KOO, ANITA, OD

Provider ID: N/A
📄 835 THIRD AVE
STE A
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

KOO, ANITA, OD

Provider ID: N/A
📄 835 THIRD AVE
STE A
CHULA VISTA, CA 91911
Effective as of 01-FEB-24

KOO, ANITA, OD

Provider ID: N/A
📄 835 THIRD AVE
STE A
CHULA VISTA, CA 91911
Effective as of 01-JUN-24

KOO, ANITA, OD

Provider ID: N/A
📄 678 3RD AVE
CHULA VISTA, CA 91910

Effective as of 01-FEB-24

KOO, ANITA, OD

Provider ID: N/A
📄 678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-MAY-24

MASCARENO, EFRAIN, OD†

Provider ID: N/A
📄 2260 OTAY LAKES RD STE
111
CHULA VISTA, CA 91915*
Effective as of 01-SEP-22

MASCARENO, EFRAIN, OD†

Provider ID: N/A
📄 440 4TH AVE STE 9
CHULA VISTA, CA 91910*
Effective as of 01-SEP-22

MASCARENO, EFRAIN, OD†

Provider ID: N/A
📄 440 4TH AVE STE 9
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

MASCARENO, EFRAIN, OD†

Provider ID: N/A
📄 2260 OTAY LAKES RD STE
111
CHULA VISTA, CA 91915
Effective as of 01-JAN-21

NGUYEN, THU, OD†

Provider ID: N/A
📄 342 F ST
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

NGUYEN, THU, OD†

Provider ID: N/A
📄 342 F ST
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

C1. Lista de proveedores de la red Médico de atención especializada

SCOVILL, ALEXANDRA, OD†

Provider ID: N/A

342 F ST
CHULA VISTA, CA 91910
Effective as of 01-APR-23

SCOVILL, ALEXANDRA, OD†

Provider ID: N/A

342 F ST
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

THACH, QUEEN, OD

Provider ID: N/A

835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-SEP-24

THACH, QUEEN, OD

Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-SEP-24

OTOLARYNGOLOGY

ABDOU, RAMI, MD†

Provider ID: N/A

577 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-AUG-22

BANTHIA, VISHAL, MD†

Provider ID: N/A

577 3RD AVE
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-AUG-21

BANTHIA, VISHAL, MD†

Provider ID: N/A

577 3RD AVE
CHULA VISTA, CA 91910
Teleservice

Effective as of 01-JAN-22

BANTHIA, VISHAL, MD†

Provider ID: N/A

577 3RD AVE
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-SEP-21

CALZADA, AUDREY, MD†

Provider ID: N/A

577 3RD AVE
CHULA VISTA, CA 91910

Effective as of 01-OCT-22

CHANG, EDWARD, MD

Provider ID: N/A

577 THIRD AVE,
CHULA VISTA, CA 91910

Effective as of 01-SEP-24

CHANG, EDWARD, MD

Provider ID: N/A

577 3RD AVE
CHULA VISTA, CA 91910

Effective as of 01-AUG-24

CHANG, EDWARD, MD

Provider ID: N/A

577 3RD AVE
CHULA VISTA, CA 91910

Effective as of 01-JUN-24

CHANG, EDWARD, MD

Provider ID: N/A

577 THIRD AVE,
CHULA VISTA, CA 91910

Effective as of 01-MAR-24

JIMENEZ, CARLOS, MD†

Provider ID: N/A

321 E ST STE A
CHULA VISTA, CA 91910

Effective as of 01-OCT-20

JIMENEZ, CARLOS, MD†

Provider ID: N/A

321 E ST STE A
CHULA VISTA, CA 91910

Effective as of 01-OCT-20

MEHTA, RITVIK, MD†

Provider ID: N/A

577 3RD AVE
CHULA VISTA, CA 91910

Effective as of 01-SEP-22

MOSHTAGHI, OMID, MD

Provider ID: N/A

765 MEDICAL CENTER CT
STE 210

CHULA VISTA, CA 91911

Effective as of 01-JAN-24

MOSHTAGHI, OMID, MD

Provider ID: N/A

2060 OTAY LAKES RD STE
140

CHULA VISTA, CA 91913

Effective as of 01-JUL-24

MOSHTAGHI, OMID, MD

Provider ID: N/A

2060 OTAY LAKES RD STE
140

CHULA VISTA, CA 91913

Effective as of 01-JUL-24

PATSIAS, ALEXIS, MD

Provider ID: N/A

2060 OTAY LAKES RD STE
140

CHULA VISTA, CA 91913

Effective as of 01-SEP-24

PATSIAS, ALEXIS, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 210

CHULA VISTA, CA 91911

CI. Lista de proveedores de la red Médico de atención especializada

Teleservice

Effective as of 01-SEP-22

PATSIAS, ALEXIS, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 210
CHULA VISTA, CA 91911

Teleservice

Effective as of 01-MAY-21

PATSIAS, ALEXIS, MD

Provider ID: N/A

2060 OTAY LAKES RD STE
140
CHULA VISTA, CA 91913

Effective as of 01-JUN-24

PATSIAS, ALEXIS, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 210
CHULA VISTA, CA 91911

Teleservice

Effective as of 01-APR-21

RASUL, LAILA, MD

Provider ID: N/A

321 E ST STE A
CHULA VISTA, CA 91910

Effective as of 01-AUG-24

SAEZ, NEIL, MD

Provider ID: N/A

765 MEDICAL CENTER CT
STE 210
CHULA VISTA, CA 91911

Effective as of 01-JAN-24

SAEZ, NEIL, MD

Provider ID: N/A

2060 OTAY LAKES RD STE
140
CHULA VISTA, CA 91913

Effective as of 01-NOV-23

SAEZ, NEIL, MD

Provider ID: N/A

2060 OTAY LAKES RD STE
140
CHULA VISTA, CA 91913

Effective as of 01-FEB-24

SAEZ, NEIL, MD

Provider ID: N/A

2060 OTAY LAKES RD STE
140
CHULA VISTA, CA 91913

Effective as of 01-JUL-24

SAEZ, NEIL, MD

Provider ID: N/A

2060 OTAY LAKES RD STE
140
CHULA VISTA, CA 91913

Effective as of 01-JUL-24

SCHALCH LEPE, PAUL, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 210
CHULA VISTA, CA 91911

Teleservice

Effective as of 01-JAN-21

SCHALCH LEPE, PAUL, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 210
CHULA VISTA, CA 91911

Teleservice

Effective as of 01-JUL-22

SCHALCH LEPE, PAUL, MD†

Provider ID: N/A

765 MEDICAL CENTER CT
STE 210
CHULA VISTA, CA 91911

Teleservice

Effective as of 01-AUG-20

WOO, LINDA, MD†

Provider ID: N/A

321 E ST STE A
CHULA VISTA, CA 91910

Effective as of 01-AUG-20

WOO, LINDA, MD†

Provider ID: N/A

321 E ST STE A
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

WOO, LINDA, MD†

Provider ID: N/A

321 E ST
CHULA VISTA, CA 91910

Effective as of 01-MAR-18

WOO, LINDA, MD†

Provider ID: N/A

321 E ST STE A
CHULA VISTA, CA 91910

Effective as of 01-FEB-18

WOO, LINDA, MD†

Provider ID: N/A

321 E ST STE A
CHULA VISTA, CA 91910

Effective as of 01-SEP-22

WOO, LINDA, MD†

Provider ID: N/A

435 H ST
CHULA VISTA, CA 91910

Effective as of 01-AUG-21

PEDIATRICS

PIANSAY, MARIACORAZON, MD

Provider ID: N/A

1637 3RD AVE STE B-F
CHULA VISTA, CA 91911

Effective as of 01-MAY-23

C1. Lista de proveedores de la red Médico de atención especializada

PIANSAY, MARIACORAZON, MD

Provider ID: N/A

📍 1637 3RD AVE STE H-I
CHULA VISTA, CA 91911
Effective as of 01-MAY-23

ROWHANI, NAGHMEH, MD

Provider ID: N/A

📍 280 E ST
CHULA VISTA, CA 91910
Effective as of 01-FEB-24

TIZNADO, ERNESTO, MD†

Provider ID: N/A

📍 1635 3RD AVE STE L
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

PHYS MED/ REHAB PAIN MEDICINE

KATZEN, SETH, DO

Provider ID: N/A

📍 480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-MAY-23

KATZEN, SETH, DO

Provider ID: N/A

📍 480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-MAR-24

KOLODGE, GAVIN, DO

Provider ID: N/A

📍 955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-JUN-23

RICHARDSON, HENRY, MD†

Provider ID: N/A

📍 340 4TH AVE STE 19
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

PHYSICAL MEDICINE / REHABILITATION

BULLOCK, ANDREW, DO†

Provider ID: N/A

📍 344 F ST STE 100
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

BULLOCK, ANDREW, DO†

Provider ID: N/A

📍 344 F ST STE 100
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

BULLOCK, ANDREW, DO†

Provider ID: N/A

📍 344 F ST STE 100
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

KATZEN, SETH, DO

Provider ID: N/A

📍 480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-NOV-22

KOLODGE, GAVIN, DO

Provider ID: N/A

📍 955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-SEP-23

TAHAEI, SEYED, MD†

Provider ID: N/A

📍 340 4TH AVE STE 19
CHULA VISTA, CA 91910
Teleservice

Effective as of 01-OCT-22

PHYSICIANS ASSISTANT

BURILA, FAITH, PA

Provider ID: N/A

📍 299 J ST
CHULA VISTA, CA 91910
Teleservice

Effective as of 01-JUN-24

CHAN, ALONSO, PA†

Provider ID: N/A

📍 299 J ST
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

DU, SARAH, PA

Provider ID: N/A

📍 577 THIRD AVE
CHULA VISTA, CA 91910
Teleservice

Effective as of 01-APR-24

GUTH, CARA, PA†

Provider ID: N/A

📍 480 4TH AVE STE 501
CHULA VISTA, CA 91910
Teleservice

Effective as of 01-JUL-21

GUTH, CARA, PA†

Provider ID: N/A

📍 480 4TH AVE STE 501
CHULA VISTA, CA 91910
Teleservice

Effective as of 01-JAN-24

INDA, PRISCILLA, PA†

Provider ID: N/A

📍 429 BROADWAY
CHULA VISTA, CA 91910
Effective as of 01-JAN-24

INDA, PRISCILLA, PA†

Provider ID: N/A

📍 429 BROADWAY
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

C1. Lista de proveedores de la red Médico de atención especializada

INDA, PRISCILLA, PA†

Provider ID: N/A

📍 450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

INDA, PRISCILLA, PA†

Provider ID: N/A

📍 450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

INDA, PRISCILLA, PA†

Provider ID: N/A

📍 450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

INDA, PRISCILLA, PA

Provider ID: N/A

📍 678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-MAY-23

KOLODGE, KAITLEN, PA

Provider ID: N/A

📍 955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-AUG-23

KOLODGE, KAITLEN, PA

Provider ID: N/A

📍 955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-DEC-21

LEE, MYUNGHEE, PA

Provider ID: N/A

📍 340 FOURTH AVE
STE 7A
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-NOV-23

LENIHAN, MICHAEL, PA

Provider ID: N/A

📍 955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-DEC-21

MACASADIA, MARITES, PA

Provider ID: N/A

📍 752 MEDICAL CENTER CT
STE 210
CHULA VISTA, CA 91911
Effective as of 01-SEP-20

MARISCAL, MIGUEL, PA

Provider ID: N/A

📍 855 THIRD AVE
STE 2200
CHULA VISTA, CA 91911
Effective as of 01-JUL-24

MARTINEZ-MURGUIA, IRENE, PA

Provider ID: N/A

📍 855 THIRD AVE
STE 2220
CHULA VISTA, CA 91911
Effective as of 01-JUL-24

MENDEZ, JESUS, PA†

Provider ID: N/A

📍 678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

MOREO, HUNTER, PA

Provider ID: N/A

📍 752 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911

Teleservice

Effective as of 01-JUL-24

NGUYEN, THUY-VY, PA†

Provider ID: N/A

📍 2300 BOSWELL RD STE 130
CHULA VISTA, CA 91914

Teleservice

Effective as of 01-AUG-22

NGUYEN, THUY-VY, PA†

Provider ID: N/A

📍 2300 BOSWELL RD STE 130
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-NOV-23

ORTEGA-ENDAHL, DAVID, PA

Provider ID: N/A

📍 2648 MAIN ST STE A
CHULA VISTA, CA 91911
Effective as of 01-OCT-21

PEDROZA, JENNIFER, PA†

Provider ID: N/A

📍 752 MEDICAL CENTER CT
STE 106
CHULA VISTA, CA 91911
Effective as of 01-AUG-20

POGGI, SARA, PA

Provider ID: N/A

📍 577 THIRD AVE
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-APR-24

PYLE, ALEXANDRA, PA

Provider ID: N/A

📍 480 FOURTH AVE
STE 501
CHULA VISTA, CA 91910
Effective as of 01-JAN-24

ROBICHAUD, FAITH, PA

Provider ID: N/A

📍 299 J ST
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-MAR-23

ROBINSON, JENELLE, PA

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

☒ 340 FOURTH AVE
STE 7A
CHULA VISTA, CA 91910
Effective as of 01-NOV-23

SCHAUT, ELIZABETH, PA

Provider ID: N/A

☒ 2300 BOSWELL RD STE 130
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-AUG-24

SHAH, SHEENA, PA

Provider ID: N/A

☒ 765 3RD AVE STE 100
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

STIFF, TYLER, PA

Provider ID: N/A

☒ 296 H ST STE 203
CHULA VISTA, CA 91910
Effective as of 01-APR-24

TAYLOR, RYAN, PA

Provider ID: N/A

☒ 480 FOURTH AVE
STE 501
CHULA VISTA, CA 91910
Effective as of 01-JAN-24

THOMAS, KIMBERLY, PA

Provider ID: N/A

☒ 678 THIRD AVE
CHULA VISTA, CA 91910
Effective as of 01-JUL-24

TODD, RACHEL, PA

Provider ID: N/A

☒ 299 J ST
CHULA VISTA, CA 91910
Effective as of 01-JUN-23

VARGAS, CHRISTOPHER, PA†

Provider ID: N/A

☒ 2452 FENTON ST STE C203
CHULA VISTA, CA 91914
Effective as of 01-JAN-23

VARGAS, CHRISTOPHER, PA

Provider ID: N/A

☒ 2452 FENTON ST STE C101
CHULA VISTA, CA 91914
Effective as of 01-JAN-23

VARGAS, CHRISTOPHER, PA†

Provider ID: N/A

☒ 2452 FENTON ST STE C203
CHULA VISTA, CA 91914
Effective as of 01-SEP-22

WHITE, KYLE, PA

Provider ID: N/A

☒ 765 MEDICAL CENTER CT
STE 210
CHULA VISTA, CA 91911
Effective as of 01-MAY-23

WILAND, WINONA, PA

Provider ID: N/A

☒ 577 3RD AVE
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JUN-23

WINTER, JENNIFER, PA

Provider ID: N/A

☒ 955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-JUL-24

WRIGHT, DEREK, PA

Provider ID: N/A

☒ 340 FOURTH AVE
STE 19
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-NOV-23

WRIGHT, DEREK, PA

Provider ID: N/A

☒ 340 FOURTH AVE
STE 19
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-AUG-23

WRIGHT, DEREK, PA

Provider ID: N/A

☒ 340 FOURTH AVE
STE 19
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JUL-23

PODIATRIST

BRAZIER, SETH, DPM

Provider ID: N/A

☒ 855 THIRD AVE
STE 1100
CHULA VISTA, CA 91911
Effective as of 01-SEP-24

CAINE, SAMUEL, DPM

Provider ID: N/A

☒ 345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JUL-24

CAINE, SAMUEL, DPM

Provider ID: N/A

☒ 345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-DEC-23

CAINE, SAMUEL, DPM

Provider ID: N/A

☒ 345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-APR-24

CHU, ANDREW, DPM†

Provider ID: N/A

📄 855 3RD AVE STE 1100
CHULA VISTA, CA 91911

Effective as of 01-JUN-24

COLLINS, MICHAEL, DPM†

Provider ID: N/A

📄 480 4TH AVE STE 501
CHULA VISTA, CA 91910

Effective as of 01-AUG-23

COLLINS, MICHAEL, DPM†

Provider ID: N/A

📄 480 4TH AVE STE 501
CHULA VISTA, CA 91910

Effective as of 01-APR-23

COLLINS, MICHAEL, DPM†

Provider ID: N/A

📄 480 4TH AVE STE 501
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

COLLINS, MICHAEL, DPM†

Provider ID: N/A

📄 480 4TH AVE STE 501
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

DAVIDSONIII, JOHN, DPM†

Provider ID: N/A

📄 345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice

Effective as of 01-AUG-18

DAVIDSONIII, JOHN, DPM†

Provider ID: N/A

📄 345 F ST STE 100
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-JAN-21

DAVIDSONIII, JOHN, DPM†

Provider ID: N/A

📄 345 F ST STE 100
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-JAN-21

DAVIDSONIII, JOHN, DPM†

Provider ID: N/A

📄 345 F ST STE 100
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-DEC-23

DAVIDSONIII, JOHN, DPM†

Provider ID: N/A

📄 345 F ST STE 100
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-JAN-22

DAVIDSONIII, JOHN, DPM†

Provider ID: N/A

📄 345 F ST STE 100
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-SEP-22

HAN, KYOUNG, DPM

Provider ID: N/A

📄 855 3RD AVE STE 1100
CHULA VISTA, CA 91911

Effective as of 01-JAN-22

KRIGER, STEPHEN, DPM†

Provider ID: N/A

📄 345 F ST STE 100
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-JAN-22

MANCHEL, BRUCE, DPM†

Provider ID: N/A

📄 678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

MAZZA, DAVID, DPM†

Provider ID: N/A

📄 276 CHURCH AVE STE A
CHULA VISTA, CA 91910

Effective as of 01-JAN-14

MAZZA, DAVID, DPM†

Provider ID: N/A

📄 276 CHURCH AVE STE A
CHULA VISTA, CA 91910

Effective as of 01-SEP-15

MAZZA, DAVID, DPM†

Provider ID: N/A

📄 276 CHURCH AVE STE A
CHULA VISTA, CA 91910

Effective as of 01-DEC-22

MORGAN, CRAIG, DPM†

Provider ID: N/A

📄 276 CHURCH AVE STE A
CHULA VISTA, CA 91910*

Effective as of 01-DEC-17

NGUYEN, HAN, DPM

Provider ID: N/A

📄 345 F ST STE 100
CHULA VISTA, CA 91910

Effective as of 01-JUN-23

NGUYEN, HAN, DPM

Provider ID: N/A

📄 345 F ST STE 100
CHULA VISTA, CA 91910

Effective as of 01-JAN-24

NGUYEN, HAN, DPM

Provider ID: N/A

📄 345 F ST STE 100
CHULA VISTA, CA 91910

Effective as of 01-JUL-23

C1. Lista de proveedores de la red Médico de atención especializada

NGUYEN, HAN, DPM

Provider ID: N/A

345 F ST STE 100
CHULA VISTA, CA 91910
Effective as of 01-SEP-24

PUCCINELLI, ALAYNA, DPM†

Provider ID: N/A

340 4TH AVE STE 6
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-SEP-22

PUCCINELLI, ALAYNA, DPM†

Provider ID: N/A

340 4TH AVE STE 6
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JUL-22

QUE, HOWIE, DPM

Provider ID: N/A

750 MEDICAL CENTER CT
STE 6
CHULA VISTA, CA 91911
Effective as of 01-JUN-23

READ, TRENTON, DPM

Provider ID: N/A

855 3RD AVE STE 1100
CHULA VISTA, CA 91911
Effective as of 01-APR-23

SMITH, COLLIN, DPM†

Provider ID: N/A

855 3RD AVE STE 1100
CHULA VISTA, CA 91911
Effective as of 01-JUN-24

SMITH, COLLIN, DPM†

Provider ID: N/A

855 3RD AVE STE 1100
CHULA VISTA, CA 91911
Effective as of 01-JUN-21

SMITH, COLLIN, DPM†

Provider ID: N/A

855 3RD AVE STE 1100
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

SOUVOROVA, JULIA, DPM†

Provider ID: N/A

336 OXFORD ST STE 104
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-MAY-24

SOUVOROVA, JULIA, DPM†

Provider ID: N/A

336 OXFORD ST STE 104
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-MAR-24

TOUMA, ELIE, DPM

Provider ID: N/A

1111 BROADWAY STE 305
CHULA VISTA, CA 91911
Effective as of 01-APR-23

TSAI, GRACE, DPM

Provider ID: N/A

345 F ST STE 100
CHULA VISTA, CA 91910
Effective as of 01-APR-23

TSAI, GRACE, DPM

Provider ID: N/A

345 F ST STE 100
CHULA VISTA, CA 91910
Effective as of 01-DEC-23

TSAI, GRACE, DPM

Provider ID: N/A

345 F ST STE 100
CHULA VISTA, CA 91910
Effective as of 01-SEP-23

TSAI, GRACE, DPM

Provider ID: N/A

345 F ST STE 100
CHULA VISTA, CA 91910
Effective as of 01-FEB-23

XU, DIXON, DPM†

Provider ID: N/A

345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-SEP-22

XU, DIXON, DPM†

Provider ID: N/A

345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-SEP-22

XU, DIXON, DPM†

Provider ID: N/A

345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-NOV-20

XU, DIXON, DPM†

Provider ID: N/A

345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JAN-21

XU, DIXON, DPM†

Provider ID: N/A

345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-MAR-24

XU, DIXON, DPM†

Provider ID: N/A

345 F ST STE 100

C1. Lista de proveedores de la red Médico de atención especializada

CHULA VISTA, CA 91910
Teleservice
Effective as of 01-DEC-23

XU, DIXON, DPM†

Provider ID: N/A
📍 345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-MAY-21

PSYCHIATRY

BINDAL, ANKUR, MD†

Provider ID: N/A
📍 765 3RD AVE STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-SEP-22

BINDAL, ANKUR, MD†

Provider ID: N/A
📍 765 3RD AVE STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JUL-22

BINDAL, ANKUR, MD†

Provider ID: N/A
📍 765 3RD AVE STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JUL-22

BINDAL, ANKUR, MD†

Provider ID: N/A
📍 765 3RD AVE STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-SEP-22

BINDAL, ANKUR, MD†

Provider ID: N/A
📍 765 3RD AVE STE 100

CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JUL-22

BINDAL, ANKUR, MD†

Provider ID: N/A
📍 765 3RD AVE STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JUL-22

CHAUDHRI, YASHWANT, MD†

Provider ID: N/A
📍 2300 BOSWELL RD STE 225
CHULA VISTA, CA 91914
Effective as of 01-AUG-22

CHAUDHRI, YASHWANT, MD†

Provider ID: N/A
📍 2300 BOSWELL RD STE 225
CHULA VISTA, CA 91914
Effective as of 01-AUG-22

DIXON, THOMAS, MD

Provider ID: N/A
📍 765 3RD AVE
STE 100
CHULA VISTA, CA 91910
Effective as of 01-SEP-24

DIXON, THOMAS, MD

Provider ID: N/A
📍 765 3RD AVE
STE 100
CHULA VISTA, CA 91910
Effective as of 01-SEP-24

KARIPPOT, ANOOP, MD†

Provider ID: N/A
📍 765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-JUN-22

KARIPPOT, ANOOP, MD†

Provider ID: N/A
📍 765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-JUN-22

MARTINEZ, STEPHANIE, MD†

Provider ID: N/A
📍 678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

MARTINEZ, STEPHANIE, MD†

Provider ID: N/A
📍 678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

MCGEHRIN, KEVIN, MD

Provider ID: N/A
📍 450 FOURTH AVE
STE 215
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-AUG-23

MCGEHRIN, KEVIN, MD

Provider ID: N/A
📍 450 FOURTH AVE
STE 215
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-MAR-24

MCGEHRIN, KEVIN, MD

Provider ID: N/A
📍 450 FOURTH AVE
STE 215
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-AUG-23

C1. Lista de proveedores de la red Médico de atención especializada

MCGEHRIN, KEVIN, MD

Provider ID: N/A

📄 450 FOURTH AVE
STE 215
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-MAR-24

MISHRA, GAURAV, MD†

Provider ID: N/A

📄 678 3RD AVE
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

MISHRA, GAURAV, MD†

Provider ID: N/A

📄 678 3RD AVE
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

NICHOLS, ALPHONSO, MD

Provider ID: N/A

📄 765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911

Teleservice

Effective as of 01-JUL-22

NICHOLS, ALPHONSO, MD

Provider ID: N/A

📄 765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911

Teleservice

Effective as of 01-JUL-22

PHAM, ALISE, DO

Provider ID: N/A

📄 450 FOURTH AVE STE 215
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-JUN-24

PHAM, ALISE, DO

Provider ID: N/A

📄 450 4TH AVE STE 215
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-SEP-24

PHAM, ALISE, DO

Provider ID: N/A

📄 450 FOURTH AVE STE 215
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-JUN-24

PHAM, ALISE, DO

Provider ID: N/A

📄 450 4TH AVE STE 215
CHULA VISTA, CA 91910

Teleservice

Effective as of 01-SEP-24

TROYER, EMILY, MD†

Provider ID: N/A

📄 678 3RD AVE
CHULA VISTA, CA 91910

Effective as of 01-JAN-22

TROYER, EMILY, MD†

Provider ID: N/A

📄 678 3RD AVE
CHULA VISTA, CA 91910

Effective as of 01-JAN-22

PSYCHIATRY CHILD

KARIPPOT, ANOOP, MD†

Provider ID: N/A

📄 765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911

Teleservice

Effective as of 01-JAN-23

KARIPPOT, ANOOP, MD†

Provider ID: N/A

📄 765 MEDICAL CENTER CT
STE 216

CHULA VISTA, CA 91911

Teleservice

Effective as of 01-JUN-22

KARIPPOT, ANOOP, MD†

Provider ID: N/A

📄 765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911

Teleservice

Effective as of 01-JAN-23

KARIPPOT, ANOOP, MD†

Provider ID: N/A

📄 765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911

Teleservice

Effective as of 01-JUN-22

MISHRA, GAURAV, MD†

Provider ID: N/A

📄 678 3RD AVE
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

MISHRA, GAURAV, MD†

Provider ID: N/A

📄 678 3RD AVE
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

NICHOLS, ALPHONSO, MD

Provider ID: N/A

📄 765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911


Teleservice

Effective as of 01-JUL-22

NICHOLS, ALPHONSO, MD


Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

 765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-JUL-22


PSYCHIATRY SLEEP MEDICINE

KARIPPOT, ANOOP, MD[†]
Provider ID: N/A


 765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-JAN-23

PSYCHOLOGIST


BAYLON, ALDO, PSYD
Provider ID: N/A

 678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JAN-22


BAYLON, ALDO, PSYD
Provider ID: N/A

 678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JAN-22


CELAYA, PATRICIA, PhD[†]
Provider ID: N/A

 678 3RD AVE
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-AUG-22


CELAYA, PATRICIA, PhD[†]
Provider ID: N/A

 678 3RD AVE
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-AUG-22


GALLO, LINDA, PhD
Provider ID: N/A

 780 BAY BLVD STE 200
CHULA VISTA, CA 91910
Effective as of 01-APR-23


GALLO, LINDA, PhD
Provider ID: N/A

 780 BAY BLVD STE 200
CHULA VISTA, CA 91910
Effective as of 01-APR-23


GOULD, HILARY, PhD[†]
Provider ID: N/A

 678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JAN-21


GOULD, HILARY, PhD[†]
Provider ID: N/A

 678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JAN-21


MAPLES, RANDI, PSYD[†]
Provider ID: N/A

 765 3RD AVE STE 100
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

MAPLES, RANDI, PSYD[†]
Provider ID: N/A


 765 3RD AVE STE 100
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

**PATTERSON-HYATT,
KIMBERLY, PSYD[†]**


Provider ID: N/A
 1061 TIERRA DEL REY STE
303
CHULA VISTA, CA 91910
Effective as of 01-NOV-21

PATTERSON-HYATT,


KIMBERLY, PSYD[†]
Provider ID: N/A

 1061 TIERRA DEL REY STE
304
CHULA VISTA, CA 91910
Effective as of 01-NOV-21


**PATTERSON-HYATT,
KIMBERLY, PSYD[†]**

Provider ID: N/A
 1061 TIERRA DEL REY STE
305
CHULA VISTA, CA 91910
Effective as of 01-NOV-21


**PATTERSON-HYATT,
KIMBERLY, PSYD[†]**

Provider ID: N/A
 1061 TIERRA DEL REY STE
305
CHULA VISTA, CA 91910
Effective as of 01-NOV-21

**PATTERSON-HYATT,
KIMBERLY, PSYD[†]**

Provider ID: N/A
 1061 TIERRA DEL REY STE
303
CHULA VISTA, CA 91910
Effective as of 01-NOV-21

**PATTERSON-HYATT,
KIMBERLY, PSYD[†]**

Provider ID: N/A
 1061 TIERRA DEL REY STE
304
CHULA VISTA, CA 91910
Effective as of 01-NOV-21

**WIJAYARATNE, IMANIE,
PSYD[†]**

Provider ID: N/A
 678 3RD AVE
CHULA VISTA, CA 91910

CI. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-JAN-21

WIJAYARATNE, IMANIE, PSYD†

Provider ID: N/A

841 KUHN DR STE 200
CHULA VISTA, CA 91910

Effective as of 01-JAN-21

PULMONARY DISEASES

LIRA, JOSE, MD†

Provider ID: N/A

841 KUHN DR STE 200
CHULA VISTA, CA 91914

Effective as of 01-JAN-14

LIRA, JOSE, MD†

Provider ID: N/A

841 KUHN DR STE 200
CHULA VISTA, CA 91914

Effective as of 01-FEB-21

LIRA, JOSE, MD†

Provider ID: N/A

841 KUHN DR STE 200
CHULA VISTA, CA 91914

Effective as of 01-SEP-22

LOZANO, MARTHA, MD†

Provider ID: N/A

841 KUHN DR STE 200
CHULA VISTA, CA 91914

Effective as of 01-SEP-15

LOZANO, MARTHA, MD†

Provider ID: N/A

841 KUHN DR STE 200
CHULA VISTA, CA 91914

Effective as of 01-MAR-21

LOZANO, MARTHA, MD†

Provider ID: N/A

841 KUHN DR STE 200
CHULA VISTA, CA 91914

Effective as of 01-JAN-14

LOZANO, MARTHA, MD†

Provider ID: N/A

841 KUHN DR STE 200
CHULA VISTA, CA 91914

Effective as of 01-SEP-22

PENA ROMERO, CESAR, MD†

Provider ID: N/A

227 CHURCH AVE
CHULA VISTA, CA 91910

Effective as of 01-SEP-15

PENA ROMERO, CESAR, MD†

Provider ID: N/A

227 CHURCH AVE
CHULA VISTA, CA 91910

Effective as of 01-OCT-19

SANCHEZ, LUIS, MD†

Provider ID: N/A

227 CHURCH AVE
CHULA VISTA, CA 91910

Effective as of 01-SEP-15

SANCHEZ, LUIS, MD†

Provider ID: N/A

227 CHURCH AVE
CHULA VISTA, CA 91910*

Effective as of 01-JAN-14

RADIATION ONCOLOGY

BRUGGEMAN, ANDREW, MD

Provider ID: N/A

769 MEDICAL CENTER CT
STE 100
CHULA VISTA, CA 91911

Effective as of 01-JAN-24

CARMONA, RUBEN, MD

Provider ID: N/A

769 MEDICAL CENTER CT
STE 100

CHULA VISTA, CA 91911

Effective as of 01-JAN-24

CARMONA, RUBEN, MD

Provider ID: N/A

769 MEDICAL CENTER CT
CHULA VISTA, CA 91911

Effective as of 01-JAN-24

COLEMAN, LORI, MD†

Provider ID: N/A

769 MEDICAL CENTER CT
CHULA VISTA, CA 91911

Effective as of 01-JAN-21

HATTANGADI-GLUTH, JONA, MD†

Provider ID: N/A

959 LANE AVE
CHULA VISTA, CA 91914

Teleservice

Effective as of 01-DEC-21

JABBARI, SIAVASH, MD†

Provider ID: N/A

769 MEDICAL CENTER CT
CHULA VISTA, CA 91911

Effective as of 01-OCT-22

MANSY, GINA, MD†

Provider ID: N/A

959 LANE AVE
CHULA VISTA, CA 91914

Teleservice

Effective as of 01-APR-21

MELL, LOREN, MD†

Provider ID: N/A

959 LANE AVE
CHULA VISTA, CA 91914

Teleservice

Effective as of 01-DEC-21

PEJAVAR, SUNANDA, MD†

CI. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

769 MEDICAL CENTER CT
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

RAHN, DOUGLAS, MD†

Provider ID: N/A

959 LANE AVE
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-APR-21

RASH, DOMINIQUE, MD†

Provider ID: N/A

959 LANE AVE
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-DEC-21

ROSE, BRENT, MD†

Provider ID: N/A

959 LANE AVE
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-DEC-21

STRAKA, CHRISTOPHER, MD†

Provider ID: N/A

959 LANE AVE
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-DEC-21

UHL, BARRY, MD†

Provider ID: N/A

769 MEDICAL CENTER CT
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-JAN-21

VOLPP, PAUL, MD†

Provider ID: N/A

769 MEDICAL CENTER CT
CHULA VISTA, CA 91911

Effective as of 01-JAN-21

WHITE, EVAN, MD†

Provider ID: N/A

959 LANE AVE
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-APR-21

RADIOLOGY DIAGNOSTIC

FOSSUM, CROIX, MD

Provider ID: N/A

769 MEDICAL CENTER CT
CHULA VISTA, CA 91911
Effective as of 01-MAY-24

YORK, JOHN, MD

Provider ID: N/A

865 3RD AVE STE 100
CHULA VISTA, CA 91911
Effective as of 01-JUN-23

REGISTERED PHYSICAL THERAPIST

ALLOS, ALEXANDER, PT†

Provider ID: N/A

88 E BONITA RD STE C
CHULA VISTA, CA 91910
Effective as of 01-NOV-21

BURLAKOVSKY, NATHAN, PT

Provider ID: N/A

88 E BONITA RD STE C
CHULA VISTA, CA 91910
Effective as of 01-NOV-21

CHENG, BRANDON, PT

Provider ID: N/A

1392 E PALOMAR ST STE
503
CHULA VISTA, CA 91913
Effective as of 01-FEB-24

DORSEY, KYLE, PT†

Provider ID: N/A

1392 E PALOMAR ST STE
503
CHULA VISTA, CA 91913
Effective as of 01-DEC-21

DORSEY, KYLE, PT†

Provider ID: N/A

1392 E PALOMAR ST STE
503
CHULA VISTA, CA 91913
Effective as of 01-SEP-22

FARRAR, COURTNEY, PT

Provider ID: N/A

340 FOURTH AVE
STE 19
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JUL-23

FARRAR, COURTNEY, PT

Provider ID: N/A

340 FOURTH AVE
STE 19
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-AUG-24

HERMAN, RACHEL, PT†

Provider ID: N/A

1392 E PALOMAR ST STE
503
CHULA VISTA, CA 91913
Effective as of 01-SEP-22

HERMAN, RACHEL, PT†

Provider ID: N/A

1392 E PALOMAR ST STE
503
CHULA VISTA, CA 91913
Effective as of 01-NOV-21

JAIN, ALEXANDRA, PT

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

880 THIRD AVE
STE A
CHULA VISTA, CA 91911
Effective as of 01-MAR-24

KARANDE, PRACHI, PT[†]

Provider ID: N/A

1392 E PALOMAR ST STE
503
CHULA VISTA, CA 91913
Effective as of 01-JAN-22

LONG, RYAN, PT

Provider ID: N/A

2417 FENTON ST STE A
CHULA VISTA, CA 91914*
Effective as of 01-JUL-22

LONG, RYAN, PT

Provider ID: N/A

320 BROADWAY STE 2
CHULA VISTA, CA 91910*
Effective as of 01-JUL-22

NGUYEN, TIA, PT

Provider ID: N/A

1392 E PALOMAR ST STE
503
CHULA VISTA, CA 91913
Effective as of 01-MAR-24

NOVENCIDO, ANDREW, PT[†]

Provider ID: N/A

1392 E PALOMAR ST STE
503
CHULA VISTA, CA 91913
Effective as of 01-SEP-22

PAPA, AMY, PT

Provider ID: N/A

88 E BONITA RD STE C
CHULA VISTA, CA 91910
Effective as of 01-NOV-21

PAPA, AMY, PT

Provider ID: N/A

88 E BONITA RD STE C
CHULA VISTA, CA 91910
Effective as of 01-AUG-23

PHILLIP, OMARI, PT[†]

Provider ID: N/A

88 E BONITA RD STE C
CHULA VISTA, CA 91910
Effective as of 01-DEC-21

POLIS, NICK, PT

Provider ID: N/A

88 E BONITA RD STE C
CHULA VISTA, CA 91910
Effective as of 01-MAY-22

SPARKS, TODD, PT[†]

Provider ID: N/A

1392 E PALOMAR ST STE
503
CHULA VISTA, CA 91913
Effective as of 01-JAN-21

STAHL, KEVIN, PT

Provider ID: N/A

1392 E PALOMAR ST STE
503
CHULA VISTA, CA 91913
Effective as of 01-SEP-23

THOMAS, KAITLIN, PT

Provider ID: N/A

88 E BONITA RD STE C
CHULA VISTA, CA 91910
Effective as of 01-NOV-23

RHEUMATOLOGY

ALNAHLAWI, BASMA, MD[†]

Provider ID: N/A

296 H ST STE 304
CHULA VISTA, CA 91910
Teleservice

Effective as of 01-SEP-22

ASFAR, RAFID, MD

Provider ID: N/A

765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911
Effective as of 01-AUG-24

ASFAR, RAFID, MD

Provider ID: N/A

765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911
Effective as of 01-MAY-24

CHITKARA, PUJA, MD[†]

Provider ID: N/A

765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911
Effective as of 01-SEP-15

CHITKARA, PUJA, MD[†]

Provider ID: N/A

765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911
Effective as of 01-AUG-24

CHITKARA, PUJA, MD[†]

Provider ID: N/A

765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911
Effective as of 01-MAR-16

CHITKARA, PUJA, MD[†]


Provider ID: N/A

765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

CHWA, JEFFREY, DO


CI. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

 765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911
Effective as of 01-SEP-22


HAMMETT, ERIN, DO[†]

Provider ID: N/A

 678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JAN-21


KHANNA, SURABHI, MD

Provider ID: N/A

 765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-JUN-23


REDDY, DANA, MD[†]

Provider ID: N/A

 678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JAN-21


REDDY, SMITHA, MD[†]

Provider ID: N/A

 272 CHURCH AVE STE 1
CHULA VISTA, CA 91910
Effective as of 01-JUL-24

REDDY, SMITHA, MD[†]

Provider ID: N/A

 272 CHURCH AVE STE 1
CHULA VISTA, CA 91910
Effective as of 01-FEB-19

REDDY, SMITHA, MD[†]


Provider ID: N/A

 272 CHURCH AVE STE 1
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

SPEECH PATHOLOGIST


AROCHO-SALGADO, MIRELIS, SP

Provider ID: N/A

 333 H ST STE 5000
CHULA VISTA, CA 91910
Effective as of 01-JUN-22


AROCHO-SALGADO, MIRELIS, SP

Provider ID: N/A

 333 H ST STE 5000
CHULA VISTA, CA 91910
Effective as of 01-JUN-22


CALDERON MORALES, ASTRID, SP

Provider ID: N/A

 333 H ST STE 5000
CHULA VISTA, CA 91910
Effective as of 01-APR-24

DURNAN, CASSANDRA, SP


Provider ID: N/A

 333 H ST STE 5000
CHULA VISTA, CA 91910
Effective as of 01-JUL-24

SURGERY GENERAL


ARCOVEDO, RODOLFO, MD[†]

Provider ID: N/A

 786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-AUG-23

ARCOVEDO, RODOLFO, MD[†]

Provider ID: N/A

 786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

ARCOVEDO, RODOLFO, MD[†]


Provider ID: N/A

 786 3RD AVE STE B

CHULA VISTA, CA 91910
Effective as of 01-JAN-21


ARCOVEDO, RODOLFO, MD[†]

Provider ID: N/A

 786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-JUN-19


ARCOVEDO, RODOLFO, MD[†]

Provider ID: N/A

 786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-JUN-19


BARRERA, HUGO, MD[†]

Provider ID: N/A

 786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-JAN-19


BARRERA, HUGO, MD[†]

Provider ID: N/A

 786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-SEP-14


BARRERA, HUGO, MD[†]

Provider ID: N/A

 786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-JAN-21


BARRERA, HUGO, MD[†]

Provider ID: N/A

 786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

CASILLAS BERUMEN, SERGIO, MD

Provider ID: N/A

 1111 BROADWAY STE 305
CHULA VISTA, CA 91911
Effective as of 01-JUL-24

C1. Lista de proveedores de la red Médico de atención especializada

CASILLAS BERUMEN, SERGIO, MD

Provider ID: N/A

📄 1111 BROADWAY STE 305
CHULA VISTA, CA 91911
Effective as of 01-FEB-24

EWBANK, CLIFTON, MD†

Provider ID: N/A

📄 786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-NOV-22

EWBANK, CLIFTON, MD†

Provider ID: N/A

📄 786 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-NOV-22

EWBANK, CLIFTON, MD†

Provider ID: N/A

📄 786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-OCT-22

EWBANK, CLIFTON, MD†

Provider ID: N/A

📄 786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-AUG-22

HSU, BRADFORD, MD

Provider ID: N/A

📄 865 THIRD AVE
STE 112
CHULA VISTA, CA 91911
Effective as of 01-MAY-24

HSU, BRADFORD, MD†

Provider ID: N/A

📄 480 4TH AVE STE 404
CHULA VISTA, CA 91910
Effective as of 01-SEP-15

HSU, BRADFORD, MD†

Provider ID: N/A

📄 480 4TH AVE STE 404
CHULA VISTA, CA 91910
Effective as of 01-JAN-14

HSU, BRADFORD, MD†

Provider ID: N/A

📄 480 4TH AVE STE 404
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

HUANG, MARK, MD†

Provider ID: N/A

📄 345 F ST STE 200
CHULA VISTA, CA 91910
Effective as of 01-OCT-17

KHARAZI, ALEXANDRA, MD†

Provider ID: N/A

📄 345 F ST STE 200
CHULA VISTA, CA 91910
Effective as of 01-MAY-23

MOLDOVAN, STEFAN, MD†

Provider ID: N/A

📄 1111 BROADWAY STE 305
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-MAR-24

MOLDOVAN, STEFAN, MD†

Provider ID: N/A

📄 1111 BROADWAY STE 305
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-MAR-24

MOLDOVAN, STEFAN, MD†

Provider ID: N/A

📄 1111 BROADWAY STE 305
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-AUG-24

MORAL, JOHN, MD

Provider ID: N/A

📄 865 THIRD AVE
STE 112
CHULA VISTA, CA 91911
Effective as of 01-MAY-24

MORAL, JOHN, MD

Provider ID: N/A

📄 480 4TH AVE STE 404
CHULA VISTA, CA 91910
Effective as of 01-SEP-23

MORAL, JOHN, MD

Provider ID: N/A

📄 480 4TH AVE STE 404
CHULA VISTA, CA 91910
Effective as of 01-JUN-23

SPITZER, BLAKE, MD†

Provider ID: N/A

📄 786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-OCT-19

SPITZER, BLAKE, MD†

Provider ID: N/A

📄 786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-NOV-22

SPITZER, BLAKE, MD†

Provider ID: N/A

📄 786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-MAY-20

SPITZER, BLAKE, MD†


Provider ID: N/A

📄 786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-JAN-21


SUMMERS, STEPHEN, MD†

Provider ID: N/A


C1. Lista de proveedores de la red Médico de atención especializada

 786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-JAN-21


SUMMERS, STEPHEN, MD†
Provider ID: N/A

 786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

SUMMERS, STEPHEN, MD†
Provider ID: N/A

 786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-SEP-15


SUMMERS, STEPHEN, MD†
Provider ID: N/A

 786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-JUN-21


TALEBZADEH, NOJAN, MD†
Provider ID: N/A

 246 F ST
CHULA VISTA, CA 91910
Effective as of 01-JAN-14


UNKART, JONATHAN, MD
Provider ID: N/A

 786 3RD AVE STE B
CHULA VISTA, CA 91910*
Effective as of 01-OCT-24

YANG, YIFAN, MD†
Provider ID: N/A


 786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-SEP-15

YANG, YIFAN, MD†
Provider ID: N/A

 786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-JUN-23


YANG, YIFAN, MD†

Provider ID: N/A

 786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-JAN-19


YANG, YIFAN, MD†

Provider ID: N/A

 786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-JAN-21


YANG, YIFAN, MD†

Provider ID: N/A

 786 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

YANG, YIFAN, MD†


Provider ID: N/A

 786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

SURGERY GENERAL VASCULAR


CHAMMAS, JOSEPH, MD†

Provider ID: N/A

 1111 BROADWAY STE 305
CHULA VISTA, CA 91911
Effective as of 01-JUL-24


**MORENO MARTINEZ,
ENRIQUE, MD†**

Provider ID: N/A

 1111 BROADWAY STE 305
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-MAR-24


SALLOUM, ALEXANDER, MD†

Provider ID: N/A

 1111 BROADWAY STE 305
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-MAR-24


SALLOUM, ALEXANDER, MD†

Provider ID: N/A

 1111 BROADWAY STE 305
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-MAR-24


SALLOUM, ALEXANDER, MD†

Provider ID: N/A

 1111 BROADWAY STE 305
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-MAR-24

SALLOUM, ALEXANDER, MD†


Provider ID: N/A

 1111 BROADWAY STE 305
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-AUG-24

SURGERY HAND

POMERANTZ, MICHAEL, MD†


Provider ID: N/A

 955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-DEC-21

SURGERY NEUROLOGICAL

WHITE, DANIEL, MD†

Provider ID: N/A

 296 H ST STE 303
CHULA VISTA, CA 91910
Effective as of 01-SEP-23

WHITE, DANIEL, MD†

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

☒ 296 H ST STE 303
CHULA VISTA, CA 91910
Effective as of 01-MAR-23

WHITE, DANIEL, MD†

Provider ID: N/A

☒ 296 H ST STE 303
CHULA VISTA, CA 91910
Effective as of 01-OCT-21

SURGERY ORTHOPEDIC

ANDRY, JAMES, MD

Provider ID: N/A

☒ 750 MEDICAL CENTER CT
STE 14
CHULA VISTA, CA 91911*
Effective as of 01-MAR-24

ANDRY, JAMES, MD

Provider ID: N/A

☒ 750 MEDICAL CENTER CT
STE 14
CHULA VISTA, CA 91911
Effective as of 01-MAR-24

BRERETON, DANIEL, DO†

Provider ID: N/A

☒ 750 MEDICAL CENTER CT
STE 14
CHULA VISTA, CA 91911
Effective as of 01-DEC-21

DOWNING, KRISTOPHER, MD

Provider ID: N/A

☒ 750 MEDICAL CENTER CT
STE 14
CHULA VISTA, CA 91911*
Effective as of 01-MAR-24

DOWNING, KRISTOPHER, MD

Provider ID: N/A

☒ 750 MEDICAL CENTER CT
STE 14

CHULA VISTA, CA 91911
Effective as of 01-MAR-24

DUTTON, PASCUAL, MD

Provider ID: N/A

☒ 750 MEDICAL CENTER CT
STE 14
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

DUTTON, PASCUAL, MD

Provider ID: N/A

☒ 955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-JAN-24

DUTTON, PASCUAL, MD

Provider ID: N/A

☒ 296 H ST STE 203
CHULA VISTA, CA 91910
Effective as of 01-JAN-24

EVES, WILLIAM, MD†

Provider ID: N/A

☒ 480 4TH AVE STE 307
CHULA VISTA, CA 91910
Effective as of 01-JAN-14

EVES, WILLIAM, MD†

Provider ID: N/A

☒ 480 4TH AVE STE 307
CHULA VISTA, CA 91910
Effective as of 01-SEP-15

GROTTING, JOHN, MD

Provider ID: N/A

☒ 296 H ST STE 203
CHULA VISTA, CA 91910
Effective as of 01-JAN-24

GROTTING, JOHN, MD

Provider ID: N/A

☒ 955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-JAN-24

GROTTING, JOHN, MD†

Provider ID: N/A

☒ 750 MEDICAL CENTER CT
STE 14
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

GROTTING, JOHN, MD†

Provider ID: N/A

☒ 750 MEDICAL CENTER CT
STE 14
CHULA VISTA, CA 91911
Effective as of 01-AUG-23

GROTTING, JOHN, MD†

Provider ID: N/A

☒ 750 MEDICAL CENTER CT
STE 14
CHULA VISTA, CA 91911
Effective as of 01-NOV-21

HOFMEISTER, ERIC, MD†

Provider ID: N/A

☒ 955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-NOV-21

HOFMEISTER, ERIC, MD†

Provider ID: N/A

☒ 955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-AUG-23

HOFMEISTER, ERIC, MD†

Provider ID: N/A

☒ 955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-FEB-18

KIMBALL, MICHAEL, MD†

Provider ID: N/A

☒ 480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

C1. Lista de proveedores de la red Médico de atención especializada

KLATMAN, SAMUEL, MD†

Provider ID: N/A

955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-AUG-23

KLATMAN, SAMUEL, MD†

Provider ID: N/A

955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-NOV-21

KOLODGE, GAVIN, DO

Provider ID: N/A

955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-AUG-23

KUSNEZOV, NICHOLAS, MD

Provider ID: N/A

750 MEDICAL CENTER CT
STE 14
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-APR-24

MCKNIGHT, BRADEN, MD

Provider ID: N/A

750 MEDICAL CENTER CT
STE 14
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-APR-24

POMERANTZ, MICHAEL, MD†

Provider ID: N/A

955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-FEB-18

RICKARDS, ENASS, MD

Provider ID: N/A

480 FOURTH AVE
STE 501

CHULA VISTA, CA 91910
Effective as of 01-FEB-24

ROSENFELD, ALAN, MD†

Provider ID: N/A

480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

ROSENFELD, ALAN, MD†

Provider ID: N/A

480 4TH AVE STE 501
CHULA VISTA, CA 91910*
Effective as of 01-FEB-07

ROSENFELD, ALAN, MD†

Provider ID: N/A

480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

ROSENFELD, ALAN, MD†

Provider ID: N/A

480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-AUG-23

ROSENFELD, ALAN, MD†

Provider ID: N/A

480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-APR-23

ROSENFELD, ALAN, MD†

Provider ID: N/A

480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-NOV-09

TAYYAB, NEIL, MD†

Provider ID: N/A

480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-AUG-23

TAYYAB, NEIL, MD†

Provider ID: N/A

480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

TAYYAB, NEIL, MD†

Provider ID: N/A

480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

TAYYAB, NEIL, MD†

Provider ID: N/A

480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

TAYYAB, NEIL, MD†

Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

YOUNGBLOOD, SCOT, MD

Provider ID: N/A

955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-OCT-23

YOUNGBLOOD, SCOT, MD

Provider ID: N/A

955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-NOV-23

SURGERY THORACIC

HUANG, MARK, MD†

Provider ID: N/A

345 F ST STE 200
CHULA VISTA, CA 91910
Effective as of 01-SEP-17

HUANG, MARK, MD†

CI. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

☒ 345 F ST STE 200
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

MUMTAZ, SEEMAL, MD†

Provider ID: N/A

☒ 345 F ST STE 200
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

MUMTAZ, SEEMAL, MD†

Provider ID: N/A

☒ 345 F ST STE 200
CHULA VISTA, CA 91910
Effective as of 01-SEP-17

SURGICAL ONCOLOGY

QUIROZ, ELISA, MD†

Provider ID: N/A

☒ 678 3RD AVE
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JUL-22

UROLOGY

COHEN, EDWARD, MD

Provider ID: N/A

☒ 752 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

DICKS, BRIAN, MD

Provider ID: N/A

☒ 752 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

GRIMALDI, JOHN, DO†

Provider ID: N/A

☒ 450 4TH AVE STE 312

CHULA VISTA, CA 91910
Effective as of 01-SEP-15

GRIMALDI, JOHN, DO†

Provider ID: N/A

☒ 450 4TH AVE STE 312
CHULA VISTA, CA 91910*
Effective as of 01-JAN-14

JUMA, SAAD, MD

Provider ID: N/A

☒ 752 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

KEILLER, DANNY, MD

Provider ID: N/A

☒ 752 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

NEUSTEIN, PAUL, MD

Provider ID: N/A

☒ 750 MEDICAL CENTER CT
STE 14
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

NEUSTEIN, PAUL, MD

Provider ID: N/A

☒ 752 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

NGUYEN, HUNG, MD

Provider ID: N/A

☒ 752 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

PE, MARK-RALLY, MD

Provider ID: N/A

☒ 752 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

ROBERTS, JAMES, MD

Provider ID: N/A

☒ 752 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

SALEM, CAROL, MD

Provider ID: N/A

☒ 752 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

SANTOMAURO, MICHAEL, MD†

Provider ID: N/A

☒ 752 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-NOV-22

SANTOMAURO, MICHAEL, MD†

Provider ID: N/A

☒ 752 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-JUN-24

SANTOMAURO, MICHAEL, MD†

Provider ID: N/A

☒ 750 MEDICAL CENTER CT
STE 14
CHULA VISTA, CA 91911
Effective as of 01-SEP-21

SEVILLA, CLAUDIA, MD†

Provider ID: N/A

☒ 750 MEDICAL CENTER CT
STE 14

CI. Lista de proveedores de la red Médico de atención especializada

CHULA VISTA, CA 91911
Teleservice
Effective as of 01-NOV-21

SEVILLA, CLAUDIA, MD†

Provider ID: N/A
750 MEDICAL CENTER CT
STE 14
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-OCT-21

VAPNEK, EVAN, MD†

Provider ID: N/A
786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

VAPNEK, EVAN, MD

Provider ID: N/A
752 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

CERTIFIED NURSE PRACTITIONER

NAVA, PETER, NP

Provider ID: N/A
818 PIER VIEW WAY
CMP PENDLETON, CA
92054
Effective as of 01-JAN-24

NAVA, PETER, NP

Provider ID: N/A
517 N HORNE ST
CMP PENDLETON, CA
92054
Effective as of 01-JAN-24

EMERGENCY MEDICINE

EL SAID, KHALED, MD†

Provider ID: N/A
11882 DE PALMA RD STE
2F-1
CORONA, CA 92883
Teleservice
Effective as of 01-MAR-24

INFECTIOUS DISEASE

RESTREPO, DALILAH, MD†

Provider ID: N/A
3334 E COAST HWY PMB
655
CORONA DEL MAR, CA
92625
Effective as of 01-AUG-22

CARDIOVASCULAR DISEASE

MAI, TUAN, MD†

Provider ID: N/A
230 PROSPECT PL STE 250
CORONADO, CA 92118
Effective as of 01-NOV-22

CERTIFIED NURSE PRACTITIONER

DWYER, ERIN, NP

Provider ID: N/A
230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-FEB-24

GOSHEN, KIRSTEN, NP†

Provider ID: N/A
230 PROSPECT PL STE 340
CORONADO, CA 92118
Effective as of 01-DEC-22

TOMICICH, STEPHANIE, NP

Provider ID: N/A
230 PROSPECT PL STE 210

CORONADO, CA 92118
Effective as of 01-FEB-24

FAMILY PRACTICE

SHAFT, ALEXANDER, MD†

Provider ID: N/A
131 ORANGE AVE STE 101
CORONADO, CA 92118
Teleservice
Effective as of 01-FEB-23

SHAFT, ALEXANDER, MD†

Provider ID: N/A
131 ORANGE AVE STE 101
CORONADO, CA 92118
Teleservice
Effective as of 01-MAR-22

GASTROENTEROLOGY

BAIG, NABIL, DO†

Provider ID: N/A
131 ORANGE AVE STE 101B
CORONADO, CA 92118
Teleservice
Effective as of 01-OCT-22

HEARING AID DEALER / SUPPLIER

DAVIS, KELLE, MA†

Provider ID: N/A
801 ORANGE AVE
CORONADO, CA 92118
Effective as of 01-SEP-22

INTERNAL MEDICINE

BORTZ, DAVID, MD†

Provider ID: N/A
230 PROSPECT PL STE 340
CORONADO, CA 92118*
Effective as of 01-DEC-22

CI. Lista de proveedores de la red Médico de atención especializada

DAVIS, JASON, MD†

Provider ID: N/A

📍 230 PROSPECT PL STE 340B
CORONADO, CA 92118
Effective as of 01-JAN-24

OLIVER, DEANNA, MD†

Provider ID: N/A

📍 131 ORANGE AVE STE 101
CORONADO, CA 92118
Effective as of 01-MAR-21

OLIVER, DEANNA, MD†

Provider ID: N/A

📍 131 ORANGE AVE STE 101
CORONADO, CA 92118
Effective as of 01-APR-21

NEPHROLOGY

DAVIS, JASON, MD†

Provider ID: N/A

📍 230 PROSPECT PL STE 340B
CORONADO, CA 92118
Effective as of 01-JUL-22

DAVIS, JASON, MD†

Provider ID: N/A

📍 230 PROSPECT PL STE 340B
CORONADO, CA 92118
Effective as of 01-MAR-16

OBSTETRICS / GYNECOLOGY

SEFA-BOAKYE, KOFI, MD†

Provider ID: N/A

📍 230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-21

SEFA-BOAKYE, KOFI, MD†

Provider ID: N/A

📍 230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JUL-14

SURGERY GENERAL

BHOYRUL, SUNIL, MD†

Provider ID: N/A

📍 230 PROSPECT PL STE 340
CORONADO, CA 92118
Effective as of 01-DEC-22

BORTZ, PASCAL, MD†

Provider ID: N/A

📍 230 PROSPECT PL STE 340
CORONADO, CA 92118
Effective as of 01-DEC-22

MORELL, MICHAEL, MD

Provider ID: N/A

📍 230 PROSPECT PL STE 340
CORONADO, CA 92118
Effective as of 01-DEC-23

SURGERY ORTHOPEDIC

ANDRY, JAMES, MD

Provider ID: N/A

📍 230 PROSPECT PL STE 230
CORONADO, CA 92118*
Effective as of 01-MAR-24

ANDRY, JAMES, MD

Provider ID: N/A

📍 230 PROSPECT PL STE 230
CORONADO, CA 92118
Effective as of 01-MAR-24

KUSNEZOV, NICHOLAS, MD

Provider ID: N/A

📍 230 PROSPECT PL STE 230
CORONADO, CA 92118
Teleservice
Effective as of 01-APR-24

MCKNIGHT, BRADEN, MD

Provider ID: N/A

📍 230 PROSPECT PL STE 230
CORONADO, CA 92118
Teleservice
Effective as of 01-APR-24

PALLIA, CHRISTOPHER, MD

Provider ID: N/A

📍 230 PROSPECT PL STE 230
CORONADO, CA 92118
Teleservice
Effective as of 01-APR-24

PALLIA, CHRISTOPHER, MD

Provider ID: N/A

📍 230 PROSPECT PL STE 230
CORONADO, CA 92118*
Teleservice
Effective as of 01-MAR-24

UROLOGY

BUTLER, PHILIP, MD

Provider ID: N/A

📍 230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-24

COHEN, EDWARD, MD

Provider ID: N/A

📍 230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-FEB-24

DATO, PAUL, MD

Provider ID: N/A

📍 230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-24

DICKS, BRIAN, MD

Provider ID: N/A

📍 230 PROSPECT PL STE 210

C1. Lista de proveedores de la red Médico de atención especializada

CORONADO, CA 92118
Effective as of 01-JAN-24

JUMA, SAAD, MD

Provider ID: N/A

230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-24

KEILLER, DANNY, MD

Provider ID: N/A

230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-24

NEUSTEIN, PAUL, MD

Provider ID: N/A

230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-24

NGUYEN, HUNG, MD

Provider ID: N/A

230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-24

PE, MARK-RALLY, MD

Provider ID: N/A

230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-24

ROBERTS, JAMES, MD†

Provider ID: N/A

230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-24

ROBERTS, JAMES, MD†

Provider ID: N/A

230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-20

ROBERTS, JAMES, MD†

Provider ID: N/A

230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-21

SALEM, CAROL, MD

Provider ID: N/A

230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-24

VAPNEK, EVAN, MD

Provider ID: N/A

230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-24

CERTIFIED NURSE PRACTITIONER

PASICOLAN, MARI, NP

Provider ID: N/A

24833 DEL PRADO
DANA POINT, CA 92629
Effective as of 01-DEC-22

PASICOLAN, MARI, NP

Provider ID: N/A

24833 DEL PRADO
DANA POINT, CA 92629
Effective as of 01-DEC-22

PASICOLAN, MARI, NP

Provider ID: N/A

24833 DEL PRADO
DANA POINT, CA 92629
Effective as of 01-DEC-22

MARRIAGE FAMILY THERAPIST

MOORE, CANDACE, MFT

Provider ID: N/A

23 TERRAZA DEL MAR
DANA POINT, CA 92629
Effective as of 01-JAN-22

MOORE, CANDACE, MFT

Provider ID: N/A

23 TERRAZA DEL MAR
DANA POINT, CA 92629
Effective as of 01-JAN-22

OPTOMETRIST

SPAETH, JOHN, OD

Provider ID: N/A

24040 CAMINO DEL AVION
STE G
DANA POINT, CA 92629
Effective as of 01-SEP-23

WANG, MATTHEW, OD

Provider ID: N/A

24692 DEL PRADO STE B
DANA POINT, CA 92629
Effective as of 01-JAN-23

WANG, MATTHEW, OD

Provider ID: N/A

24692 DEL PRADO STE B
DANA POINT, CA 92629
Effective as of 01-OCT-23

PSYCHOLOGIST

UNGER, ARLENE, PhD†

Provider ID: N/A

34145 PACIFIC COAST HWY
STE 821
DANA POINT, CA 92629
Effective as of 01-DEC-20

UNGER, ARLENE, PhD†

Provider ID: N/A

34145 PACIFIC COAST HWY
STE 821
DANA POINT, CA 92629

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-DEC-20

UNGER, ARLENE, PhD[†]

Provider ID: N/A

☒ 34145 PACIFIC COAST HWY
STE 821
DANA POINT, CA 92629

Effective as of 01-DEC-20

UNGER, ARLENE, PhD[†]

Provider ID: N/A

☒ 34145 PACIFIC COAST HWY
STE 821
DANA POINT, CA 92629

Effective as of 01-DEC-20

DERMATOLOGY

MARRIOTT, AGATA, MD

Provider ID: N/A

☒ 1349 CAMINO DEL MAR
STE D
DEL MAR, CA 92014

Effective as of 01-SEP-22

PHYSICIANS ASSISTANT

HANSEN, CHRISTINA, PA

Provider ID: N/A

☒ 12865 POINTE DEL MAR
WAY STE 200
DEL MAR, CA 92014

Teleservice

Effective as of 01-OCT-23

LEE, ISABEL, PA

Provider ID: N/A

☒ 1349 CAMINO DEL MAR
STE B
DEL MAR, CA 92014

Teleservice

Effective as of 01-DEC-23

SZABO, HAYLIE, PA

Provider ID: N/A

☒ 12865 POINTE DEL MAR
WAY STE 200
DEL MAR, CA 92014

Teleservice

Effective as of 01-OCT-22

PSYCHIATRY

COLOGNE, SCOTT, MD[†]

Provider ID: N/A

☒ 12865 POINTE DEL MAR
WAY STE 210
DEL MAR, CA 92014

Effective as of 01-OCT-23

COLOGNE, SCOTT, MD[†]

Provider ID: N/A

☒ 12865 POINTE DEL MAR
WAY STE 210
DEL MAR, CA 92014

Effective as of 01-OCT-23

COLOGNE, SCOTT, MD[†]

Provider ID: N/A

☒ 12865 POINTE DEL MAR
WAY STE 210
DEL MAR, CA 92014

Effective as of 01-OCT-23

COLOGNE, SCOTT, MD[†]

Provider ID: N/A

☒ 12865 POINTE DEL MAR
WAY STE 210
DEL MAR, CA 92014

Effective as of 01-OCT-23

COLOGNE, SCOTT, MD[†]

Provider ID: N/A

☒ 12865 POINTE DEL MAR
WAY STE 210
DEL MAR, CA 92014

Effective as of 01-OCT-23

COLOGNE, SCOTT, MD[†]

Provider ID: N/A

☒ 12865 POINTE DEL MAR
WAY STE 210
DEL MAR, CA 92014

Effective as of 01-OCT-23

COLOGNE, SCOTT, MD[†]

Provider ID: N/A

☒ 12865 POINTE DEL MAR
WAY STE 210
DEL MAR, CA 92014

Effective as of 01-OCT-23

COLOGNE, SCOTT, MD[†]

Provider ID: N/A

☒ 12865 POINTE DEL MAR
WAY STE 210
DEL MAR, CA 92014

Effective as of 01-OCT-23

**VIJAYASARATHI, KRISHNA,
DO[†]**

Provider ID: N/A

☒ 12835 POINTE DEL MAR
WAY STE 1
DEL MAR, CA 92014

Effective as of 01-OCT-23

**VIJAYASARATHI, KRISHNA,
DO[†]**

Provider ID: N/A

☒ 12835 POINTE DEL MAR
WAY STE 1
DEL MAR, CA 92014

Effective as of 01-OCT-23

**VIJAYASARATHI, KRISHNA,
DO[†]**

Provider ID: N/A

☒ 12835 POINTE DEL MAR
WAY STE 1
DEL MAR, CA 92014

Effective as of 01-OCT-23

**VIJAYASARATHI, KRISHNA,
DO[†]**

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

12835 POINTE DEL MAR
WAY STE 1
DEL MAR, CA 92014
Effective as of 01-OCT-23

PSYCHOLOGIST

**ROSENGARTEN, ARTHUR,
PhD†**

Provider ID: N/A

12835 POINTE DEL MAR
WAY STE 1
DEL MAR, CA 92014
Effective as of 01-OCT-23

**ROSENGARTEN, ARTHUR,
PhD†**

Provider ID: N/A

12835 POINTE DEL MAR
WAY STE 1
DEL MAR, CA 92014
Effective as of 01-OCT-23

**ROSENGARTEN, ARTHUR,
PhD†**

Provider ID: N/A

12835 POINTE DEL MAR
WAY STE 1
DEL MAR, CA 92014
Effective as of 01-OCT-23

**ROSENGARTEN, ARTHUR,
PhD†**

Provider ID: N/A

12835 POINTE DEL MAR
WAY STE 1
DEL MAR, CA 92014
Effective as of 01-OCT-23

SURGERY ORTHOPEDIC

BROWN, RICHARD, MD†

Provider ID: N/A

12865 POINTE DEL MAR
WAY STE 200
DEL MAR, CA 92014
Teleservice
Effective as of 01-JAN-22

MOHLENBROCK, WILLIAM, MD

Provider ID: N/A

12865 POINTE DEL MAR
WAY STE 200
DEL MAR, CA 92014
Teleservice
Effective as of 01-JAN-22

THUNDER, RICHARD, MD†

Provider ID: N/A

12865 POINTE DEL MAR
WAY STE 200
DEL MAR, CA 92014
Teleservice
Effective as of 01-JAN-22

ANESTHESIOLOGY PAIN MANAGEMENT

BROWNLOW, ROY, MD

Provider ID: N/A

278 AVOCADO AVE
EL CAJON, CA 92020
Effective as of 01-JUL-24

COHEN, ZACHARY, MD†

Provider ID: N/A

278 AVOCADO AVE
EL CAJON, CA 92020
Effective as of 01-NOV-21

PRABHU, NAMRATHA, MD

Provider ID: N/A

278 AVOCADO AVE
EL CAJON, CA 92020
Effective as of 01-APR-24

AUDIOLOGIST

SHASKY, GARY, AuD†

Provider ID: N/A

1767 E MAIN ST
EL CAJON, CA 92021
Effective as of 01-JAN-21

CARDIAC

ELECTROPHYSIOLOGY

LENER, JONATHAN, MD

Provider ID: N/A

1625 E MAIN ST STE 201
EL CAJON, CA 92021
Effective as of 01-JUL-23

SHAH, ABHISHEK, MD†

Provider ID: N/A

1625 E MAIN ST STE 201
EL CAJON, CA 92021
Effective as of 01-JAN-23

CARDIOVASCULAR DISEASE

ABELHAD, NADIA, MD

Provider ID: N/A

1625 E MAIN ST STE 201
EL CAJON, CA 92021
Effective as of 01-JAN-24

BARVALIA, MIHIR, MD†

Provider ID: N/A

1380 EL CAJON BLVD STE
100
EL CAJON, CA 92020
Teleservice
Effective as of 01-AUG-21

BARVALIA, MIHIR, MD†

Provider ID: N/A

1380 EL CAJON BLVD STE
212
EL CAJON, CA 92020
Effective as of 01-JAN-22

C1. Lista de proveedores de la red Médico de atención especializada

CARLSON, STEVEN, MD†

Provider ID: N/A

1625 E MAIN ST STE 201
EL CAJON, CA 92021

Teleservice

Effective as of 01-APR-21

DO, HULBERT, MD

Provider ID: N/A

1625 E MAIN ST STE 201
EL CAJON, CA 92021

Effective as of 01-OCT-23

FERNANDEZ, GENARO, MD†

Provider ID: N/A

1380 EL CAJON BLVD STE
100
EL CAJON, CA 92020

Effective as of 01-AUG-21

HOURANI, RAYAN, MD†

Provider ID: N/A

300 S PIERCE ST STE 102
EL CAJON, CA 92020

Teleservice

Effective as of 01-JAN-21

KAFRI, HASSAN, MD†

Provider ID: N/A

328 HIGHLAND AVE STE
200
EL CAJON, CA 92020

Effective as of 01-AUG-20

KAFRI, HASSAN, MD†

Provider ID: N/A

328 HIGHLAND AVE STE
200
EL CAJON, CA 92020

Effective as of 01-JAN-21

MOHAMEDALI, BURHAN, MD†

Provider ID: N/A

1625 E MAIN ST STE 201

EL CAJON, CA 92021

Effective as of 01-SEP-22

MOUSSAVIAN, MEHRAN, DO†

Provider ID: N/A

1625 E MAIN ST STE 201
EL CAJON, CA 92021

Effective as of 01-APR-21

MOUSSAVIAN, MEHRAN, DO†

Provider ID: N/A

1625 E MAIN ST STE 201
EL CAJON, CA 92021

Effective as of 01-SEP-22

NAGHI, JESSE, MD†

Provider ID: N/A

1380 EL CAJON BLVD STE
100
EL CAJON, CA 92020

Effective as of 01-AUG-21

NARAYANAN, MEENA, MD†

Provider ID: N/A

1625 E MAIN ST STE 201
EL CAJON, CA 92021

Effective as of 01-SEP-22

NARAYANAN, MEENA, MD†

Provider ID: N/A

1625 E MAIN ST STE 201
EL CAJON, CA 92021

Effective as of 01-APR-21

NISHIMURA-KAMINSKI, MARIN, MD

Provider ID: N/A

300 S PIERCE ST STE 102
EL CAJON, CA 92020

Teleservice

Effective as of 01-MAR-23

OMRAN, JAD, MD†

Provider ID: N/A

300 S PIERCE ST STE 102

EL CAJON, CA 92020

Teleservice

Effective as of 01-JAN-21

PARIKH, MILIND, DO†

Provider ID: N/A

1625 E MAIN ST STE 201
EL CAJON, CA 92021

Effective as of 01-SEP-22

PATEL, PRASHANT, MD

Provider ID: N/A

1679 E MAIN ST
EL CAJON, CA 92021

Effective as of 01-JUL-24

PONCE, SONIA, MD†

Provider ID: N/A

328 HIGHLAND AVE STE
200
EL CAJON, CA 92020

Effective as of 01-SEP-22

REDDY, PAVAN, MD

Provider ID: N/A

1380 EL CAJON BLVD STE
100
EL CAJON, CA 92020

Effective as of 01-SEP-24

SARSAM, LUAY, MD

Provider ID: N/A

1625 E MAIN ST STE 201
EL CAJON, CA 92021

Effective as of 01-JUL-23

SARSAM, LUAY, MD

Provider ID: N/A

1625 E MAIN ST STE 201
EL CAJON, CA 92021

Effective as of 01-JUL-23

SHAH, KULIN, MD†

Provider ID: N/A


1625 E MAIN ST STE 201

C1. Lista de proveedores de la red Médico de atención especializada

EL CAJON, CA 92021
Effective as of 01-JAN-23


SHAH, ABHISHEK, MD†

Provider ID: N/A

 1625 E MAIN ST STE 201
EL CAJON, CA 92021
Effective as of 01-SEP-22


SHARF, ALBERT, MD

Provider ID: N/A

 1679 E MAIN ST
EL CAJON, CA 92021
Effective as of 01-JUN-24

SHARF, ALBERT, MD


Provider ID: N/A

 1240 BROADWAY STE 210
EL CAJON, CA 92021
Teleservice

Effective as of 01-JAN-24


SHARF, ALBERT, MD

Provider ID: N/A

 230 AVOCADO AVE
EL CAJON, CA 92020
Effective as of 01-JAN-24


SHEREV, DIMITRI, MD†

Provider ID: N/A

 1380 EL CAJON BLVD STE
100
EL CAJON, CA 92020
Effective as of 01-AUG-21


SUDHAKAR, DEEPTHI, MD†

Provider ID: N/A

 1625 E MAIN ST STE 201
EL CAJON, CA 92021
Effective as of 01-JAN-23

YAU, STEPHEN, MD†

Provider ID: N/A

 328 HIGHLAND AVE STE
200

EL CAJON, CA 92020
Teleservice

Effective as of 01-AUG-22

YAU, STEPHEN, MD†

Provider ID: N/A

 328 HIGHLAND AVE STE
200
EL CAJON, CA 92020

Teleservice

Effective as of 01-MAR-23

ZAVARO, SUHAIL, MD†

Provider ID: N/A

 300 S PIERCE ST STE 102
EL CAJON, CA 92020
Teleservice


Effective as of 01-JAN-21

CERTIFIED

ACUPUNCTURIST


LOPEZ, MARIA, LAC

Provider ID: N/A

 855 E MADISON AVE
EL CAJON, CA 92020
Effective as of 01-JUL-24


LOPEZ, MARIA, LAC

Provider ID: N/A

 855 E MADISON AVE
EL CAJON, CA 92020
Effective as of 01-JUN-24

SLOAN, ERICA, LAC

Provider ID: N/A


 855 E MADISON AVE
EL CAJON, CA 92020
Effective as of 01-MAR-24

CERTIFIED NURSE

PRACTITIONER

BRANNEN, MANDY, NP†

Provider ID: N/A

 215 W MADISON AVE
EL CAJON, CA 92020*
Effective as of 01-JAN-21

CARDENAS, MIRIAM, NPF

Provider ID: N/A


 1032 BROADWAY
EL CAJON, CA 92021

Teleservice

Effective as of 01-OCT-23

CHUDACEK, JANET, NP†


Provider ID: N/A

 215 W MADISON AVE
EL CAJON, CA 92020*
Teleservice

Effective as of 01-JAN-21

JOHNSON, KIMBERLY, NP†

Provider ID: N/A


 328 HIGHLAND AVE STE
200
EL CAJON, CA 92020

Teleservice

Effective as of 01-AUG-21


LUCKETT, DECOURCY, NP†

Provider ID: N/A

 1580 N 2ND ST
EL CAJON, CA 92021
Effective as of 01-JAN-21


MANRIQUEZ, LISETTE, NPF

Provider ID: N/A

 875 EL CAJON BLVD
EL CAJON, CA 92020
Effective as of 01-MAY-24

MURRAY, CARLA, NP

Provider ID: N/A

 855 E MADISON AVE
EL CAJON, CA 92020*
Effective as of 01-FEB-24

C1. Lista de proveedores de la red Médico de atención especializada

PIRTLE, KEYSHONE, NP†

Provider ID: N/A
📍 5442 SYCUAN RD
EL CAJON, CA 92019
Effective as of 01-SEP-21

REAL, MARIA, NP

Provider ID: N/A
📍 1032 BROADWAY
EL CAJON, CA 92021
Teleservice
Effective as of 01-OCT-23

REDDY, PRIYA, NP

Provider ID: N/A
📍 1032 BROADWAY
EL CAJON, CA 92021
Effective as of 01-NOV-22

RENZAS, JENNIFER, NP

Provider ID: N/A
📍 1032 BROADWAY
EL CAJON, CA 92021
Teleservice
Effective as of 01-JUL-21

RENZAS, JENNIFER, NP

Provider ID: N/A
📍 165 S 1ST ST
EL CAJON, CA 92019
Teleservice
Effective as of 01-JUL-21

SHAW, MARILYNN, NP

Provider ID: N/A
📍 300 S PIERCE ST STE 102
EL CAJON, CA 92020
Effective as of 01-MAY-23

SIRLEAF, MASSANU, NP†

Provider ID: N/A
📍 1351 BROADWAY
EL CAJON, CA 92021
Effective as of 01-JAN-21

WILLIAMS, SHANTRICE, NP

Provider ID: N/A
📍 855 E MADISON AVE
EL CAJON, CA 92020
Effective as of 01-FEB-23

WILLIAMS, BREAHA, NP

Provider ID: N/A
📍 165 S 1ST ST
EL CAJON, CA 92019
Effective as of 01-DEC-21

WILLIAMS, BREAHA, NP

Provider ID: N/A
📍 1032 BROADWAY
EL CAJON, CA 92021
Effective as of 01-DEC-21

YALDO, ATHMAR, NP†

Provider ID: N/A
📍 328 HIGHLAND AVE STE
200
EL CAJON, CA 92020
Teleservice
Effective as of 01-DEC-21

CERTIFIED REGISTERED NURSE MIDWIFE

HAMMOND, HEATHER, CRNM†

Provider ID: N/A
📍 855 E MADISON AVE
EL CAJON, CA 92020*
Effective as of 01-JAN-24

CHIROPRACTOR

DORADO, SUE, DC

Provider ID: N/A
📍 165 S 1ST ST
EL CAJON, CA 92019
Teleservice
Effective as of 01-OCT-23

DORADO, SUE, DC

Provider ID: N/A
📍 1032 BROADWAY
EL CAJON, CA 92021
Teleservice
Effective as of 01-OCT-23

FULKS, ZACKARY, DC

Provider ID: N/A
📍 855 E MADISON AVE
EL CAJON, CA 92020
Effective as of 01-MAY-23

HALEY, STEVEN, DC

Provider ID: N/A
📍 165 S 1ST ST
EL CAJON, CA 92019
Teleservice
Effective as of 01-OCT-23

HALEY, STEVEN, DC

Provider ID: N/A
📍 1032 BROADWAY
EL CAJON, CA 92021
Teleservice
Effective as of 01-OCT-23

MANSOUR, RASHAD, DC

Provider ID: N/A
📍 855 E MADISON AVE
EL CAJON, CA 92020
Effective as of 01-MAR-23

MCCOWN, BARRY, DC

Provider ID: N/A
📍 855 E MADISON AVE
EL CAJON, CA 92020
Effective as of 01-MAY-23

ZECHA, RONALD, DC

Provider ID: N/A
📍 855 E MADISON AVE
EL CAJON, CA 92020
Effective as of 01-JUL-22

C1. Lista de proveedores de la red Médico de atención especializada

DERMATOLOGY

BARRIO, VICTORIA, MD

Provider ID: N/A

292 AVOCADO AVE
EL CAJON, CA 92020

Teleservice

Effective as of 01-MAR-24

BARRIO, VICTORIA, MD

Provider ID: N/A

222 W MADISON AVE
EL CAJON, CA 92020

Effective as of 01-APR-24

BROGAN, JACQUELINE, MD†

Provider ID: N/A

292 AVOCADO AVE
EL CAJON, CA 92020

Effective as of 01-JUL-22

BROGAN, JACQUELINE, MD†

Provider ID: N/A

292 AVOCADO AVE
EL CAJON, CA 92020

Effective as of 01-OCT-21

CELANO, NICHOLAS, MD†

Provider ID: N/A

292 AVOCADO AVE
EL CAJON, CA 92020

Effective as of 01-JAN-21

CELANO, NICHOLAS, MD†

Provider ID: N/A

292 AVOCADO AVE
EL CAJON, CA 92020

Effective as of 01-JAN-21

CELANO, NICHOLAS, MD†

Provider ID: N/A

292 AVOCADO AVE
EL CAJON, CA 92020

Effective as of 01-JUL-24

CELANO, NICHOLAS, MD

Provider ID: N/A

222 W MADISON AVE
EL CAJON, CA 92020

Effective as of 01-APR-24

CHIANG, JENNIFER, MD

Provider ID: N/A

222 W MADISON AVE
EL CAJON, CA 92020

Effective as of 01-APR-24

CHIANG, JENNIFER, MD

Provider ID: N/A

222 W MADISON AVE
EL CAJON, CA 92020

Effective as of 01-APR-24

CHIANG, JENNIFER, MD†

Provider ID: N/A

292 AVOCADO AVE
EL CAJON, CA 92020

Effective as of 01-MAR-18

CHIANG, JENNIFER, MD†

Provider ID: N/A

292 AVOCADO AVE
EL CAJON, CA 92020

Effective as of 01-JAN-21

CHIANG, JENNIFER, MD†

Provider ID: N/A

292 AVOCADO AVE
EL CAJON, CA 92020

Effective as of 01-JAN-21

GONZALEZ, JOSE, MD†

Provider ID: N/A

292 AVOCADO AVE
EL CAJON, CA 92020

Teleservice

Effective as of 01-MAY-23

GONZALEZ, JOSE, MD†

Provider ID: N/A

292 AVOCADO AVE
EL CAJON, CA 92020

Teleservice

Effective as of 01-AUG-22

GORDON, JUSTIN, MD†

Provider ID: N/A

292 AVOCADO AVE
EL CAJON, CA 92020

Effective as of 01-APR-22

GORDON, JUSTIN, MD†

Provider ID: N/A

292 AVOCADO AVE
EL CAJON, CA 92020

Effective as of 01-AUG-22

HANSEN, DOYLE, MD†

Provider ID: N/A

1679 E MAIN ST STE 208
EL CAJON, CA 92021*

Effective as of 01-JAN-14

KASSAB, GHADA, MD

Provider ID: N/A

624 EL CAJON BLVD
EL CAJON, CA 92020

Effective as of 01-JUL-23

KASSAB, GHADA, MD

Provider ID: N/A

624 EL CAJON BLVD
EL CAJON, CA 92020

Effective as of 01-MAR-23

LIN, SHINKO, MD

Provider ID: N/A

292 AVOCADO AVE
EL CAJON, CA 92020

Teleservice

Effective as of 01-MAR-24

LIN, SHINKO, MD

Provider ID: N/A


222 W MADISON AVE

C1. Lista de proveedores de la red Médico de atención especializada

EL CAJON, CA 92020
Effective as of 01-APR-24


LIN, SHINKO, MD

Provider ID: N/A

 222 W MADISON AVE
EL CAJON, CA 92020
Effective as of 01-APR-24


SATEESH, BROOKE, MD

Provider ID: N/A

 222 W MADISON AVE
EL CAJON, CA 92020
Effective as of 01-APR-24


SATEESH, BROOKE, MD

Provider ID: N/A

 222 W MADISON AVE
EL CAJON, CA 92020
Effective as of 01-APR-24


SATEESH, BROOKE, MD†

Provider ID: N/A

 292 AVOCADO AVE
EL CAJON, CA 92020
Effective as of 01-MAR-16


SATEESH, BROOKE, MD†

Provider ID: N/A

 292 AVOCADO AVE
EL CAJON, CA 92020
Effective as of 01-JAN-21


TYAGI, ABHILASHA, MD†

Provider ID: N/A

 292 AVOCADO AVE
EL CAJON, CA 92020
Effective as of 01-APR-22


TYAGI, ABHILASHA, MD†

Provider ID: N/A

 292 AVOCADO AVE
EL CAJON, CA 92020
Effective as of 01-AUG-22


TYAGI, ABHILASHA, MD

Provider ID: N/A

 222 W MADISON AVE
EL CAJON, CA 92020
Effective as of 01-APR-24


UEBELHOER, NATHAN, DO

Provider ID: N/A

 222 W MADISON AVE
EL CAJON, CA 92020
Effective as of 01-APR-24

UEBELHOER, NATHAN, DO†

Provider ID: N/A

 292 AVOCADO AVE
EL CAJON, CA 92020
Effective as of 01-FEB-22

EMERGENCY MEDICINE

YAU, STEPHEN, MD†

Provider ID: N/A


 328 HIGHLAND AVE STE
200
EL CAJON, CA 92020
Teleservice

Effective as of 01-APR-23

FAMILY PRACTICE


GHAFARI, DAUOD, MD

Provider ID: N/A

 855 E MADISON AVE
EL CAJON, CA 92020
Effective as of 01-JUL-24

PATEL, RAKESH, MD

Provider ID: N/A

 855 E MADISON AVE
EL CAJON, CA 92020
Effective as of 01-AUG-24

SHAFT, ALEXANDER, MD†

Provider ID: N/A


 463 N MAGNOLIA AVE

EL CAJON, CA 92020
Teleservice

Effective as of 01-OCT-21

SHAFT, ALEXANDER, MD†


Provider ID: N/A

 463 N MAGNOLIA AVE
EL CAJON, CA 92020
Teleservice

Effective as of 01-FEB-23

THIERMANN, PAIGE, MD


Provider ID: N/A

 855 E MADISON AVE
EL CAJON, CA 92020
Effective as of 01-MAY-24

GASTROENTEROLOGY


CUBAS, IVAN, MD†

Provider ID: N/A

 2732 NAVAJO RD STE 200
EL CAJON, CA 92020
Effective as of 01-JUL-18


DESTA, TADDESE, MD†

Provider ID: N/A

 2732 NAVAJO RD STE 200
EL CAJON, CA 92020
Effective as of 01-JUL-18

DESTA, TADDESE, MD†

Provider ID: N/A

 2732 NAVAJO RD STE 200
EL CAJON, CA 92020
Effective as of 01-APR-24

HASSANEIN, TAREK, MD†

Provider ID: N/A

 463 N MAGNOLIA AVE
EL CAJON, CA 92020
Teleservice

Effective as of 01-MAR-18

HASSANEIN, TAREK, MD†

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

463 N MAGNOLIA AVE STE
A
EL CAJON, CA 92020
Effective as of 01-DEC-20

HASSANEIN, TAREK, MD†

Provider ID: N/A

463 N MAGNOLIA AVE
EL CAJON, CA 92020
Teleservice
Effective as of 01-FEB-21

HASSANEIN, TAREK, MD†

Provider ID: N/A

463 N MAGNOLIA AVE
EL CAJON, CA 92020
Teleservice
Effective as of 01-SEP-22

NOVO, MEGAN, MD

Provider ID: N/A

2732 NAVAJO RD STE 200
EL CAJON, CA 92020
Effective as of 01-MAY-23

NOVO, MEGAN, MD

Provider ID: N/A

2732 NAVAJO RD STE 200
EL CAJON, CA 92020
Effective as of 01-JAN-23

SCHAEFFER, CYNTHIA, MD†

Provider ID: N/A

2732 NAVAJO RD STE 200
EL CAJON, CA 92020
Effective as of 01-JUL-18

SHAFFER, KATHERINE, MD†

Provider ID: N/A

2732 NAVAJO RD STE 201
EL CAJON, CA 92020
Effective as of 01-JAN-21

THOMAS, CARLTON, MD†

Provider ID: N/A

2732 NAVAJO RD STE 200
EL CAJON, CA 92020
Effective as of 01-JUL-18

HEARING AID DEALER / SUPPLIER

ANDERSON, ELAINE, MA†

Provider ID: N/A

1767 E MAIN ST
EL CAJON, CA 92021
Effective as of 01-SEP-22

DANDURAND, JOHN, MA†

Provider ID: N/A

1767 E MAIN ST
EL CAJON, CA 92021
Teleservice
Effective as of 01-JAN-21

DAVIS, KELLE, MA†

Provider ID: N/A

1767 E MAIN ST
EL CAJON, CA 92021
Effective as of 01-SEP-22

DAVIS, KELLE, MA†

Provider ID: N/A

1767 E MAIN ST
EL CAJON, CA 92021
Effective as of 01-JAN-21

HEPATOLOGY

HASSANEIN, TAREK, MD†

Provider ID: N/A

463 N MAGNOLIA AVE STE
A
EL CAJON, CA 92020
Effective as of 01-SEP-24

INTERNAL MEDICINE

AWDISHO, ALAN, DO†

Provider ID: N/A

875 EL CAJON BLVD
EL CAJON, CA 92020
Teleservice
Effective as of 01-SEP-22

MAY, LOUIS, MD†

Provider ID: N/A

875 EL CAJON BLVD
EL CAJON, CA 92020
Effective as of 01-DEC-22

MICHAEL, RAMI, MD†

Provider ID: N/A

875 EL CAJON BLVD
EL CAJON, CA 92020
Teleservice
Effective as of 01-NOV-22

OLIVER, DEANNA, MD†

Provider ID: N/A

463 N MAGNOLIA AVE
EL CAJON, CA 92020*
Effective as of 01-OCT-22

OLIVER, DEANNA, MD†

Provider ID: N/A

463 N MAGNOLIA AVE
EL CAJON, CA 92020
Effective as of 01-MAR-21

INTERVENTIONAL CARDIOLOGY

BARVALIA, MIHIR, MD†

Provider ID: N/A

1380 EL CAJON BLVD STE
100
EL CAJON, CA 92020
Teleservice
Effective as of 01-JAN-24

BARVALIA, MIHIR, MD†

Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

📄 1380 EL CAJON BLVD STE
100
EL CAJON, CA 92020
Teleservice
Effective as of 01-NOV-22

JOHN, ALAN, MD

Provider ID: N/A

📄 1625 E MAIN ST STE 201
EL CAJON, CA 92021
Effective as of 01-MAY-23

KAFRI, HASSAN, MD†

Provider ID: N/A

📄 328 HIGHLAND AVE STE
200
EL CAJON, CA 92020
Effective as of 01-SEP-22

KAFRI, HASSAN, MD†

Provider ID: N/A

📄 328 HIGHLAND AVE STE
200
EL CAJON, CA 92020
Effective as of 01-JAN-21

KAFRI, HASSAN, MD†

Provider ID: N/A

📄 328 HIGHLAND AVE STE
200
EL CAJON, CA 92020
Effective as of 01-JAN-19

KAFRI, HASSAN, MD†

Provider ID: N/A

📄 875 EL CAJON BLVD
EL CAJON, CA 92020
Effective as of 01-JUL-22

NAGHI, JESSE, MD†

Provider ID: N/A

📄 1380 EL CAJON BLVD STE
100
EL CAJON, CA 92020
Effective as of 01-JAN-24

RUBIO GARCIA, MANOLO, MD†

Provider ID: N/A

📄 1625 E MAIN ST STE 201
EL CAJON, CA 92021
Effective as of 01-DEC-22

SHAH, KULIN, MD†

Provider ID: N/A

📄 1625 E MAIN ST STE 201
EL CAJON, CA 92021
Effective as of 01-APR-23

SHEREV, DIMITRI, MD

Provider ID: N/A

📄 1380 EL CAJON BLVD
EL CAJON, CA 92020
Effective as of 01-JAN-24

SUDHAKAR, DEEPTHI, MD†

Provider ID: N/A

📄 1625 E MAIN ST STE 201
EL CAJON, CA 92021
Effective as of 01-APR-23

LICENSED CLINICAL SOCIAL WORKER

FRAGOSO, DOMINIQUE, LCSW

Provider ID: N/A

📄 215 W MADISON AVE
EL CAJON, CA 92020*
Effective as of 01-JAN-24

MANUEL, FRANCESCA, LCSW

Provider ID: N/A

📄 215 W MADISON AVE
EL CAJON, CA 92020
Effective as of 01-FEB-23

TAYAG, DYLAN, LCSW†

Provider ID: N/A

📄 875 EL CAJON BLVD
EL CAJON, CA 92020
Effective as of 01-SEP-22

TAYLOR, MISTY, LCSW

Provider ID: N/A

📄 5442 SYCUAN RD
EL CAJON, CA 92019
Effective as of 01-FEB-24

WELSH, BRITT, LCSW†

Provider ID: N/A

📄 875 EL CAJON BLVD
EL CAJON, CA 92020
Effective as of 01-FEB-21

MARRIAGE FAMILY THERAPIST

ARNOLD, REBECCA, MFT

Provider ID: N/A

📄 855 E MADISON AVE
EL CAJON, CA 92020
Effective as of 01-JUN-24

ARNOLD, REBECCA, MFT

Provider ID: N/A

📄 855 E MADISON AVE
EL CAJON, CA 92020
Effective as of 01-FEB-24

ESTAVILLO, SAUL, MFT

Provider ID: N/A

📄 875 EL CAJON BLVD
EL CAJON, CA 92020
Effective as of 01-AUG-23

OBSTETRICS / GYNECOLOGY

AL-MSHHDANI, AYSER, MD

Provider ID: N/A

📄 165 S 1ST ST
EL CAJON, CA 92019
Teleservice
Effective as of 01-OCT-23

AL-MSHHDANI, AYSER, MD

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

1032 BROADWAY
EL CAJON, CA 92021

Teleservice

Effective as of 01-OCT-23

BULLOCH, EDGAR, MD†

Provider ID: N/A

133 W MAIN ST STE 100
EL CAJON, CA 92020

Effective as of 01-JUN-22

DAVIS, TRACIE, MD

Provider ID: N/A

1032 BROADWAY
EL CAJON, CA 92021

Teleservice

Effective as of 01-OCT-23

DAVIS, TRACIE, MD

Provider ID: N/A

165 S 1ST ST
EL CAJON, CA 92019

Teleservice

Effective as of 01-OCT-23

FOLCHTORRES-AGUIAR, BEATRIZ, MD†

Provider ID: N/A

165 S 1ST ST
EL CAJON, CA 92019

Teleservice

Effective as of 01-AUG-22

FOLCHTORRES-AGUIAR, BEATRIZ, MD†

Provider ID: N/A

1032 BROADWAY
EL CAJON, CA 92021

Teleservice

Effective as of 01-AUG-22

GELLENS, ANDREW, MD†

Provider ID: N/A

1032 BROADWAY
EL CAJON, CA 92021

Teleservice

Effective as of 01-NOV-21

GELLENS, ANDREW, MD†

Provider ID: N/A

165 S 1ST ST
EL CAJON, CA 92019

Teleservice

Effective as of 01-NOV-21

MELLENDEZBERRIOS, IARA, MD

Provider ID: N/A

181 REA AVE
EL CAJON, CA 92020

Teleservice

Effective as of 01-AUG-24

TAJРАН, DEENA, MD†

Provider ID: N/A

291 E LEXINGTON AVE STE
AC

EL CAJON, CA 92020

Effective as of 01-JAN-21

OPHTHALMOLOGY

ABDALLAH, WALID, MD

Provider ID: N/A

231 W MAIN ST
EL CAJON, CA 92020

Effective as of 01-FEB-24

BINDER, NICHOLAS, MD

Provider ID: N/A

300 S PIERCE ST STE 200
EL CAJON, CA 92020

Effective as of 01-NOV-23

BINDER, NICHOLAS, MD

Provider ID: N/A

450 FLETCHER PKWY STE
112

EL CAJON, CA 92020

Effective as of 01-NOV-23

BINDER, NICHOLAS, MD

Provider ID: N/A

300 S PIERCE ST STE 200
EL CAJON, CA 92020

Effective as of 01-DEC-23

BINDER, NICHOLAS, MD

Provider ID: N/A

300 S PIERCE ST STE 200
EL CAJON, CA 92020

Effective as of 01-FEB-24

HSU, CHRISTOPHER, MD

Provider ID: N/A

450 FLETCHER PKWY STE
112

EL CAJON, CA 92020

Effective as of 01-NOV-23

HSU, CHRISTOPHER, MD†

Provider ID: N/A

225 W MADISON AVE STE 1
EL CAJON, CA 92020

Effective as of 01-SEP-22

MCDONNELL, EMMA, MD†

Provider ID: N/A

231 W MAIN ST
EL CAJON, CA 92020

Effective as of 01-NOV-22

PATEL, GITANE, MD

Provider ID: N/A

450 FLETCHER PKWY STE
112

EL CAJON, CA 92020

Effective as of 01-NOV-23

PATEL, SARJAN, MD†

Provider ID: N/A

450 FLETCHER PKWY STE
112

EL CAJON, CA 92020

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-DEC-23

PATEL, SARJAN, MD

Provider ID: N/A

📍 300 S PIERCE ST STE 200
EL CAJON, CA 92020

Effective as of 01-JAN-24

PATEL, GITANE, MD

Provider ID: N/A

📍 300 S PIERCE ST STE 200
EL CAJON, CA 92020

Effective as of 01-DEC-23

PATEL, SARJAN, MD

Provider ID: N/A

📍 300 S PIERCE ST STE 200
EL CAJON, CA 92020

Effective as of 01-DEC-23

PATEL, GITANE, MD

Provider ID: N/A

📍 300 S PIERCE ST STE 200
EL CAJON, CA 92020

Effective as of 01-JAN-24

PONS, MAURICIO, MD†

Provider ID: N/A

📍 875 EL CAJON BLVD
EL CAJON, CA 92020

Effective as of 01-JUL-22

PONS, MAURICIO, MD†

Provider ID: N/A

📍 231 W MAIN ST
EL CAJON, CA 92020

Effective as of 01-AUG-22

PRABHU, SUJATA, MD

Provider ID: N/A

📍 450 FLETCHER PKWY STE
112
EL CAJON, CA 92020

Effective as of 01-NOV-23

SKAF, AYHAM, MD†

Provider ID: N/A

📍 875 EL CAJON BLVD
EL CAJON, CA 92020

Effective as of 01-JUL-22

ZHAO, TAILUN, MD

Provider ID: N/A

📍 300 S PIERCE ST STE 200
EL CAJON, CA 92020

Effective as of 01-SEP-24

ZHAO, TAILUN, MD

Provider ID: N/A

📍 300 S PIERCE ST STE 200
EL CAJON, CA 92020

Effective as of 01-JAN-24

ZHAO, TAILUN, MD

Provider ID: N/A

📍 450 FLETCHER PKWY STE
112

EL CAJON, CA 92020

Effective as of 01-MAY-24

ZHAO, TAILUN, MD

Provider ID: N/A

📍 450 FLETCHER PKWY STE
112

EL CAJON, CA 92020

Effective as of 01-NOV-23

ZHAO, TAILUN, MD

Provider ID: N/A

📍 300 S PIERCE ST STE 200
EL CAJON, CA 92020

Effective as of 01-NOV-23

OPTOMETRIST

AOTO, KIM, OD†

Provider ID: N/A

📍 450 FLETCHER PKWY STE
112
EL CAJON, CA 92020

Effective as of 01-SEP-22

DYER, SHARON, OD†

Provider ID: N/A

📍 450 FLETCHER PKWY STE
112

EL CAJON, CA 92020

Effective as of 01-DEC-23

DYER, SHARON, OD†

Provider ID: N/A

📍 225 W MADISON AVE STE 1
EL CAJON, CA 92020

Effective as of 01-SEP-22

HAN, SUL, OD†

Provider ID: N/A

📍 450 FLETCHER PKWY STE
112

EL CAJON, CA 92020

Effective as of 01-DEC-23

KHALIL, VADY, OD†

Provider ID: N/A

📍 450 FLETCHER PKWY STE
112

EL CAJON, CA 92020

Effective as of 01-DEC-23

KHALIL, VADY, OD

Provider ID: N/A

📍 300 S PIERCE ST STE 200
EL CAJON, CA 92020

Effective as of 01-DEC-23

KOO, ANITA, OD

Provider ID: N/A

📍 231 W MAIN ST
EL CAJON, CA 92020

Effective as of 01-FEB-24

KOO, ANITA, OD

Provider ID: N/A

📍 231 W MAIN ST
EL CAJON, CA 92020

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-JAN-24

KOO, ANITA, OD

Provider ID: N/A

📍 231 W MAIN ST
EL CAJON, CA 92020
Effective as of 01-JUN-24

THACH, QUEEN, OD

Provider ID: N/A

📍 231 W MAIN ST
EL CAJON, CA 92020
Effective as of 01-SEP-24

ZVANUT, DONALD, OD†

Provider ID: N/A

📍 225 W MADISON AVE STE 1
EL CAJON, CA 92020
Effective as of 01-SEP-22

ZVANUT, DONALD, OD

Provider ID: N/A

📍 300 S PIERCE ST STE 200
EL CAJON, CA 92020
Effective as of 01-DEC-23

PHYSICIANS ASSISTANT

ALYAS, ALISIA, PA

Provider ID: N/A

📍 165 S 1ST ST
EL CAJON, CA 92019
Teleservice

Effective as of 01-JUN-21

ALYAS, ALISIA, PA

Provider ID: N/A

📍 1032 BROADWAY
EL CAJON, CA 92021
Teleservice

Effective as of 01-JUN-21

HABBOUSH, RANA, PA

Provider ID: N/A

📍 1032 BROADWAY

EL CAJON, CA 92021

Teleservice

Effective as of 01-OCT-23

INDA, PRISCILLA, PA†

Provider ID: N/A

📍 328 HIGHLAND AVE STE
200
EL CAJON, CA 92020

Effective as of 01-JAN-21

INDA, PRISCILLA, PA†

Provider ID: N/A

📍 328 HIGHLAND AVE STE
200
EL CAJON, CA 92020

Effective as of 01-JAN-21

INDA, PRISCILLA, PA†

Provider ID: N/A

📍 328 HIGHLAND AVE STE
200
EL CAJON, CA 92020

Effective as of 01-JAN-21

MERCER, KELLY, PA†

Provider ID: N/A

📍 1032 BROADWAY
EL CAJON, CA 92021
Teleservice

Effective as of 01-APR-21

MERCER, KELLY, PA†

Provider ID: N/A

📍 165 S 1ST ST
EL CAJON, CA 92019
Teleservice

Effective as of 01-APR-21

ROSENBLATT, SHERILYN, PA

Provider ID: N/A

📍 875 EL CAJON BLVD
EL CAJON, CA 92020

Effective as of 01-JUN-23

RYAN, TYLER, PA†

Provider ID: N/A

📍 463 N MAGNOLIA AVE STE
B
EL CAJON, CA 92020

Effective as of 01-DEC-22

VILLA, ANGEL, PA

Provider ID: N/A

📍 470 N MOLLISON AVE
EL CAJON, CA 92021*

Effective as of 01-OCT-24

PSYCHIATRY

KURZ, TROY, MD†

Provider ID: N/A

📍 133 W MAIN ST STE 100
EL CAJON, CA 92020

Effective as of 01-OCT-22

KURZ, TROY, MD†

Provider ID: N/A

📍 133 W MAIN ST STE 100
EL CAJON, CA 92020

Effective as of 01-OCT-22

MATIALEU, LEOPOLDINE, MD

Provider ID: N/A

📍 855 E MADISON AVE
EL CAJON, CA 92020

Effective as of 01-DEC-22

MATIALEU, LEOPOLDINE, MD

Provider ID: N/A

📍 855 E MADISON AVE
EL CAJON, CA 92020

Effective as of 01-DEC-22

MATIALEU, LEOPOLDINE, MD

Provider ID: N/A

📍 855 E MADISON AVE
EL CAJON, CA 92020

Effective as of 01-DEC-22

C1. Lista de proveedores de la red Médico de atención especializada

MATIALEU, LEOPOLDINE, MD

Provider ID: N/A

855 E MADISON AVE
EL CAJON, CA 92020
Effective as of 01-DEC-22

POSTLETHWAITE, ALEJANDRA, MD†

Provider ID: N/A

855 E MADISON AVE
EL CAJON, CA 92020*
Effective as of 01-JAN-24

POSTLETHWAITE, ALEJANDRA, MD†

Provider ID: N/A

855 E MADISON AVE
EL CAJON, CA 92020*
Effective as of 01-JAN-24

SADDA, REEM, MD

Provider ID: N/A

875 EL CAJON BLVD
EL CAJON, CA 92020
Effective as of 01-MAR-24

SADDA, REEM, MD

Provider ID: N/A

875 EL CAJON BLVD
EL CAJON, CA 92020
Effective as of 01-MAR-24

PSYCHOLOGIST

ARAIZA, ERNESTINA, PSYD†

Provider ID: N/A

875 EL CAJON BLVD
EL CAJON, CA 92020
Effective as of 01-AUG-21

ARAIZA, ERNESTINA, PSYD†

Provider ID: N/A

875 EL CAJON BLVD
EL CAJON, CA 92020

Effective as of 01-AUG-21

RADIOLOGY DIAGNOSTIC

MOSHFEGH, AMIEL, MD†

Provider ID: N/A

463 N MAGNOLIA AVE STE
B
EL CAJON, CA 92020
Effective as of 01-SEP-22

REGISTERED PHYSICAL THERAPIST

DASCENZO, EMILY, PT†

Provider ID: N/A

875 EL CAJON BLVD
EL CAJON, CA 92020
Teleservice
Effective as of 01-JUL-22

LONG, RYAN, PT

Provider ID: N/A

181 JAMACHA RD
EL CAJON, CA 92019*
Effective as of 01-JUL-22

SPEECH PATHOLOGIST

HILL, CARLA, SP

Provider ID: N/A

875 EL CAJON BLVD
EL CAJON, CA 92020*
Effective as of 01-OCT-24

SURGERY ORTHOPEDIC

NOURI, LABEED, MD

Provider ID: N/A

330 S MAGNOLIA AVE STE
302
EL CAJON, CA 92020
Effective as of 01-JAN-21

ANESTHESIOLOGY PAIN

MANAGEMENT

DAIRO, BRANDON, MD†

Provider ID: N/A

477 N EL CAMINO REAL
STE B301
ENCINITAS, CA 92024
Effective as of 01-DEC-20

CARDIAC

ELECTROPHYSIOLOGY

HAMZEI, ALI, MD†

Provider ID: N/A

320 SANTA FE DR STE 204
ENCINITAS, CA 92024
Effective as of 01-JAN-21

WHITWAM, WAYNE, MD†

Provider ID: N/A

320 SANTA FE DR STE 204
ENCINITAS, CA 92024
Effective as of 01-AUG-22

CARDIOVASCULAR DISEASE

AVALOS, ROY, MD†

Provider ID: N/A

320 SANTA FE DR STE 204
ENCINITAS, CA 92024
Effective as of 01-JAN-21

BACKMAN, JOHN, MD†

Provider ID: N/A

320 SANTA FE DR STE 204
ENCINITAS, CA 92024
Effective as of 01-JAN-21

BULIBEK, BATYRJAN, MD†

Provider ID: N/A

320 SANTA FE DR STE 204
ENCINITAS, CA 92024
Effective as of 01-JAN-21

**C1. Lista de proveedores de la red
Médico de atención especializada**

CARTER, STEPHANIE, MD†

Provider ID: N/A

700 GARDEN VIEW CT STE 204
ENCINITAS, CA 92024

Teleservice

Effective as of 01-JUN-21

CARTER, STEPHANIE, MD†

Provider ID: N/A

700 GARDEN VIEW CT STE 204
ENCINITAS, CA 92024

Teleservice

Effective as of 01-SEP-21

CARTER, STEPHANIE, MD†

Provider ID: N/A

354 SANTA FE DR
ENCINITAS, CA 92024

Effective as of 01-JUN-21

DURAN, EDWARD, MD

Provider ID: N/A

477 N EL CAMINO REAL STE D300
ENCINITAS, CA 92024

Effective as of 01-SEP-24

JACOBY, RICHARD, MD†

Provider ID: N/A

700 GARDEN VIEW CT STE 204
ENCINITAS, CA 92024

Effective as of 01-JAN-21

KULHANEK, JAN, MD†

Provider ID: N/A

320 SANTA FE DR STE 204
ENCINITAS, CA 92024

Effective as of 01-JAN-21

MCGINTY, PATRICK, MD†

Provider ID: N/A

320 SANTA FE DR STE 204
ENCINITAS, CA 92024

Effective as of 01-JAN-21

MEHBOOB, SALMAN, MD†

Provider ID: N/A

700 GARDEN VIEW CT STE 204
ENCINITAS, CA 92024

Teleservice

Effective as of 01-JAN-21

RASCH, DAMIAN, DO†

Provider ID: N/A

320 SANTA FE DR STE 204
ENCINITAS, CA 92024

Effective as of 01-JAN-21

SAB, SHIV, MD†

Provider ID: N/A

320 SANTA FE DR STE 204
ENCINITAS, CA 92024

Teleservice

Effective as of 01-JUN-22

SAB, SHIV, MD†

Provider ID: N/A

320 SANTA FE DR STE 204
ENCINITAS, CA 92024

Teleservice

Effective as of 01-DEC-22

SHEREV, DIMITRI, MD

Provider ID: N/A

320 SANTA FE DR STE 212
ENCINITAS, CA 92024

Effective as of 01-SEP-23

**CERTIFIED
ACUPUNCTURIST**

ARELLANO, JACQUELINE, LAC

Provider ID: N/A

1200 GARDEN VIEW RD

ENCINITAS, CA 92024

Effective as of 01-FEB-24

GONZALEZ, ANDRES, LAC

Provider ID: N/A

1130 2ND ST
ENCINITAS, CA 92024

Effective as of 01-MAY-23

JULIAN, FIDES, LAC

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024

Effective as of 01-FEB-24

MURRAY, STEVEN, LAC†

Provider ID: N/A

1200 GARDEN VIEW RD STE 200
ENCINITAS, CA 92024

Effective as of 01-AUG-21

TANG-RITCHIE, LENG, LAC†

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024

Effective as of 01-DEC-21

YOO, HEATHER, LAC

Provider ID: N/A

477 N EL CAMINO REAL STE C204
ENCINITAS, CA 92024

Effective as of 01-APR-24

**CERTIFIED NURSE
PRACTITIONER**

BINAVI, HOWNAZ, NP†

Provider ID: N/A

477 N EL CAMINO REAL STE D308
ENCINITAS, CA 92024

Effective as of 01-SEP-22

C1. Lista de proveedores de la red Médico de atención especializada

CARDINELL, ANNA, NP†

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-AUG-22

CHAMBERS, KATRINA, NP

Provider ID: N/A

781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024

Teleservice

Effective as of 01-JUN-23

DWYER, ERIN, NP

Provider ID: N/A

320 SANTA FE DR STE 108
ENCINITAS, CA 92024
Effective as of 01-JAN-24

FAIQ, JAMILA, NP†

Provider ID: N/A

326 SANTA FE DR STE 105
ENCINITAS, CA 92024

Teleservice

Effective as of 01-NOV-22

FAIQ, JAMILA, NP†

Provider ID: N/A

477 N EL CAMINO REAL
STE D200
ENCINITAS, CA 92024
Effective as of 01-JAN-21

HERR, COLLEEN, NP

Provider ID: N/A

477 N EL CAMINO REAL
STE A308
ENCINITAS, CA 92024
Effective as of 01-JAN-21

HOOPER, BONNIE, NP†

Provider ID: N/A

477 N EL CAMINO REAL

STE D308

ENCINITAS, CA 92024

Effective as of 01-JAN-21

HOOPER, BONNIE, NP†

Provider ID: N/A

477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024
Effective as of 01-JAN-21

KORMANIK, PATRICIA, NP†

Provider ID: N/A

1200 GARDEN VIEW RD
STE 200
ENCINITAS, CA 92024
Effective as of 01-JUL-21

LOWE, ASHLEY, NP

Provider ID: N/A

320 SANTA FE DR STE 108
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JUL-23

LOWE, ASHLEY, NP

Provider ID: N/A

320 SANTA FE DR STE 108
ENCINITAS, CA 92024
Teleservice
Effective as of 01-MAY-24

MOONEY, PATRICIA, NP†

Provider ID: N/A

326 SANTA FE DR STE 105
ENCINITAS, CA 92024
Teleservice
Effective as of 01-MAY-21

MOONEY, PATRICIA, NP†

Provider ID: N/A

326 SANTA FE DR STE 105
ENCINITAS, CA 92024
Teleservice

Effective as of 01-JAN-24

MOORE, HEATHER, NP

Provider ID: N/A

477 N EL CAMINO REAL
STE A100
ENCINITAS, CA 92024
Effective as of 01-APR-24

MORENO, KATHERINE, NP

Provider ID: N/A

700 GARDEN VIEW CT STE
204
ENCINITAS, CA 92024
Teleservice

Effective as of 01-DEC-23

MWAURA, WAIRIMU, NP†

Provider ID: N/A

326 SANTA FE DR STE 105
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JAN-24

MWAURA, WAIRIMU, NP†

Provider ID: N/A

326 SANTA FE DR STE 105
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JUN-21

MYERS, JESSE, NP

Provider ID: N/A

477 N EL CAMINO REAL
STE A308
ENCINITAS, CA 92024
Effective as of 01-JAN-21

NIZHEBORSKY, OKSANA, NP†

Provider ID: N/A

320 SANTA FE DR STE 107C
ENCINITAS, CA 92024
Effective as of 01-JAN-21

NIZHEBORSKY, OKSANA, NP

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-SEP-24

PACHOE, MADISON, NP

Provider ID: N/A

477 N EL CAMINO REAL
STE A200
ENCINITAS, CA 92024
Teleservice
Effective as of 01-DEC-21

POLIZZI, BRITTANY, NP†

Provider ID: N/A

477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024
Effective as of 01-JAN-22

POLIZZI, BRITTANY, NP†

Provider ID: N/A

477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024
Effective as of 01-SEP-22

POVOLI, LAUREN, NPF

Provider ID: N/A

477 N EL CAMINO REAL
STE A100
ENCINITAS, CA 92024
Effective as of 01-APR-24

SRILASAK, MICHELE, NP†

Provider ID: N/A

1200 GARDEN VIEW RD
STE 200
ENCINITAS, CA 92024
Effective as of 01-JUL-21

STUBBE, AMANDA, NPF

Provider ID: N/A

477 N EL CAMINO REAL
STE A100

ENCINITAS, CA 92024
Effective as of 01-APR-24

SYMANSKI, ELIZABETH, NP†

Provider ID: N/A

477 N EL CAMINO REAL
STE A200
ENCINITAS, CA 92024
Effective as of 01-AUG-22

TOMICICH, STEPHANIE, NP†

Provider ID: N/A

320 SANTA FE DR STE 108
ENCINITAS, CA 92024
Effective as of 01-DEC-21

WALLA, MEGAN, NPF

Provider ID: N/A

477 N EL CAMINO REAL
STE A100
ENCINITAS, CA 92024
Effective as of 01-APR-24

WILLEY, MARTI, NP†

Provider ID: N/A

326 SANTA FE DR STE 105
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JAN-24

WILLEY, MARTI, NP†

Provider ID: N/A

326 SANTA FE DR STE 105
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JUN-21

WOODRUFF, WHITNEY, NP

Provider ID: N/A

700 GARDEN VIEW CT STE
102
ENCINITAS, CA 92024
Effective as of 01-JAN-21

WOODRUFF, WHITNEY, NP

Provider ID: N/A

781 GARDEN VIEW CT STE
102
ENCINITAS, CA 92024
Effective as of 01-MAR-23

WOODRUFF, WHITNEY, NP

Provider ID: N/A

781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024
Effective as of 01-MAR-23

YEO, ALEXANDRIA, NP

Provider ID: N/A

1505 ENCINITAS BLVD
ENCINITAS, CA 92024
Effective as of 01-JUN-23

CERTIFIED REGISTERED NURSE ANESTHETIST

ASHMAN, RANDY, CRNA

Provider ID: N/A

781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JUL-23

ESTABROOK, LARA, CRNA

Provider ID: N/A

781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024
Effective as of 01-JUL-23

ESTABROOK, LARA, CRNA


Provider ID: N/A

320 SANTA FE DR STE 108
ENCINITAS, CA 92024
Effective as of 01-JUL-23

FITZPATRICK, APRIL, CRNA


Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

 781 GARDEN VIEW CT STE
102
ENCINITAS, CA 92024
Effective as of 01-MAR-23


FITZPATRICK, APRIL, CRNA

Provider ID: N/A

 781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024
Effective as of 01-MAR-23


KING, APRIL, CRNA†

Provider ID: N/A

 700 GARDEN VIEW CT STE
102
ENCINITAS, CA 92024
Effective as of 01-JAN-21


KING, APRIL, CRNA

Provider ID: N/A

 781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024
Effective as of 01-MAR-23


KING, APRIL, CRNA

Provider ID: N/A

 781 GARDEN VIEW CT STE
102
ENCINITAS, CA 92024
Effective as of 01-MAR-23

LAZARUS, ELIZABETH, CRNA

Provider ID: N/A

 781 GARDEN VIEW CT STE
102
ENCINITAS, CA 92024
Effective as of 01-JUL-23

CERTIFIED REGISTERED NURSE MIDWIFE

CORRY, ANDREA, CRNM

Provider ID: N/A

 1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-SEP-23

ELY-KONOSKE, RACHEL, CRNM


Provider ID: N/A

 1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-DEC-23

CHIROPRACTOR

TRAINER, JASON, DC

Provider ID: N/A

 1130 2ND ST
ENCINITAS, CA 92024
Effective as of 01-MAR-24

DERMATOLOGY

ANGRA, KUNAL, MD†

Provider ID: N/A

 477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024

Teleservice

Effective as of 01-JUL-21

BRAUN, TARA, MD

Provider ID: N/A


 477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024

Teleservice

Effective as of 01-MAR-24


BROUHA, BROOK, MD

Provider ID: N/A

 477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024
Effective as of 01-NOV-23


BROUHA, BROOK, MD

Provider ID: N/A

 477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024
Effective as of 01-JAN-24


GLADSJO, JULIE, MD†

Provider ID: N/A

 477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024
Effective as of 01-JAN-21


GLADSJO, JULIE, MD†

Provider ID: N/A

 477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024
Effective as of 01-SEP-22


GLADSJO, JULIE, MD†

Provider ID: N/A

 477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024
Effective as of 01-SEP-22


GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

 285 N EL CAMINO REAL
STE 117
ENCINITAS, CA 92024
Effective as of 01-JAN-24

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

 285 N EL CAMINO REAL
STE 117
ENCINITAS, CA 92024
Effective as of 01-JAN-24

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

 285 N EL CAMINO REAL
STE 117

C1. Lista de proveedores de la red Médico de atención especializada

ENCINITAS, CA 92024
Effective as of 01-JAN-24

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

📍 285 N EL CAMINO REAL
STE 117

ENCINITAS, CA 92024
Effective as of 01-JAN-24

HEMPERLY, STEPHEN, DO†

Provider ID: N/A

📍 477 N EL CAMINO REAL
STE D308

ENCINITAS, CA 92024
Teleservice

Effective as of 01-NOV-23

HEMPERLY, STEPHEN, DO†

Provider ID: N/A

📍 477 N EL CAMINO REAL
STE D308

ENCINITAS, CA 92024
Teleservice

Effective as of 01-JAN-21

KRISHNA, SHEILA, MD

Provider ID: N/A

📍 345 SAXONY RD STE 201
ENCINITAS, CA 92024

Effective as of 01-JUL-24

RILEY, JESSICA, DO†

Provider ID: N/A

📍 477 N EL CAMINO REAL
STE D308

ENCINITAS, CA 92024
Effective as of 01-AUG-20

RILEY, JESSICA, DO†

Provider ID: N/A

📍 477 N EL CAMINO REAL
STE D308

ENCINITAS, CA 92024
Effective as of 01-JAN-21

RILEY, JESSICA, DO†

Provider ID: N/A

📍 477 N EL CAMINO REAL
STE D308

ENCINITAS, CA 92024
Effective as of 01-SEP-22

TOMPKINS, STACY, MD†

Provider ID: N/A

📍 477 N EL CAMINO REAL
STE D308

ENCINITAS, CA 92024
Effective as of 01-MAY-19

TOMPKINS, STACY, MD

Provider ID: N/A

📍 477 N EL CAMINO REAL
ENCINITAS, CA 92024

Effective as of 01-JUN-24

ENDOCRINOLOGY

METABOLISM DIABETES

HUPFELD, CHRISTOPHER, MD†

Provider ID: N/A

📍 1200 GARDEN VIEW RD
STE 100

ENCINITAS, CA 92024
Effective as of 01-MAR-21

SHAH, NANDI, MD

Provider ID: N/A

📍 1200 GARDEN VIEW RD
ENCINITAS, CA 92024

Effective as of 01-JAN-24

FAMILY PRACTICE

ANDERSON, LINDSEY, DO†

Provider ID: N/A

📍 1505 ENCINITAS BLVD
ENCINITAS, CA 92024

Effective as of 01-AUG-23

ESTRADA, JOHANNA, MD†

Provider ID: N/A

📍 662 ENCINITAS BLVD STE
220

ENCINITAS, CA 92024*
Effective as of 01-AUG-21

GASTROENTEROLOGY

ALHANKAWI, DHUHA, MD

Provider ID: N/A

📍 477 N EL CAMINO REAL
STE A308

ENCINITAS, CA 92024
Effective as of 01-AUG-23

ALHANKAWI, DHUHA, MD

Provider ID: N/A

📍 477 N EL CAMINO REAL
STE A308

ENCINITAS, CA 92024
Effective as of 01-APR-23

BORTNIKER, ETHAN, MD

Provider ID: N/A

📍 781 GARDEN VIEW CT STE
100

ENCINITAS, CA 92024
Effective as of 01-DEC-23

BORTNIKER, ETHAN, MD

Provider ID: N/A

📍 781 GARDEN VIEW CT STE
100

ENCINITAS, CA 92024
Effective as of 01-JUN-23

BORTNIKER, ETHAN, MD

Provider ID: N/A

📍 781 GARDEN VIEW CT STE
102

ENCINITAS, CA 92024
Effective as of 01-JUN-23

BORTNIKER, ETHAN, MD

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024
Effective as of 01-JUN-23

BORTNIKER, ETHAN, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024
Effective as of 01-MAR-24

DILAURO, STEVEN, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024
Teleservice
Effective as of 01-MAY-24

DILAURO, STEVEN, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024
Teleservice
Effective as of 01-OCT-23

DILAURO, STEVEN, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
102
ENCINITAS, CA 92024
Teleservice
Effective as of 01-MAR-23

DILAURO, STEVEN, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JAN-24

DILAURO, STEVEN, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024

Teleservice

Effective as of 01-JUN-23

DILAURO, STEVEN, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024

Teleservice

Effective as of 01-MAR-23

GOLDKLANG, ROBERT, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024
Effective as of 01-JAN-24

GOLDKLANG, ROBERT, MD†

Provider ID: N/A

700 GARDEN VIEW CT STE
102
ENCINITAS, CA 92024
Effective as of 01-JAN-21

GOLDKLANG, ROBERT, MD†

Provider ID: N/A

700 GARDEN VIEW CT STE
102
ENCINITAS, CA 92024
Effective as of 01-APR-23

GOLDKLANG, ROBERT, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
102
ENCINITAS, CA 92024
Effective as of 01-MAR-23

GOLDKLANG, ROBERT, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024
Effective as of 01-MAR-23

GOLDKLANG, ROBERT, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024
Effective as of 01-MAY-24

GOLDKLANG, ROBERT, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024
Effective as of 01-OCT-23

LAJOIE, ADRIANNE, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024
Effective as of 01-OCT-23

LAJOIE, ADRIANNE, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024
Effective as of 01-MAR-23

LAJOIE, ADRIANNE, MD

Provider ID: N/A

781 GARDEN VIEW CT STE
102
ENCINITAS, CA 92024
Effective as of 01-MAR-23

LAJOIE, ADRIANNE, MD†

Provider ID: N/A


700 GARDEN VIEW CT STE
102

C1. Lista de proveedores de la red Médico de atención especializada

ENCINITAS, CA 92024
Effective as of 01-JAN-21


LAJOIE, ADRIANNE, MD

Provider ID: N/A

 781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024
Effective as of 01-JAN-24


LAJOIE, ADRIANNE, MD

Provider ID: N/A

 781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024
Effective as of 01-JUN-23


MADANI, BAHAR, MD

Provider ID: N/A

 477 N EL CAMINO REAL
STE A308
ENCINITAS, CA 92024
Effective as of 01-FEB-22


PATEL, JANKI, MD

Provider ID: N/A

 781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024
Effective as of 01-FEB-24


PATEL, JANKI, MD

Provider ID: N/A

 700 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024
Teleservice
Effective as of 01-MAR-23

PATEL, JANKI, MD


Provider ID: N/A

 700 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024
Teleservice

Effective as of 01-JUN-23


PATEL, JANKI, MD†

Provider ID: N/A

 700 GARDEN VIEW CT STE
102
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JAN-21


PATEL, JANKI, MD†

Provider ID: N/A

 700 GARDEN VIEW CT STE
102
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JAN-21


PATEL, JANKI, MD

Provider ID: N/A

 781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024
Effective as of 01-MAR-24


PATEL, JANKI, MD

Provider ID: N/A

 354 SANTA FE DR
ENCINITAS, CA 92024
Effective as of 01-FEB-24


SINGH, MARVIN, MD

Provider ID: N/A

 781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024
Effective as of 01-JUN-23

SINGH, MARVIN, MD†


Provider ID: N/A

 700 GARDEN VIEW CT STE
102
ENCINITAS, CA 92024
Effective as of 01-APR-18

GENERAL DENTISTRY

MEHROTRA, SACHI, DDS


Provider ID: N/A

 4403 MANCHESTER AVE
STE 101
ENCINITAS, CA 92024
Effective as of 01-OCT-21

GYNECOLOGIC ONCOLOGY

ESKANDER, RAMEZ, MD†


Provider ID: N/A

 1200 GARDEN VIEW RD
STE 200
ENCINITAS, CA 92024
Effective as of 01-JUL-21

HEMATOLOGY / ONCOLOGY


BESSUDO, ALBERTO, MD†

Provider ID: N/A

 326 SANTA FE DR STE 105
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JAN-21


BESSUDO, ALBERTO, MD†

Provider ID: N/A

 326 SANTA FE DR STE 105
ENCINITAS, CA 92024
Teleservice
Effective as of 01-APR-21

SULLIVAN, JESSICA, DO†

Provider ID: N/A

 326 SANTA FE DR STE 105
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JAN-24

HOSPICE AND PALLIATIVE

C1. Lista de proveedores de la red Médico de atención especializada

MEDICINE

RUBENSIK, TAMARA, MD†

Provider ID: N/A

📍 1200 GARDEN VIEW RD
STE 100
ENCINITAS, CA 92024
Effective as of 01-FEB-21

RUBENSIK, TAMARA, MD†

Provider ID: N/A

📍 1200 GARDEN VIEW RD
STE 200
ENCINITAS, CA 92024
Effective as of 01-JUL-21

INTERNAL MEDICINE

BAUTISTA, JENNIFER, MD†

Provider ID: N/A

📍 320 SANTA FE DR STE
107-C
ENCINITAS, CA 92024
Effective as of 01-JAN-21

BAUTISTA, JENNIFER, MD†

Provider ID: N/A

📍 326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-DEC-20

DELANEY, CODY, DO†

Provider ID: N/A

📍 662 ENCINITAS BLVD STE
220
ENCINITAS, CA 92024*
Teleservice
Effective as of 01-OCT-22

EISMAN, SCOTT, MD†

Provider ID: N/A

📍 326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-FEB-22

ELHOFY, ASHRAF, MD†

Provider ID: N/A

📍 662 ENCINITAS BLVD STE
220
ENCINITAS, CA 92024*
Effective as of 01-JAN-21

ELLIS, ADAM, MD†

Provider ID: N/A

📍 662 ENCINITAS BLVD STE
220
ENCINITAS, CA 92024*
Effective as of 01-JAN-21

KHAYYAT, OMAR, MD†

Provider ID: N/A

📍 662 ENCINITAS BLVD STE
220
ENCINITAS, CA 92024*
Effective as of 01-AUG-21

LIU, STEVEN, MD†

Provider ID: N/A

📍 662 ENCINITAS BLVD STE
220
ENCINITAS, CA 92024*
Effective as of 01-JAN-21

LIU, ANDREW, MD

Provider ID: N/A

📍 320 SANTA FE DR STE 212
ENCINITAS, CA 92024
Effective as of 01-SEP-23

MCMURRAY, SARAH, DO†

Provider ID: N/A

📍 662 ENCINITAS BLVD STE
220
ENCINITAS, CA 92024*
Effective as of 01-JAN-21

MOOLANI, UJJALA, MD

Provider ID: N/A

📍 320 SANTA FE DR STE 212
ENCINITAS, CA 92024

Effective as of 01-MAY-23

NARDI, MELISSA, DO†

Provider ID: N/A

📍 662 ENCINITAS BLVD STE
220
ENCINITAS, CA 92024*
Effective as of 01-JAN-21

NELKIN, CORY, DO†

Provider ID: N/A

📍 662 ENCINITAS BLVD STE
220
ENCINITAS, CA 92024*
Teleservice

Effective as of 01-OCT-21

NGUYEN, ANDY, DO†

Provider ID: N/A

📍 662 ENCINITAS BLVD STE
220
ENCINITAS, CA 92024*
Effective as of 01-JAN-21

NGUYEN, ALEXIE, MD†

Provider ID: N/A

📍 662 ENCINITAS BLVD STE
220
ENCINITAS, CA 92024
Effective as of 01-JAN-21

PHAM, STEVEN, MD†

Provider ID: N/A

📍 662 ENCINITAS BLVD STE
220
ENCINITAS, CA 92024*
Teleservice
Effective as of 01-NOV-21

RUMMANI, BENNY, DO†

Provider ID: N/A

📍 662 ENCINITAS BLVD STE
220
ENCINITAS, CA 92024*
Effective as of 01-JUL-21

**C1. Lista de proveedores de la red
Médico de atención especializada**

STEADMAN, MICHAEL, MD†

Provider ID: N/A

662 ENCINITAS BLVD STE 220
ENCINITAS, CA 92024*
Effective as of 01-JAN-21

TRAN, AMY, MD†

Provider ID: N/A

662 ENCINITAS BLVD STE 220
ENCINITAS, CA 92024*
Effective as of 01-JAN-21

TRAN, SHERI, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-APR-21

TRING, ELEANOR, DO†

Provider ID: N/A

662 ENCINITAS BLVD STE 220
ENCINITAS, CA 92024*
Effective as of 01-JUL-21

**INTERNAL MEDICINE
CRITICAL CARE MEDICINE**

FUSSELL, KEVIN, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-JUL-21

PINO, ALEJANDRO, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-JUL-21

SHIN, STEPHANIE, MD†

Provider ID: N/A

320 SANTA FE DR STE 107-C
ENCINITAS, CA 92024
Effective as of 01-JAN-21

TRAN, SHERI, MD†

Provider ID: N/A

320 SANTA FE DR STE 107C
ENCINITAS, CA 92024
Effective as of 01-JAN-21

ZHANG, MICHELLE, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Teleservice
Effective as of 01-MAY-22

**INTERVENTIONAL
CARDIOLOGY**

BHATIA, PRERANA, MD

Provider ID: N/A

477 N EL CAMINO REAL
ENCINITAS, CA 92024
Effective as of 01-AUG-23

JACOBY, RICHARD, MD†

Provider ID: N/A

700 GARDEN VIEW CT STE 204
ENCINITAS, CA 92024
Effective as of 01-SEP-21

MEHBOOB, SALMAN, MD†

Provider ID: N/A

700 GARDEN VIEW CT STE 204
ENCINITAS, CA 92024
Teleservice
Effective as of 01-SEP-21

WHITWAM, WAYNE, MD†

Provider ID: N/A

320 SANTA FE DR STE 204
ENCINITAS, CA 92024
Effective as of 01-NOV-20

**LICENSED CLINICAL
SOCIAL WORKER**

REBELO, MARCIA, LCSW

Provider ID: N/A

187 CALLE MAGDALENA
STE 212
ENCINITAS, CA 92024
Effective as of 01-OCT-23

MEDICAL ONCOLOGY

FLORES, EDNA, MD†

Provider ID: N/A

326 SANTA FE DR STE 105
ENCINITAS, CA 92024
Effective as of 01-JAN-21

FRAKES, LAURIE, MD†

Provider ID: N/A

326 SANTA FE DR STE 105
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JAN-24

FRAKES, LAURIE, MD†

Provider ID: N/A

326 SANTA FE DR STE 105
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JAN-21

MCCLAY, EDWARD, MD†


Provider ID: N/A

477 N EL CAMINO REAL
STE D200
ENCINITAS, CA 92024
Effective as of 01-JAN-21

MCCLAY, EDWARD, MD†

Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

 326 SANTA FE DR STE 105
ENCINITAS, CA 92024
Effective as of 01-FEB-21

NEPHROLOGY


AL-DAHMAN, ZAID, MD

Provider ID: N/A

 320 SANTA FE DR STE 212
ENCINITAS, CA 92024
Effective as of 01-MAY-23


LAKHERA, YOGITA, MD†

Provider ID: N/A

 320 SANTA FE DR STE 212
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JUL-22


LAKHERA, YOGITA, MD†

Provider ID: N/A

 320 SANTA FE DR STE 212
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JAN-24


LAKHERA, YOGITA, MD†

Provider ID: N/A

 320 SANTA FE DR STE 212
ENCINITAS, CA 92024
Teleservice
Effective as of 01-MAR-17


LAKHERA, YOGITA, MD†

Provider ID: N/A

 320 SANTA FE DR STE 212
ENCINITAS, CA 92024
Teleservice
Effective as of 01-AUG-24

LAKHERA, YOGITA, MD†

Provider ID: N/A

 320 SANTA FE DR STE 212
ENCINITAS, CA 92024

Teleservice
Effective as of 01-JAN-21

STEER, DYLAN, MD†


Provider ID: N/A

 320 SANTA FE DR STE 212
ENCINITAS, CA 92024
Effective as of 01-JAN-21

NEUROLOGY

BAKER, DAVID, DO

Provider ID: N/A

 354 SANTA FE DR
ENCINITAS, CA 92024
Effective as of 01-JAN-24

SCHORR, EMILY, MD


Provider ID: N/A

 1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-MAR-24

OBSTETRICS / GYNECOLOGY


BINDER, PRATIBHA, MD†

Provider ID: N/A

 1200 GARDEN VIEW RD
STE 200
ENCINITAS, CA 92024
Effective as of 01-JUL-21

DELCORE, LAURA, MD†

Provider ID: N/A

 1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-AUG-22


DRIEBE, AMY, MD†

Provider ID: N/A

 1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-AUG-22


DRIEBE, AMY, MD†

Provider ID: N/A

 781 GARDEN VIEW CT STE
200
ENCINITAS, CA 92024
Effective as of 01-SEP-22

DRIEBE, AMY, MD†

Provider ID: N/A

 1505 ENCINITAS BLVD
ENCINITAS, CA 92024
Effective as of 01-SEP-22


MACKAY, GILLIAN, MD

Provider ID: N/A

 1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-DEC-23

SPRING-ROBINSON, CHANDRA, DO


Provider ID: N/A

 477 N EL CAMINO REAL
STE C208
ENCINITAS, CA 92024
Effective as of 01-JAN-23

OPHTHALMOLOGY


CULOTTA, ANTHONY, MD†

Provider ID: N/A

 320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Teleservice
Effective as of 01-SEP-24

FISH, STEVEN, MD


Provider ID: N/A

 320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Effective as of 01-APR-23

FISH, STEVEN, MD


Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

 320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Effective as of 01-APR-23


FISH, STEVEN, MD

Provider ID: N/A

 320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Effective as of 01-APR-23


FISH, STEVEN, MD

Provider ID: N/A

 320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Effective as of 01-APR-23


HUDSON, HENRY, MD†

Provider ID: N/A

 320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Effective as of 01-APR-22


JOHNSTON, ERIC, MD

Provider ID: N/A

 477 N EL CAMINO REAL
STE C202
ENCINITAS, CA 92024
Effective as of 01-MAY-21


MCGRAW, JOSEPH, MD†

Provider ID: N/A

 320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Effective as of 01-NOV-21


SAMUEL, MICHAEL, MD†

Provider ID: N/A

 320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Effective as of 01-FEB-21

SAMUEL, MICHAEL, MD†


Provider ID: N/A

 320 SANTA FE DR STE 104
ENCINITAS, CA 92024

Effective as of 01-MAR-21


VIECHNICKI, TARA, MD

Provider ID: N/A

 477 N EL CAMINO REAL
STE C202
ENCINITAS, CA 92024
Effective as of 01-DEC-11


ZABANEH, ALEXANDER, MD†

Provider ID: N/A

 320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Effective as of 01-JAN-21


ZHAO, TAILUN, MD

Provider ID: N/A

 320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Effective as of 01-JAN-24


ZHAO, TAILUN, MD

Provider ID: N/A

 320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Effective as of 01-JUL-23


ZHAO, TAILUN, MD

Provider ID: N/A

 320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Effective as of 01-SEP-24

ZHAO, TAILUN, MD


Provider ID: N/A

 320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Effective as of 01-NOV-23

OPTOMETRIST

CAO-NGUYEN, TIEN, OD


Provider ID: N/A

 477 N EL CAMINO REAL
STE C202

ENCINITAS, CA 92024
Effective as of 01-JUL-23


DEAN, MOENA, OD†

Provider ID: N/A

 320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Effective as of 01-JUL-21


DEAN, MOENA, OD†

Provider ID: N/A

 320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Effective as of 01-SEP-22


MARR, RYAN, OD

Provider ID: N/A

 320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Effective as of 01-DEC-22


MARR, RYAN, OD

Provider ID: N/A

 320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Effective as of 01-MAY-24


MARR, RYAN, OD

Provider ID: N/A

 320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Effective as of 01-JUL-24


SOLIS, KEVIN, OD

Provider ID: N/A

 477 N EL CAMINO REAL
STE C202
ENCINITAS, CA 92024
Effective as of 01-JUN-23

TAN, CONNIE, OD

Provider ID: N/A

 477 N EL CAMINO REAL
STE C202
ENCINITAS, CA 92024

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-JUN-21

ZAIDI, NOORINA, OD

Provider ID: N/A

320 SANTA FE DR STE 104
ENCINITAS, CA 92024*

Effective as of 01-OCT-24

ORAL MAXILLOFACIAL SURGEON

ELI, BRADLEY, DMD

Provider ID: N/A

4403 MANCHESTER AVE
STE 101
ENCINITAS, CA 92024

Teleservice

Effective as of 01-SEP-20

OTOLARYNGOLOGY

REUTHER, MARSHA, MD†

Provider ID: N/A

477 N EL CAMINO REAL
STE A308
ENCINITAS, CA 92024

Effective as of 01-JAN-21

PEDIATRICS

KOOROS, KOOROSH, MD†

Provider ID: N/A

477 N EL CAMINO REAL
STE A308
ENCINITAS, CA 92024

Effective as of 01-FEB-22

PHYSICIANS ASSISTANT

DAS, GOURAB, PA

Provider ID: N/A

477 N EL CAMINO REAL
STE A200
ENCINITAS, CA 92024

Effective as of 01-JAN-21

GILLAN, JAMES, PA†

Provider ID: N/A

320 SANTA FE DR STE
107-C
ENCINITAS, CA 92024

Effective as of 01-JAN-21

GILLAN, JAMES, PA

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024

Effective as of 01-SEP-24

HIGGINS, JOSHUA, PA†

Provider ID: N/A

1505 ENCINITAS BLVD
ENCINITAS, CA 92024

Effective as of 01-JAN-22

JOHNSON, RYAN, PA

Provider ID: N/A

351 SANTA FE DR STE 100
ENCINITAS, CA 92024

Teleservice

Effective as of 01-JUN-24

MORENO, SYDNIE, PA

Provider ID: N/A

477 N EL CAMINO REAL
STE A200
ENCINITAS, CA 92024

Effective as of 01-APR-24

PELIO, DARREN, PA†

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024

Effective as of 01-SEP-22

SMITH, ALLISON, PA

Provider ID: N/A

477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024

Effective as of 01-JUN-24

SMITH, ALLISON, PA

Provider ID: N/A

477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024

Effective as of 01-MAY-24

VANETSKY, GARY, PA†

Provider ID: N/A

477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024

Effective as of 01-JAN-21

VANETSKY, GARY, PA†

Provider ID: N/A

477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024

Effective as of 01-JAN-21

PODIATRIST

BERENTER, JAY, DPM†

Provider ID: N/A

501 N EL CAMINO REAL
STE 510
ENCINITAS, CA 92024

Effective as of 01-DEC-21

BERGER, COLBY, DPM

Provider ID: N/A

501 N EL CAMINO REAL
STE 201
ENCINITAS, CA 92024

Effective as of 01-JUN-23

BERGER, COLBY, DPM

Provider ID: N/A

501 N EL CAMINO REAL
STE 201
ENCINITAS, CA 92024

Effective as of 01-APR-23

C1. Lista de proveedores de la red Médico de atención especializada

DUSTIN, ADAM, DPM†

Provider ID: N/A

📍 326 ENCINITAS BLVD STE 100
ENCINITAS, CA 92024
Effective as of 01-FEB-21

GILLES, LOUIS, DPM

Provider ID: N/A

📍 320 SANTA FE DR STE 305
ENCINITAS, CA 92024
Effective as of 01-AUG-23

KREPS, CHRISTOPHER, DPM

Provider ID: N/A

📍 501 N EL CAMINO REAL STE 201
ENCINITAS, CA 92024
Effective as of 01-DEC-23

KREPS, CHRISTOPHER, DPM

Provider ID: N/A

📍 501 N EL CAMINO REAL STE 201
ENCINITAS, CA 92024
Effective as of 01-JUN-23

LIEBERMAN, RONALD, DPM

Provider ID: N/A

📍 501 N EL CAMINO REAL STE 201
ENCINITAS, CA 92024
Effective as of 01-DEC-23

LIEBERMAN, RONALD, DPM

Provider ID: N/A

📍 501 N EL CAMINO REAL STE 201
ENCINITAS, CA 92024
Effective as of 01-MAY-24

RUETENIK, BRAD, DPM

Provider ID: N/A

📍 501 N EL CAMINO REAL STE 201

ENCINITAS, CA 92024
Effective as of 01-MAY-24

RUETENIK, BRAD, DPM

Provider ID: N/A

📍 501 N EL CAMINO REAL STE 201
ENCINITAS, CA 92024
Effective as of 01-DEC-23

PSYCHOLOGIST

GOMEZ, JUANITA, PhD†

Provider ID: N/A

📍 1505 ENCINITAS BLVD
ENCINITAS, CA 92024
Effective as of 01-AUG-22

GOMEZ, JUANITA, PhD†

Provider ID: N/A

📍 1505 ENCINITAS BLVD
ENCINITAS, CA 92024
Effective as of 01-AUG-22

PULMONARY DISEASES

BAUTISTA, JENNIFER, MD†

Provider ID: N/A

📍 326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-MAY-24

BAUTISTA, JENNIFER, MD†

Provider ID: N/A

📍 326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-SEP-24

EISMAN, SCOTT, MD†

Provider ID: N/A

📍 326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-SEP-24

EISMAN, SCOTT, MD†

Provider ID: N/A

📍 326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-MAY-24

EISMAN, SCOTT, MD†

Provider ID: N/A

📍 326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-NOV-20

FUSSELL, KEVIN, MD†

Provider ID: N/A

📍 326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-SEP-22

FUSSELL, KEVIN, MD†

Provider ID: N/A

📍 326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-MAY-24

FUSSELL, KEVIN, MD†

Provider ID: N/A

📍 326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-SEP-24

GADRE, ABHISHEK, MD†

Provider ID: N/A

📍 326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-SEP-24

GADRE, ABHISHEK, MD†

Provider ID: N/A

📍 326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-JUL-21

GADRE, ABHISHEK, MD†

Provider ID: N/A

📍 326 SANTA FE DR STE 100
ENCINITAS, CA 92024

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-SEP-22

GADRE, ABHISHEK, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-MAY-24

HSING, ANDREW, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-MAY-24

HSING, ANDREW, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-JAN-24

HSING, ANDREW, MD†

Provider ID: N/A

320 SANTA FE DR STE 107C
ENCINITAS, CA 92024
Effective as of 01-JAN-21

HSING, ANDREW, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-SEP-24

KABADI, ALISHA, MD

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-SEP-24

KABADI, ALISHA, MD

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-SEP-24

KABADI, ALISHA, MD

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-MAY-24

LIANG, NI-CHENG, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-MAY-24

LIANG, NI-CHENG, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-NOV-20

LIANG, NI-CHENG, MD†

Provider ID: N/A

320 SANTA FE DR STE 107C
ENCINITAS, CA 92024
Effective as of 01-JAN-21

LIANG, NI-CHENG, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-SEP-24

MAGANA, MARISA, MD†

Provider ID: N/A

320 SANTA FE DR STE 107C
ENCINITAS, CA 92024
Effective as of 01-JAN-21

MAGANA, MARISA, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-APR-23

MAKANI, SAMIR, MD†

Provider ID: N/A

320 SANTA FE DR STE 107C
ENCINITAS, CA 92024

Effective as of 01-JAN-21

MAKANI, SAMIR, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-APR-23

MAKANI, SAMIR, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-NOV-20

MAKANI, SAMIR, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-SEP-24

PINO, ALEJANDRO, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-SEP-24

PINO, ALEJANDRO, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-SEP-22

PINO, ALEJANDRO, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-MAY-24

SARNOFF, ROBERT, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-MAY-24

SARNOFF, ROBERT, MD†

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

320 SANTA FE DR STE 107C
ENCINITAS, CA 92024
Effective as of 01-JAN-21

SARNOFF, ROBERT, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-APR-21

SARNOFF, ROBERT, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-SEP-24

SHIN, STEPHANIE, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-SEP-24

SHIN, STEPHANIE, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-DEC-20

TRAN, SHERI, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-MAY-23

TRAN, SHERI, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-MAY-24

TRAN, SHERI, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024

Effective as of 01-SEP-24

ZHANG, MICHELLE, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Teleservice

Effective as of 01-SEP-24

ZHANG, MICHELLE, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Teleservice

Effective as of 01-SEP-23

ZHANG, MICHELLE, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Teleservice

Effective as of 01-MAY-24

ZHANG, MICHELLE, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Teleservice

Effective as of 01-JAN-24

ZHANG, MICHELLE, MD†

Provider ID: N/A

326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Teleservice

Effective as of 01-APR-23

RADIATION ONCOLOGY

BEAR, JONATHAN, MD

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-JUN-23

HATTANGADI-GLUTH, JONA, MD†

Provider ID: N/A

1200 GARDEN VIEW RD
STE 210
ENCINITAS, CA 92024
Effective as of 01-DEC-23

HORN, ADAM, MD

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-JUN-23

MACEWAN, IAIN, MD†

Provider ID: N/A

1200 GARDEN VIEW RD
STE 210
ENCINITAS, CA 92024
Effective as of 01-DEC-23

MANSY, GINA, MD

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-DEC-23

MAYADEV, JYOTI, MD†

Provider ID: N/A

1200 GARDEN VIEW RD
STE 210
ENCINITAS, CA 92024
Effective as of 01-DEC-23

MELL, LOREN, MD

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-DEC-23

MURPHY, JAMES, MD†

Provider ID: N/A

1200 GARDEN VIEW RD
STE 200
ENCINITAS, CA 92024

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-DEC-23

RAHN, DOUGLAS, MD

Provider ID: N/A

📍 1200 GARDEN VIEW RD
ENCINITAS, CA 92024

Effective as of 01-DEC-23

ROSE, BRENT, MD†

Provider ID: N/A

📍 1200 GARDEN VIEW RD
STE 210
ENCINITAS, CA 92024

Effective as of 01-DEC-23

SANDHU, AJAY PAL, MD

Provider ID: N/A

📍 1200 GARDEN VIEW RD
ENCINITAS, CA 92024

Effective as of 01-DEC-23

SEIBERT, TYLER, MD†

Provider ID: N/A

📍 1200 GARDEN VIEW RD
STE 210
ENCINITAS, CA 92024

Effective as of 01-DEC-23

SHARABI, ANDREW, MD

Provider ID: N/A

📍 1200 GARDEN VIEW RD
ENCINITAS, CA 92024

Effective as of 01-DEC-23

SIMPSON, DANIEL, MD

Provider ID: N/A

📍 1200 GARDEN VIEW RD
STE 210
ENCINITAS, CA 92024

Effective as of 01-DEC-23

STRAKA, CHRISTOPHER, MD

Provider ID: N/A

📍 1200 GARDEN VIEW RD
ENCINITAS, CA 92024

Effective as of 01-DEC-23

TYE, KAREN, MD

Provider ID: N/A

📍 1200 GARDEN VIEW RD
ENCINITAS, CA 92024

Effective as of 01-JUN-23

WHITE, EVAN, MD

Provider ID: N/A

📍 1200 GARDEN VIEW RD
ENCINITAS, CA 92024

Effective as of 01-DEC-23

YASHAR, CATHERYN, MD

Provider ID: N/A

📍 1200 GARDEN VIEW RD
ENCINITAS, CA 92024

Effective as of 01-DEC-23

REGISTERED DIETITIAN / NUTRITIONIST

SALCEDO, ALEXANDRA, RD

Provider ID: N/A

📍 1200 GARDEN VIEW RD
ENCINITAS, CA 92024

Effective as of 01-JAN-24

REGISTERED PHYSICAL THERAPIST

DOULL, MATTHEW, PT

Provider ID: N/A

📍 351 SANTA FE DR STE 100
ENCINITAS, CA 92024

Teleservice

Effective as of 01-JUN-23

TAMAYO, SYDNIE, PT

Provider ID: N/A

📍 351 SANTA FE DR STE 100
ENCINITAS, CA 92024

Teleservice

Effective as of 01-OCT-23

SLEEP MEDICINE

MENN, STUART, MD

Provider ID: N/A

📍 4403 MANCHESTER AVE
STE 101
ENCINITAS, CA 92024

Effective as of 01-MAR-23

SURGERY COLON SURGERY

PARRY, LISA, MD†

Provider ID: N/A

📍 1200 GARDEN VIEW RD
STE 200
ENCINITAS, CA 92024

Effective as of 01-APR-21

SCHULTZEL, MATTHEW, DO†

Provider ID: N/A

📍 477 N EL CAMINO REAL
STE A308
ENCINITAS, CA 92024

Effective as of 01-JAN-21

SURGERY GENERAL

ARMANI, AVA, MD†

Provider ID: N/A

📍 1200 GARDEN VIEW RD
STE 200
ENCINITAS, CA 92024

Effective as of 01-JUL-21

BURGESS, DANIEL, DO†

Provider ID: N/A

📍 477 N EL CAMINO REAL
STE C204
ENCINITAS, CA 92024

Teleservice

Effective as of 01-JUN-21

C1. Lista de proveedores de la red Médico de atención especializada

BURGESS, DANIEL, DO†

Provider ID: N/A

477 N EL CAMINO REAL
STE A308
ENCINITAS, CA 92024

Teleservice

Effective as of 01-JUN-21

BURGESS, DANIEL, DO†

Provider ID: N/A

477 N EL CAMINO REAL
STE A308
ENCINITAS, CA 92024

Teleservice

Effective as of 01-OCT-23

BURGESS, DANIEL, DO†

Provider ID: N/A

477 N EL CAMINO REAL
STE C204
ENCINITAS, CA 92024

Teleservice

Effective as of 01-OCT-23

JACOBSEN, GARTH, MD†

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024

Effective as of 01-DEC-21

RAYAN, SUNIL, MD†

Provider ID: N/A

320 SANTA FE DR STE 212
ENCINITAS, CA 92024

Teleservice

Effective as of 01-AUG-15

SCHULTZEL, MATTHEW, DO†

Provider ID: N/A

477 N EL CAMINO REAL
STE C204
ENCINITAS, CA 92024

Effective as of 01-JUL-20

TOOSIE, KATAYOUN, MD

Provider ID: N/A

351 SANTA FE DR STE 250
ENCINITAS, CA 92024

Effective as of 01-JUL-24

TOOSIE, KATAYOUN, MD

Provider ID: N/A

351 SANTA FE DR STE 250
ENCINITAS, CA 92024

Effective as of 01-AUG-24

WAKILY, HUSSNA, MD

Provider ID: N/A

351 SANTA FE DR STE 250
ENCINITAS, CA 92024

Effective as of 01-JUL-24

SURGERY GENERAL VASCULAR

RAYAN, SUNIL, MD†

Provider ID: N/A

320 SANTA FE DR STE 212
ENCINITAS, CA 92024

Teleservice

Effective as of 01-JAN-21

SURGERY ORTHOPEDIC

AFRA, ROBERT, MD†

Provider ID: N/A

317 N EL CAMINO REAL STE
405
ENCINITAS, CA 92024

Effective as of 01-JAN-16

BREMNER, LUKE, MD

Provider ID: N/A

332 SANTA FE DR STE 110
ENCINITAS, CA 92024

Effective as of 01-DEC-19

BREMNER, LUKE, MD

Provider ID: N/A

332 SANTA FE DR STE 110
ENCINITAS, CA 92024

Effective as of 01-MAR-23

CHAN, JUSTIN, MD

Provider ID: N/A

332 SANTA FE DR STE 110
ENCINITAS, CA 92024

Teleservice

Effective as of 01-MAR-23

CHAN, JUSTIN, MD

Provider ID: N/A

332 SANTA FE DR STE 110
ENCINITAS, CA 92024

Teleservice

Effective as of 01-AUG-20

GROTGING, JOHN, MD

Provider ID: N/A

477 N EL CAMINO REAL
STE B301
ENCINITAS, CA 92024

Effective as of 01-NOV-23

HAJNIK, CHRISTOPHER, MD

Provider ID: N/A

332 SANTA FE DR STE 110
ENCINITAS, CA 92024

Teleservice

Effective as of 01-DEC-19

HAJNIK, CHRISTOPHER, MD

Provider ID: N/A

332 SANTA FE DR STE 110
ENCINITAS, CA 92024

Teleservice

Effective as of 01-MAR-23

HAMMEL, NATHAN, MD†

Provider ID: N/A

332 SANTA FE DR STE 110
ENCINITAS, CA 92024

C1. Lista de proveedores de la red Médico de atención especializada

Teleservice

Effective as of 01-MAR-23

HAMMEL, NATHAN, MD†

Provider ID: N/A

332 SANTA FE DR STE 110
ENCINITAS, CA 92024

Teleservice

Effective as of 01-DEC-19

KIM, PAUL, MD†

Provider ID: N/A

332 SANTA FE DR STE 110
ENCINITAS, CA 92024

Effective as of 01-SEP-22

MEINEKE, RYAN, MD†

Provider ID: N/A

332 SANTA FE DR STE 110
ENCINITAS, CA 92024

Teleservice

Effective as of 01-MAY-22

MEINEKE, RYAN, MD†

Provider ID: N/A

332 SANTA FE DR STE 110
ENCINITAS, CA 92024

Teleservice

Effective as of 01-MAR-23

RAISZADEH, RAMIN, MD†

Provider ID: N/A

332 SANTA FE DR STE 110
ENCINITAS, CA 92024

Effective as of 01-JAN-23

SCHULTZEL, MARK, MD†

Provider ID: N/A

519 ENCINITAS BLVD STE
106
ENCINITAS, CA 92024

Teleservice

Effective as of 01-OCT-22

SURGERY PLASTIC

CHAO, JAMES, MD†

Provider ID: N/A

499 N EL CAMINO REAL
STE C200
ENCINITAS, CA 92024

Effective as of 01-JUL-15

CHEN, STEVEN, MD†

Provider ID: N/A

499 N EL CAMINO REAL
STE C200
ENCINITAS, CA 92024

Effective as of 01-JUL-15

GOSMAN, AMANDA, MD†

Provider ID: N/A

1200 GARDEN VIEW RD
ENCINITAS, CA 92024

Effective as of 01-NOV-21

GUPTA, ANSHU, MD

Provider ID: N/A

700 GARDEN VIEW CT STE
208
ENCINITAS, CA 92024

Effective as of 01-MAY-23

GUPTA, ABHAY, MD

Provider ID: N/A

351 SANTA FE DR STE 250
ENCINITAS, CA 92024

Effective as of 01-MAY-23

UROLOGY

COHEN, EDWARD, MD†

Provider ID: N/A

320 SANTA FE DR STE 108
ENCINITAS, CA 92024

Effective as of 01-APR-16

COHEN, EDWARD, MD†

Provider ID: N/A

320 SANTA FE DR STE 108
ENCINITAS, CA 92024

Effective as of 01-JAN-21

COHEN, EDWARD, MD†

Provider ID: N/A

320 SANTA FE DR STE 305
ENCINITAS, CA 92024

Effective as of 01-SEP-21

COHEN, EDWARD, MD†

Provider ID: N/A

320 SANTA FE DR STE 305
ENCINITAS, CA 92024

Effective as of 01-SEP-22

COHEN, EDWARD, MD†

Provider ID: N/A

320 SANTA FE DR STE 108
ENCINITAS, CA 92024

Effective as of 01-JUL-22

DATO, PAUL, MD

Provider ID: N/A

320 SANTA FE DR STE 108
ENCINITAS, CA 92024

Effective as of 01-JAN-24

DICKS, BRIAN, MD

Provider ID: N/A

320 SANTA FE DR STE 108
ENCINITAS, CA 92024

Effective as of 01-JAN-24

KEILLER, DANNY, MD

Provider ID: N/A

320 SANTA FE DR STE 108
ENCINITAS, CA 92024

Effective as of 01-FEB-24

NAITOH, JOHN, MD†

Provider ID: N/A

320 SANTA FE DR STE 108
ENCINITAS, CA 92024

Effective as of 01-NOV-21

C1. Lista de proveedores de la red Médico de atención especializada

NAITOH, JOHN, MD†

Provider ID: N/A

320 SANTA FE DR STE 305
ENCINITAS, CA 92024

Effective as of 01-SEP-22

NEUSTEIN, PAUL, MD

Provider ID: N/A

320 SANTA FE DR STE 108
ENCINITAS, CA 92024

Effective as of 01-FEB-24

NGUYEN, HUNG, MD†

Provider ID: N/A

320 SANTA FE DR STE 108
ENCINITAS, CA 92024

Teleservice

Effective as of 01-JAN-21

NGUYEN, HUNG, MD†

Provider ID: N/A

320 SANTA FE DR STE 108
ENCINITAS, CA 92024

Teleservice

Effective as of 01-SEP-21

NGUYEN, HUNG, MD†

Provider ID: N/A

320 SANTA FE DR STE 108
ENCINITAS, CA 92024

Teleservice

Effective as of 01-JAN-24

PE, MARK-RALLY, MD

Provider ID: N/A

320 SANTA FE DR STE 108
ENCINITAS, CA 92024

Effective as of 01-FEB-24

ROBERTS, JAMES, MD

Provider ID: N/A

320 SANTA FE DR STE 108
ENCINITAS, CA 92024

Effective as of 01-JAN-24

SALEM, CAROL, MD

Provider ID: N/A

320 SANTA FE DR STE 108
ENCINITAS, CA 92024

Effective as of 01-FEB-24

VAPNEK, EVAN, MD

Provider ID: N/A

320 SANTA FE DR STE 108
ENCINITAS, CA 92024

Effective as of 01-JAN-24

ADDICTIVE MEDICINE

AGEZE, DANIEL, MD

Provider ID: N/A

550 W WASHINGTON AVE
ESCONDIDO, CA 92025

Effective as of 01-JUL-24

AGEZE, DANIEL, MD

Provider ID: N/A

550 W WASHINGTON AVE
ESCONDIDO, CA 92025*

Effective as of 01-OCT-24

GILL, MANPREET, MD

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025

Effective as of 01-JUN-24

ANESTHESIOLOGY

FARUQUE, TANIA, MD†

Provider ID: N/A

255 N ELM ST STE 101
ESCONDIDO, CA 92025

Effective as of 01-SEP-24

FARUQUE, TANIA, MD†

Provider ID: N/A

255 N ELM ST STE 101
ESCONDIDO, CA 92025

Effective as of 01-JAN-21

KHATIBI, NIKAN, DO†

Provider ID: N/A

160 N DATE ST
ESCONDIDO, CA 92025

Effective as of 01-JAN-21

KHATIBI, NIKAN, DO†

Provider ID: N/A

160 N DATE ST
ESCONDIDO, CA 92025

Effective as of 01-JAN-21

ANESTHESIOLOGY PAIN MANAGEMENT

BROWNLOW, ROY, MD

Provider ID: N/A

637 E GRAND AVE
ESCONDIDO, CA 92025

Effective as of 01-JUL-24

COHEN, ZACHARY, MD

Provider ID: N/A

940 E VALLEY PKWY STE K
ESCONDIDO, CA 92025

Effective as of 01-JAN-23

DAIRO, BRANDON, MD†

Provider ID: N/A

1955 CITRACADO PKWY
STE 203
ESCONDIDO, CA 92029

Teleservice

Effective as of 01-NOV-22

GUPTA, PRAGYA, MD

Provider ID: N/A

1955 CITRACADO PKWY
STE 203
ESCONDIDO, CA 92029

Effective as of 01-AUG-24

KHATIBI, NIKAN, DO†

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

160 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JUL-21

KHATIBI, NIKAN, DO†

Provider ID: N/A

160 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JUL-21

KHATIBI, NIKAN, DO†

Provider ID: N/A

160 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JUL-21

KHATIBI, NIKAN, DO†

Provider ID: N/A

160 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

PRASAD, RUPA, MD†

Provider ID: N/A

1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Teleservice
Effective as of 01-NOV-23

ROBINSON, COLE, MD

Provider ID: N/A

160 N DATE ST
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-JUN-23

CARDIAC ELECTROPHYSIOLOGY

LERNER, JONATHAN, MD

Provider ID: N/A

488 E VALLEY PKWY STE

107

ESCONDIDO, CA 92025
Effective as of 01-JUL-23

SAWHNEY, NAVINDER, MD

Provider ID: N/A

2130 CITRACADO PKWY
STE 320
ESCONDIDO, CA 92029
Effective as of 01-MAR-24

SHAH, ABHISHEK, MD†

Provider ID: N/A

488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025
Effective as of 01-JAN-23

CARDIOVASCULAR DISEASE

ABELHAD, NADIA, MD

Provider ID: N/A

488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

CARLSON, STEVEN, MD†

Provider ID: N/A

488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-MAY-21

DO, HULBERT, MD

Provider ID: N/A

488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025
Effective as of 01-OCT-23

MALEK, MIKHAIL, MD

Provider ID: N/A

2130 CITRACADO PKWY
STE 220
ESCONDIDO, CA 92029
Effective as of 01-MAR-23

MOUSSAVIAN, MEHRAN, DO†

Provider ID: N/A

488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025
Effective as of 01-MAY-21

NARAYANAN, MEENA, MD†

Provider ID: N/A

488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025
Effective as of 01-MAY-21

ORR, ROBERT, MD

Provider ID: N/A

225 E 2ND AVE
ESCONDIDO, CA 92025
Effective as of 01-AUG-24

PARIKH, MILIND, DO†

Provider ID: N/A

488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025
Effective as of 01-MAY-21

SARSAM, LUAY, MD

Provider ID: N/A

488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025
Effective as of 01-JUL-23

SARSAM, LUAY, MD

Provider ID: N/A

488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025
Effective as of 01-JUL-23

C1. Lista de proveedores de la red Médico de atención especializada

SHAH, KULIN, MD†

Provider ID: N/A

488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025
Effective as of 01-JAN-23

SHAH, ABHISHEK, MD†

Provider ID: N/A

488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

SUDHAKAR, DEEPTHI, MD†

Provider ID: N/A

488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025
Effective as of 01-JAN-23

CERTIFIED

ACUPUNCTURIST

CHEN, SISI, LAC†

Provider ID: N/A

240 W MISSION AVE STE C
ESCONDIDO, CA 92025
Effective as of 01-JUL-21

KIM, MIN JOO, LAC†

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-NOV-22

CERTIFIED NURSE

PRACTITIONER

BISHOP, LESLIE, NP†

Provider ID: N/A

1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029

Teleservice

Effective as of 01-MAR-21

CARNEY, AMY, NP

Provider ID: N/A

728 E VALLEY PKWY
ESCONDIDO, CA 92025

Teleservice

Effective as of 01-MAR-23

GARVIN, JOSEPH, NP†

Provider ID: N/A

2125 CITRACADO PKWY
STE 220
ESCONDIDO, CA 92029
Effective as of 01-JAN-22

KESHAVARZI, SARA, NPF

Provider ID: N/A

488 E VALLEY PKWY STE
411
ESCONDIDO, CA 92025
Effective as of 01-SEP-24

KONYN, CATHERINE, NPF

Provider ID: N/A

728 E VALLEY PKWY
ESCONDIDO, CA 92025

Teleservice

Effective as of 01-APR-23

LEE, SHULAMI, NPF

Provider ID: N/A

728 E VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-SEP-24

LEE, SHULAMI, NPF

Provider ID: N/A

728 E VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-JUL-24

MANCHESTER, KAREN, NP

Provider ID: N/A

2130 CITRACADO PKWY
STE 220
ESCONDIDO, CA 92029
Effective as of 01-FEB-24

MANCHESTER, KAREN, NP

Provider ID: N/A

1955 CITRACADO PKWY
STE 302
ESCONDIDO, CA 92029
Effective as of 01-AUG-24

MEYERS, JUDITH, NP†

Provider ID: N/A

1955 CITRACADO PKWY
STE 300
ESCONDIDO, CA 92029
Effective as of 01-JAN-21

MILLER, JEAN, NP

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

PHELAN, ELISHA, NP

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-JUN-24

RICE, ELIZABETH, NP

Provider ID: N/A

1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-MAR-24

SPAULDING, ENJOLI, NP†

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

WOLF, ELI, NP

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025*
Effective as of 01-OCT-24

WOLF, ELI, NP

Provider ID: N/A

488 E VALLEY PKWY STE
411
ESCONDIDO, CA 92025*
Effective as of 01-OCT-24

CERTIFIED REGISTERED NURSE ANESTHETIST

BARBA, ARNEL, CRNA

Provider ID: N/A

488 E VALLEY PKWY STE
110
ESCONDIDO, CA 92025
Effective as of 01-FEB-24

BROWN, SHENISE, CRNA

Provider ID: N/A

488 E VALLEY PKWY STE
110
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

FIEDLER, DEREK, CRNA

Provider ID: N/A

488 E VALLEY PKWY STE
110
ESCONDIDO, CA 92025
Effective as of 01-FEB-24

HASE, KATHLEEN, CRNA

Provider ID: N/A

488 E VALLEY PKWY STE
110
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

ORTEGA, JOSEPH, CRNA

Provider ID: N/A

488 E VALLEY PKWY STE
110
ESCONDIDO, CA 92025
Effective as of 01-FEB-24

SEILNACHT-BERNARD, KAREN, CRNA†

Provider ID: N/A

488 E VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

CERTIFIED REGISTERED NURSE MIDWIFE

ALLEN, ANNE, CRNM†

Provider ID: N/A

488 E VALLEY PKWY STE
404
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

HAMMOND, HEATHER, CRNM

Provider ID: N/A

488 E VALLEY PKWY STE
404
ESCONDIDO, CA 92025*
Effective as of 01-JAN-24

ONEILL, THERESE, CRNM†

Provider ID: N/A

488 E VALLEY PKWY STE
404
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

ONEILL, THERESE, CRNM†

Provider ID: N/A

488 E VALLEY PKWY STE
404
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

CHIROPRACTOR

BARTZ, PAUL, DC†

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

FONSECA, ROSANNA, DC

Provider ID: N/A

2065 S ESCONDIDO BLVD
STE 105
ESCONDIDO, CA 92025
Effective as of 01-MAY-21

KAZEM, AHMAD, DC

Provider ID: N/A

701 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-SEP-24

PATEL, BRIJESH, DC

Provider ID: N/A

426 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JUL-24

ZECHA, RONALD, DC

Provider ID: N/A

488 E VALLEY PKWY STE
411
ESCONDIDO, CA 92025
Effective as of 01-AUG-22

ZECHA, RONALD, DC

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

ZECHA, RONALD, DC

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-AUG-22

DERMATOLOGY

C1. Lista de proveedores de la red Médico de atención especializada

ARMSTRONG, PATRICK, MD

Provider ID: N/A

2125 CITRACADO PKWY
STE 220
ESCONDIDO, CA 92029
Effective as of 01-MAR-24

VENKAT, ARUN, MD†

Provider ID: N/A

488 E VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-OCT-13

EMERGENCY MEDICINE

HARE, MARC, MD

Provider ID: N/A

1045 E PENNSYLVANIA
AVE
ESCONDIDO, CA 92025
Effective as of 01-APR-23

ENDOCRINOLOGY

METABOLISM DIABETES

BAILEY, TIMOTHY, MD

Provider ID: N/A

625 CITRACADO PKWY STE
108
ESCONDIDO, CA 92025
Effective as of 01-OCT-23

FAMILY PRACTICE

COBIAN, VANESSA, MD

Provider ID: N/A

728 E VALLEY PKWY
ESCONDIDO, CA 92025*
Effective as of 01-FEB-24

PATEL, JITENBHAI, MD

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025*

Effective as of 01-AUG-24

PATEL, RAKESH, MD

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-AUG-24

PATEL, RAKESH, MD

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-AUG-24

PATEL, RAKESH, MD

Provider ID: N/A

426 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-AUG-24

PATEL, JITENBHAI, MD

Provider ID: N/A

728 E VALLEY PKWY
ESCONDIDO, CA 92025*
Effective as of 01-AUG-24

PATEL, RAKESH, MD

Provider ID: N/A

728 E VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-AUG-24

PATEL, RAKESH, MD

Provider ID: N/A

488 E VALLEY PKWY STE
404
ESCONDIDO, CA 92025
Effective as of 01-AUG-24

SCHULTZ, JAMES, MD

Provider ID: N/A

728 E VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-AUG-24

SCHULTZ, JAMES, MD†

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-AUG-24

SHAFT, ALEXANDER, MD†

Provider ID: N/A

488 E VALLEY PKWY STE
313
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-MAR-22

SHAFT, ALEXANDER, MD†

Provider ID: N/A

488 E VALLEY PKWY STE
313
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-FEB-23

GASTROENTEROLOGY

CHELIMILLA, HARITHA, MD

Provider ID: N/A

488 E VALLEY PKWY STE
110
ESCONDIDO, CA 92025
Effective as of 01-OCT-20

CHELIMILLA, HARITHA, MD

Provider ID: N/A

735 E OHIO AVE STE 204
ESCONDIDO, CA 92025
Effective as of 01-AUG-20

CHELIMILLA, HARITHA, MD


Provider ID: N/A

735 E OHIO AVE STE 204
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

GARA, NAVEEN, MD†


Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

 935 E PENNSYLVANIA AVE
ESCONDIDO, CA 92025
Effective as of 01-SEP-22


GARA, NAVEEN, MD†

Provider ID: N/A

 661 E PENNSYLVANIA AVE
ESCONDIDO, CA 92025
Effective as of 01-JAN-21


HASSANEIN, TAREK, MD†

Provider ID: N/A

 488 E VALLEY PKWY STE
313
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-MAR-22


HASSANEIN, TAREK, MD†

Provider ID: N/A

 488 E VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-JUL-21

HASSANEIN, TAREK, MD†


Provider ID: N/A

 488 E VALLEY PKWY STE
313
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-MAY-22

HEARING AID DEALER / SUPPLIER

ANDERSON, ELAINE, MA†


Provider ID: N/A

 330 W FELICITA AVE STE
A4
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

HEPATOLOGY

HASSANEIN, TAREK, MD†


Provider ID: N/A

 488 E VALLEY PKWY STE
313
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-SEP-24

INTERNAL MEDICINE


CHEN, ANDREW, MD

Provider ID: N/A

 2130 CITRACADO PKWY
STE 220
ESCONDIDO, CA 92029
Effective as of 01-MAR-23


EDE, KEKOA, MD

Provider ID: N/A

 425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JUL-22


EDE, KEKOA, MD

Provider ID: N/A

 460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-JUL-22


LIU, ANDREW, MD

Provider ID: N/A

 631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-SEP-23


LY, SOPHEAP, MD

Provider ID: N/A

 728 E VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-NOV-23

OLIVER, DEANNA, MD†


Provider ID: N/A

 488 E VALLEY PKWY STE
313
ESCONDIDO, CA 92025

Effective as of 01-MAR-22

PEARCE, DANIEL, DO


Provider ID: N/A

 460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-OCT-23

INTERVENTIONAL CARDIOLOGY


BAYAT, HAMED, MD

Provider ID: N/A

 2130 CITRACADO PKWY
STE 220
ESCONDIDO, CA 92029
Effective as of 01-MAR-23


GORWIT, JEFFREY, MD

Provider ID: N/A

 2130 CITRACADO PKWY
STE 220
ESCONDIDO, CA 92029*
Effective as of 01-MAR-23


RUBIO GARCIA, MANOLO, MD†

Provider ID: N/A

 488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025
Effective as of 01-DEC-22


RUBIO GARCIA, MANOLO, MD†

Provider ID: N/A

 488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025
Effective as of 01-MAY-23

SHAH, KULIN, MD†

Provider ID: N/A

 488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025
Effective as of 01-APR-23

C1. Lista de proveedores de la red Médico de atención especializada

SUDHAKAR, DEEPTHI, MD†

Provider ID: N/A

488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025
Effective as of 01-APR-23

VANICHSARN, CHRISTOPHER, MD

Provider ID: N/A

2130 CITRACADO PKWY
STE 220
ESCONDIDO, CA 92029
Effective as of 01-MAR-24

LICENSED CLINICAL SOCIAL WORKER

BECERRA, GABRIEL, LCSW

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-DEC-23

BECKMAN, KARI, LCSW

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-SEP-24

CHRISTENSEN, PATTI, LCSW

Provider ID: N/A

1002 E GRAND AVE
ESCONDIDO, CA 92025*
Effective as of 01-JAN-24

GUZZO, RICHARD, LCSW

Provider ID: N/A

1002 E GRAND AVE
ESCONDIDO, CA 92025*
Effective as of 01-JAN-24

HARRIS, LAURA, LCSW

Provider ID: N/A

1002 E GRAND AVE
ESCONDIDO, CA 92025*
Effective as of 01-JAN-24

HARRIS, LAURA, LCSW

Provider ID: N/A

1002 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-MAR-23

MAGOS, DANIEL, LCSW

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025*
Effective as of 01-JAN-24

MARTINEZ, NORAYMA, LCSW†

Provider ID: N/A

728 E VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-NOV-22

ROBLEDO, DAMIAN, LCSW

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-APR-23

ROBLEDO, DAMIAN, LCSW

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025*
Effective as of 01-JAN-24

THOMAS, PAULA, LCSW

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025*
Effective as of 01-JAN-24

THOMAS, PAULA, LCSW

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-APR-23

VERCHER, ROSHON, LCSW

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-SEP-24

MARRIAGE FAMILY THERAPIST

CABRERA, JOANNE, MFT

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-MAR-24

HOLLEMAN, KEVIN, DO

Provider ID: N/A

221 W CREST ST STE 205
ESCONDIDO, CA 92025
Effective as of 01-JUN-24

HOLLEMAN, KEVIN, DO

Provider ID: N/A

221 W CREST ST STE 205
ESCONDIDO, CA 92025
Effective as of 01-APR-23

PETROSIAN, MELISSA, MFT

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JUL-24

PRATHER, ALLYSON, MFT

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025*
Effective as of 01-APR-24

PRATHER, ALLYSON, MFT

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-MAR-24

C1. Lista de proveedores de la red Médico de atención especializada

TIZNADO, MONICA, MFT

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025*
Effective as of 01-JAN-24

NEPHROLOGY

AL-DAHHAN, ZAID, MD

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-AUG-23

AL-DAHHAN, ZAID, MD

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-FEB-24

AL-DAHHAN, ZAID, MD

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-MAY-23

AL-DAHHAN, ZAID, MD

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JUL-23

CHOUDRY, QASIM, MD

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-OCT-23

CHOUDRY, QASIM, MD

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-OCT-23

CHOUDRY, QASIM, MD

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JUL-23

CHOUDRY, QASIM, MD

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JUL-23

CHOUDRY, QASIM, MD

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-NOV-23

CHOUDRY, QASIM, MD

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-DEC-23

CHOUDRY, QASIM, MD

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-DEC-23

GREENSTEIN, JOSHUA, MD†

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JAN-21

GREENSTEIN, JOSHUA, MD

Provider ID: N/A

1955 CITRACADO PKWY
STE 301
ESCONDIDO, CA 92029
Effective as of 01-AUG-24

GREENSTEIN, JOSHUA, MD†

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JAN-21

GREENSTEIN, JOSHUA, MD†

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

HEBREO, JOSEPH, MD†

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

HEBREO, JOSEPH, MD†

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-MAR-17

HEBREO, JOSEPH, MD†

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JAN-21

HEBREO, JOSEPH, MD†

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JAN-21

KHAWAR, OSMAN, MD†

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JAN-21

KHAWAR, OSMAN, MD†

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JAN-21

C1. Lista de proveedores de la red Médico de atención especializada

KHAWAR, OSMAN, MD†

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

NEYAZ, MOHAMMED, DO†

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-JUL-22

NEYAZ, MOHAMMED, DO†

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-JAN-21

NEYAZ, MOHAMMED, DO†

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-JAN-21

NEUROLOGY

DELANEY, MICHAEL, MD†

Provider ID: N/A

1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-FEB-19

DELANEY, MICHAEL, MD†

Provider ID: N/A

1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-JAN-21

DELANEY, MICHAEL, MD†

Provider ID: N/A

1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-JAN-21

DROKER, BRIAN, MD

Provider ID: N/A

1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Teleservice
Effective as of 01-MAR-24

FARNSWORTH, WILLIAM, MD†

Provider ID: N/A

1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-NOV-21

FARNSWORTH, WILLIAM, MD†

Provider ID: N/A

1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-JUN-24

FARNSWORTH, WILLIAM, MD†

Provider ID: N/A

1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-FEB-22

FRISHBERG, BENJAMIN, MD†

Provider ID: N/A

1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-JAN-21

FRISHBERG, BENJAMIN, MD†

Provider ID: N/A

1955 CITRACADO PKWY

STE 102

ESCONDIDO, CA 92029
Effective as of 01-SEP-22

HAMILTON, ROSS, MD

Provider ID: N/A

1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029*
Effective as of 01-OCT-24

HUOTT, PATRICK, MD

Provider ID: N/A

1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-JUN-24

HUOTT, PATRICK, MD

Provider ID: N/A

1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-JUN-24

OH, IRENE, MD†

Provider ID: N/A

1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-JAN-21

OH, IRENE, MD†

Provider ID: N/A

1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-JAN-21

PADUGA, REMIA, MD†

Provider ID: N/A

1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-SEP-22

C1. Lista de proveedores de la red Médico de atención especializada

QUESNELL, TARA, DO†

Provider ID: N/A

1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Teleservice

Effective as of 01-JAN-24

SAVANI, AMAN, MD

Provider ID: N/A

1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-NOV-23

SAVANI, AMAN, MD

Provider ID: N/A

1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-JUN-24

SAVANI, AMAN, MD

Provider ID: N/A

1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-JUL-24

WANG, CHUNYANG, MD

Provider ID: N/A

1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-MAY-24

WANG, ANCHI, MD†

Provider ID: N/A

1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Teleservice

Effective as of 01-JAN-21

WANG, CHUNYANG, MD

Provider ID: N/A

1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-FEB-24

NEUROPHYSIOLOGY CLINICAL

QUESNELL, TARA, DO†

Provider ID: N/A

1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Teleservice

Effective as of 01-NOV-23

OBSTETRICS / GYNECOLOGY

BABKINA, NATALIA, MD

Provider ID: N/A

488 E VALLEY PKWY STE
308
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

BABKINA, NATALIA, MD

Provider ID: N/A

488 E VALLEY PKWY STE
310
ESCONDIDO, CA 92025
Effective as of 01-FEB-24

BABKINA, NATALIA, MD

Provider ID: N/A

1955 CITRACADO PKWY
STE 302
ESCONDIDO, CA 92029
Effective as of 01-MAY-24

BULLOCH, EDGAR, MD

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-JUL-23

BULLOCH, EDGAR, MD

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-JUL-23

BULLOCH, EDGAR, MD

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025*
Effective as of 01-JAN-24

CIZMAR, BRANISLAV, MD

Provider ID: N/A

488 E VALLEY PKWY STE
404
ESCONDIDO, CA 92025
Effective as of 01-FEB-24

CIZMAR, BRANISLAV, MD

Provider ID: N/A

488 E VALLEY PKWY STE
311
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

CIZMAR, BRANISLAV, MD

Provider ID: N/A

2130 CITRACADO PKWY
STE 220
ESCONDIDO, CA 92029
Effective as of 01-FEB-24

CIZMAR, BRANISLAV, MD†

Provider ID: N/A

1955 CITRACADO PKWY
STE 302
ESCONDIDO, CA 92029
Effective as of 01-MAY-24

HINSHAW, PAUL, DO†

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

1955 CITRACADO PKWY
STE 302
ESCONDIDO, CA 92029
Effective as of 01-SEP-22

HINSHAW, PAUL, DO†

Provider ID: N/A

488 E VALLEY PKWY STE
400
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

HUSKEY, DANA, MD

Provider ID: N/A

488 E VALLEY PKWY STE
310
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

OPHTHALMOLOGY

ABDALLAH, WALID, MD

Provider ID: N/A

1118 W VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-AUG-24

AVALLONE, THOMAS, MD†

Provider ID: N/A

700 W EL NORTE PKWY
ESCONDIDO, CA 92026
Effective as of 01-AUG-24

BINDER, NICHOLAS, MD†

Provider ID: N/A

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-DEC-21

BINDER, NICHOLAS, MD†

Provider ID: N/A

700 W EL NORTE PKWY
STE 200

ESCONDIDO, CA 92026
Effective as of 01-NOV-23

BINDER, NICHOLAS, MD†

Provider ID: N/A

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-APR-22

BINDER, NICHOLAS, MD†

Provider ID: N/A

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-DEC-23

BINDER, NICHOLAS, MD†

Provider ID: N/A

830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

BINDER, NICHOLAS, MD†

Provider ID: N/A

830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

CARRABY, ARNETT, MD

Provider ID: N/A

1118 W VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-JUN-24

CHOPLIN, NEIL, MD†

Provider ID: N/A

700 W EL NORTE PKWY
ESCONDIDO, CA 92026
Effective as of 01-SEP-15

CHOPLIN, NEIL, MD†

Provider ID: N/A

700 W EL NORTE PKWY
ESCONDIDO, CA 92026
Effective as of 01-JUL-21

DELENGOCKY, TAYSON, DO

Provider ID: N/A

1118 W VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-JUN-24

GOMEZ, JESSICA, MD

Provider ID: N/A

1118 W VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-JUL-24

HUDSON, HENRY, MD†

Provider ID: N/A

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-DEC-21

HUDSON, HENRY, MD†

Provider ID: N/A

830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

HUDSON, HENRY, MD†

Provider ID: N/A

830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

IP, COLIN, MD


Provider ID: N/A

1118 W VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-JUL-24

KYTASTY, CHRISTINA, DO


Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

 700 W EL NORTE PKWY
ESCONDIDO, CA 92026
Effective as of 01-MAY-24


MANI, MAJID, MD

Provider ID: N/A

 1118 W VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-JUL-24


MANI, MAJID, MD

Provider ID: N/A

 1118 W VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-AUG-24


MCDONNELL, EMMA, MD

Provider ID: N/A

 1118 W VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-JUL-24


MCGRAW, JOSEPH, MD†

Provider ID: N/A

 830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-SEP-22


MORRISON-REYES, JOSHUA, MD†

Provider ID: N/A

 830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-MAR-23


MORRISON-REYES, JOSHUA, MD†

Provider ID: N/A

 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-MAY-24


MORRISON-REYES, JOSHUA, MD†

Provider ID: N/A

 830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-SEP-22


MORRISON-REYES, JOSHUA, MD†

Provider ID: N/A

 830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-SEP-22


MORTON, ASA, MD†

Provider ID: N/A

 700 W EL NORTE PKWY
ESCONDIDO, CA 92026
Effective as of 01-NOV-21


MORTON, ASA, MD†

Provider ID: N/A

 700 W EL NORTE PKWY
ESCONDIDO, CA 92026
Effective as of 01-AUG-23


PAPASTERGIU, GEORGIOS, MD

Provider ID: N/A

 1118 W VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-JUL-24


PATEL, GITANE, MD†

Provider ID: N/A

 830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-SEP-22


PATEL, SARJAN, MD†

Provider ID: N/A

 830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-SEP-22


PEAIRS, JAMES, MD

Provider ID: N/A

 1118 W VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-JUL-24


PONS, MAURICIO, MD

Provider ID: N/A

 1118 W VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-JUN-24


PONS, MAURICIO, MD

Provider ID: N/A

 1118 W VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-JUL-24


PRABHU, SUJATA, MD†

Provider ID: N/A

 830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-AUG-20


PRABHU, SUJATA, MD†

Provider ID: N/A

 830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

PRABHU, SUJATA, MD†

Provider ID: N/A

 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-DEC-21

PRABHU, SUJATA, MD†

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-DEC-23

RAJSBAUM, MARTIN, MD

Provider ID: N/A

1118 W VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-JUL-24

RAJSBAUM, MARTIN, MD

Provider ID: N/A

1118 W VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-JUN-24

ROESKE, RICHMOND, MD

Provider ID: N/A

700 W EL NORTE PKWY
ESCONDIDO, CA 92026
Effective as of 01-MAR-24

SASSANI, PATRICK, MD

Provider ID: N/A

1118 W VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-JUL-24

SASSANI, PATRICK, MD

Provider ID: N/A

1118 W VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-MAY-24

SHEILS, CATHERINE, MD

Provider ID: N/A

700 W EL NORTE PKWY
ESCONDIDO, CA 92026
Effective as of 01-JAN-24

SHEILS, CATHERINE, MD

Provider ID: N/A

700 W EL NORTE PKWY

ESCONDIDO, CA 92026
Effective as of 01-JAN-24

SKAF, AYHAM, MD

Provider ID: N/A

1118 W VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-JUL-24

SKAF, AYHAM, MD

Provider ID: N/A

1118 W VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-JUN-24

ZHAO, TAILUN, MD

Provider ID: N/A

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-SEP-24

ZHAO, TAILUN, MD

Provider ID: N/A

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-JAN-24

ZHAO, TAILUN, MD

Provider ID: N/A

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-JUL-23

ZHAO, TAILUN, MD

Provider ID: N/A

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-NOV-23

OPTOMETRIST

AOTO, KIM, OD[†]

Provider ID: N/A

830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-JAN-21

AOTO, KIM, OD[†]

Provider ID: N/A

830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

AOTO, KIM, OD[†]

Provider ID: N/A

830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-JAN-21

AOTO, KIM, OD[†]

Provider ID: N/A

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-SEP-22

AOTO, KIM, OD[†]

Provider ID: N/A

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-DEC-21

DYER, SHARON, OD[†]

Provider ID: N/A

830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

EL-MOGHRABI, ROULA, OD

Provider ID: N/A


1118 W VALLEY PKWY

C1. Lista de proveedores de la red Médico de atención especializada

ESCONDIDO, CA 92025
Effective as of 01-JUL-24


JULAZADEH, SARA, OD

Provider ID: N/A

 700 W EL NORTE PKWY
ESCONDIDO, CA 92026
Effective as of 01-SEP-23


KHALIL, VADY, OD†

Provider ID: N/A

 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-NOV-22


KHALIL, VADY, OD†

Provider ID: N/A

 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-NOV-22


KHIEU, TINA, OD

Provider ID: N/A

 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-NOV-23


KHIEU, TINA, OD

Provider ID: N/A

 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-DEC-23

KOO, ANITA, OD

Provider ID: N/A

 1118 W VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-JUN-24

KOO, ANITA, OD

Provider ID: N/A

 1118 W VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-JUN-24


KOO, ANITA, OD

Provider ID: N/A

 1118 W VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-JUL-24


MARR, RYAN, OD

Provider ID: N/A

 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-JUL-24


SCOTT, JEFFREY, OD†

Provider ID: N/A

 830 W VALLEY PKWY STE
300
ESCONDIDO, CA 92025
Effective as of 01-JAN-22


TAUNTON, PHILIP, OD†

Provider ID: N/A

 700 W EL NORTE PKWY
ESCONDIDO, CA 92026
Effective as of 01-SEP-23


TAUNTON, PHILIP, OD†

Provider ID: N/A

 700 W EL NORTE PKWY
ESCONDIDO, CA 92026
Effective as of 01-SEP-21

THACH, QUEEN, OD

Provider ID: N/A

 1118 W VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-SEP-24

TONNU, ANH, OD†


Provider ID: N/A

 700 W EL NORTE PKWY

STE 200
ESCONDIDO, CA 92026
Effective as of 01-DEC-21


ZAIDI, NOORINA, OD

Provider ID: N/A

 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026*
Effective as of 01-OCT-24

ZVANUT, DONALD, OD


Provider ID: N/A

 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-AUG-24

OTOLARYNGOLOGY

SHAH, SAURABH, MD


Provider ID: N/A

 225 E 2ND AVE STE 101
ESCONDIDO, CA 92025
Effective as of 01-AUG-24

PEDIATRICS


FIGUEROA RODRIGUEZ, BRENDA, MD

Provider ID: N/A

 425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-MAY-24

FIGUEROA RODRIGUEZ, BRENDA, MD

Provider ID: N/A

 426 N DATE ST
ESCONDIDO, CA 92025*
Effective as of 01-AUG-24

PHYS MED/ REHAB PAIN MEDICINE

C1. Lista de proveedores de la red Médico de atención especializada

RICHARDSON, HENRY, MD†

Provider ID: N/A

1955 CITRACADO PKWY
STE 203
ESCONDIDO, CA 92029
Effective as of 01-MAR-23

PHYSICAL MEDICINE / REHABILITATION

TAHAEI, SEYED, MD†

Provider ID: N/A

215 S HICKORY ST STE 116
ESCONDIDO, CA 92025
Effective as of 01-OCT-22

PHYSICIANS ASSISTANT

ABSI, CHRISTIAN, PA

Provider ID: N/A

728 E VALLEY PKWY
ESCONDIDO, CA 92025*
Effective as of 01-OCT-24

BALDWIN, DONNA, PA†

Provider ID: N/A

1035 E GRAND AVE STE 101
ESCONDIDO, CA 92025
Effective as of 01-JAN-21

CHATFIELD, ALEXANDRA, PA†

Provider ID: N/A

1955 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
Effective as of 01-FEB-21

COLESON, PAMELA, PA

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-AUG-20

DANESHVAR, ABRAHAM, PA

Provider ID: N/A

631 E GRAND AVE
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-AUG-23

GANGJI, SHAZMIN, PA

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

GANGJI, SHAZMIN, PA

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-FEB-24

HUANG, STEPHANIE, PA†

Provider ID: N/A

1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-JAN-21

MEGALI, NICOLE, PA

Provider ID: N/A

1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Teleservice
Effective as of 01-APR-24

MEHTA, NOOPUR, PA

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-JUL-24

MEHTA, NOOPUR, PA

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-MAR-23

NIAKAMAL, EVAN, PA†

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

WANG, GEORGE, PA

Provider ID: N/A

488 E VALLEY PKWY STE
411
ESCONDIDO, CA 92025
Effective as of 01-MAY-24

WICKWARE, TRACY, PA

Provider ID: N/A

488 E VALLEY PKWY STE
411
ESCONDIDO, CA 92025
Effective as of 01-FEB-24

WICKWARE, TRACY, PA

Provider ID: N/A

426 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-MAY-23

WICKWARE, TRACY, PA†

Provider ID: N/A

728 E VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-APR-24

WICKWARE, TRACY, PA†

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-APR-24

WICKWARE, TRACY, PA†

Provider ID: N/A

728 E VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-MAY-23

WICKWARE, TRACY, PA†

Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-MAY-23

WRIGHT, DEREK, PA

Provider ID: N/A

1955 CITRACADO PKWY
ESCONDIDO, CA 92029
Effective as of 01-AUG-23

WRIGHT, DEREK, PA

Provider ID: N/A

1955 CITRACADO PKWY
ESCONDIDO, CA 92029
Effective as of 01-NOV-23

PODIATRIST

CHU, ANDREW, DPM†

Provider ID: N/A

215 S HICKORY ST STE 118
ESCONDIDO, CA 92025
Effective as of 01-JUN-24

FARMER, STEVEN, DPM†

Provider ID: N/A

728 E VALLEY PKWY
ESCONDIDO, CA 92025*
Effective as of 01-SEP-22

HAN, KYOUNG, DPM

Provider ID: N/A

215 S HICKORY ST STE 118
ESCONDIDO, CA 92025
Effective as of 01-JAN-22

LARKINS, PHILIP, DPM

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-MAR-23

MEYER, JOAN, DPM

Provider ID: N/A

1147 E GRAND AVE

ESCONDIDO, CA 92025
Effective as of 01-APR-24

MORRIS, JASON, DPM

Provider ID: N/A

736 E GRAND AVE
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-SEP-22

MORRIS, JASON, DPM

Provider ID: N/A

736 E GRAND AVE
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-JUN-21

MORRIS, JASON, DPM

Provider ID: N/A

736 E GRAND AVE
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-JAN-23

NEGRON, RICARDO, DPM

Provider ID: N/A

1001 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JUL-21

NEGRON, RICARDO, DPM

Provider ID: N/A

1001 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JUL-21

NEGRON, RICARDO, DPM

Provider ID: N/A

728 E VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

READ, TRENTON, DPM

Provider ID: N/A

215 S HICKORY ST STE 118
ESCONDIDO, CA 92025
Effective as of 01-APR-23

REDKAR, AVANTI, DPM

Provider ID: N/A

736 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

REDKAR, AVANTI, DPM

Provider ID: N/A

736 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-MAY-22

SMITH, COLLIN, DPM†

Provider ID: N/A

215 S HICKORY ST STE 118
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

SMITH, COLLIN, DPM†

Provider ID: N/A

215 S HICKORY ST STE 118
ESCONDIDO, CA 92025
Effective as of 01-FEB-21

SMITH, COLLIN, DPM†

Provider ID: N/A

215 S HICKORY ST STE 118
ESCONDIDO, CA 92025
Effective as of 01-DEC-21

TOUMA, ELIE, DPM†

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-FEB-23

TOUMA, ELIE, DPM

Provider ID: N/A

1045 E PENNSYLVANIA
AVE
ESCONDIDO, CA 92025

C1. Lista de proveedores de la red Médico de atención especializada

Teleservice

Effective as of 01-APR-23

PSYCHIATRY

BECKER, OLGA, MD

Provider ID: N/A

221 W CREST ST STE 205
ESCONDIDO, CA 92025

Effective as of 01-JUN-24

BECKER, OLGA, MD

Provider ID: N/A

221 W CREST ST STE 205
ESCONDIDO, CA 92025

Effective as of 01-JUN-24

CASTILLO, TIFFANY, MD†

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025

Effective as of 01-NOV-22

CASTILLO, TIFFANY, MD†

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025

Effective as of 01-NOV-22

CHAND, RAVINDRA, MD†

Provider ID: N/A

2185 CITRACADO PKWY
ESCONDIDO, CA 92029

Effective as of 01-JUL-21

CHAND, RAVINDRA, MD†

Provider ID: N/A

2185 CITRACADO PKWY
ESCONDIDO, CA 92029

Effective as of 01-JUL-21

EDE, KEKOA, MD

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025*

Effective as of 01-JAN-24

EDE, KEKOA, MD

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025

Effective as of 01-AUG-20

EDE, KEKOA, MD

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025

Effective as of 01-AUG-20

EDE, KEKOA, MD

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025*

Effective as of 01-JAN-24

EDE, KEKOA, MD

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025*

Effective as of 01-JAN-24

EDE, KEKOA, MD

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025*

Effective as of 01-JAN-24

EDE, KEKOA, MD

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025

Effective as of 01-AUG-20

EDE, KEKOA, MD

Provider ID: N/A

460 N ELM ST
ESCONDIDO, CA 92025

Effective as of 01-AUG-20

FANOUS, ASHRAF, MD

Provider ID: N/A

221 W CREST ST STE 205
ESCONDIDO, CA 92025

Effective as of 01-JUN-24

FANOUS, ASHRAF, MD

Provider ID: N/A

221 W CREST ST STE 205
ESCONDIDO, CA 92025

Effective as of 01-MAY-23

FANOUS, ASHRAF, MD

Provider ID: N/A

221 W CREST ST STE 205
ESCONDIDO, CA 92025

Effective as of 01-MAY-23

FANOUS, ASHRAF, MD

Provider ID: N/A

221 W CREST ST STE 205
ESCONDIDO, CA 92025

Effective as of 01-JUN-24

FU, KATHERINE, MD

Provider ID: N/A

704 E GRAND AVE
ESCONDIDO, CA 92025

Effective as of 01-FEB-24

FU, KATHERINE, MD

Provider ID: N/A

704 E GRAND AVE
ESCONDIDO, CA 92025

Effective as of 01-FEB-24

HOLLEMAN, KEVIN, DO

Provider ID: N/A

221 W CREST ST STE 205
ESCONDIDO, CA 92025

Effective as of 01-APR-23

HOLLEMAN, KEVIN, DO

Provider ID: N/A

221 W CREST ST STE 205
ESCONDIDO, CA 92025

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-JUN-24

HOLLEMAN, KEVIN, DO

Provider ID: N/A

221 W CREST ST STE 205
ESCONDIDO, CA 92025

Effective as of 01-APR-23

HOLLEMAN, KEVIN, DO

Provider ID: N/A

221 W CREST ST STE 205
ESCONDIDO, CA 92025

Effective as of 01-JUN-24

KARRIS, BIANCA, MD

Provider ID: N/A

221 W CREST ST STE 205
ESCONDIDO, CA 92025

Effective as of 01-JUN-24

KARRIS, BIANCA, MD

Provider ID: N/A

221 W CREST ST STE 205
ESCONDIDO, CA 92025

Effective as of 01-JUN-24

PARASHAR, ANUSHREE, MD

Provider ID: N/A

221 W CREST ST STE 205
ESCONDIDO, CA 92025

Effective as of 01-JUN-24

PARASHAR, ANUSHREE, MD

Provider ID: N/A

221 W CREST ST STE 205
ESCONDIDO, CA 92025

Effective as of 01-JUN-24

PARASHAR, ANUSHREE, MD

Provider ID: N/A

221 W CREST ST STE 205
ESCONDIDO, CA 92025

Effective as of 01-MAR-23

PARASHAR, ANUSHREE, MD

Provider ID: N/A

221 W CREST ST STE 205
ESCONDIDO, CA 92025

Effective as of 01-MAR-23

RODARTE, GABRIEL, MD†

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025*

Effective as of 01-JAN-24

RODARTE, GABRIEL, MD†

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025*

Effective as of 01-JAN-24

RODARTE, GABRIEL, MD†

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025

Effective as of 01-JUL-22

RODARTE, GABRIEL, MD†

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025*

Effective as of 01-JAN-24

RODARTE, GABRIEL, MD†

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025*

Effective as of 01-JAN-24

RODARTE, GABRIEL, MD†

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025

Effective as of 01-JUL-22

PSYCHOLOGIST

CALOCA, LAURA, PSYD

Provider ID: N/A

728 E VALLEY PKWY
ESCONDIDO, CA 92025

Effective as of 01-AUG-20

CALOCA, LAURA, PSYD

Provider ID: N/A

488 E VALLEY PKWY STE
411

ESCONDIDO, CA 92025*

Effective as of 01-JAN-24

CALOCA, LAURA, PSYD

Provider ID: N/A

488 E VALLEY PKWY STE
411

ESCONDIDO, CA 92025*

Effective as of 01-JAN-24

CALOCA, LAURA, PSYD

Provider ID: N/A

728 E VALLEY PKWY
ESCONDIDO, CA 92025

Effective as of 01-AUG-20

CARLTON-PENN, CORNELIA, PhD

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025

Effective as of 01-NOV-22

CARLTON-PENN, CORNELIA, PhD

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025*

Effective as of 01-JAN-24

CARLTON-PENN, CORNELIA, PhD

Provider ID: N/A

425 N DATE ST
ESCONDIDO, CA 92025*

Effective as of 01-JAN-24

C1. Lista de proveedores de la red Médico de atención especializada

**CARLTON-PENN, CORNELIA,
PhD**

Provider ID: N/A

📄 425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-NOV-22

CHAO, BRIAN, PhD

Provider ID: N/A

📄 460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-AUG-20

CHAO, BRIAN, PhD

Provider ID: N/A

📄 460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-AUG-20

**ESTRADA PATINO, ANGELA,
PSYD**

Provider ID: N/A

📄 460 N ELM ST
ESCONDIDO, CA 92025*
Effective as of 01-JAN-24

**ESTRADA PATINO, ANGELA,
PSYD**

Provider ID: N/A

📄 460 N ELM ST
ESCONDIDO, CA 92025*
Effective as of 01-JAN-24

GREENE, ERIC, PSYD

Provider ID: N/A

📄 425 N DATE ST
ESCONDIDO, CA 92025*
Effective as of 01-JAN-24

GREENE, ERIC, PSYD

Provider ID: N/A

📄 425 N DATE ST
ESCONDIDO, CA 92025*
Effective as of 01-JAN-24

**GUARDADO-SOTO, RAQUEL,
PhD**

Provider ID: N/A

📄 425 N DATE ST
ESCONDIDO, CA 92025*
Effective as of 01-FEB-24

**GUARDADO-SOTO, RAQUEL,
PhD**

Provider ID: N/A

📄 425 N DATE ST
ESCONDIDO, CA 92025*
Effective as of 01-FEB-24

MEJIAS, JUAN, PhD

Provider ID: N/A

📄 425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-AUG-20

MEJIAS, JUAN, PhD

Provider ID: N/A

📄 426 N DATE ST
ESCONDIDO, CA 92025*
Effective as of 01-FEB-24

MEJIAS, JUAN, PhD

Provider ID: N/A

📄 425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-AUG-20

MEJIAS, JUAN, PhD

Provider ID: N/A

📄 426 N DATE ST
ESCONDIDO, CA 92025*
Effective as of 01-FEB-24

SUOZZO, JOSEPH, PhD†

Provider ID: N/A

📄 425 N DATE ST
ESCONDIDO, CA 92025*
Effective as of 01-JAN-24

SUOZZO, JOSEPH, PhD†

Provider ID: N/A

📄 425 N DATE ST
ESCONDIDO, CA 92025*
Effective as of 01-JAN-24

**VALLEZ-BARLAM, ANDREA,
PhD**

Provider ID: N/A

📄 488 E VALLEY PKWY STE
404
ESCONDIDO, CA 92025
Effective as of 01-DEC-23

**VALLEZ-BARLAM, ANDREA,
PhD**

Provider ID: N/A

📄 488 E VALLEY PKWY STE
404
ESCONDIDO, CA 92025*
Effective as of 01-JAN-24

**VALLEZ-BARLAM, ANDREA,
PhD**

Provider ID: N/A

📄 488 E VALLEY PKWY STE
404
ESCONDIDO, CA 92025*
Effective as of 01-JAN-24

**VALLEZ-BARLAM, ANDREA,
PhD**

Provider ID: N/A

📄 488 E VALLEY PKWY STE
404
ESCONDIDO, CA 92025
Effective as of 01-DEC-23

**WOODWORTH, JENNIFER,
PSYD**

Provider ID: N/A

📄 425 N DATE ST
ESCONDIDO, CA 92025*
Effective as of 01-JAN-24

C1. Lista de proveedores de la red Médico de atención especializada

WOODWORTH, JENNIFER, PSYD

Provider ID: N/A

📍 425 N DATE ST
ESCONDIDO, CA 92025*
Effective as of 01-JAN-24

PULMONARY DISEASES

BENDER, FRANK, MD

Provider ID: N/A

📍 2125 CITRACADO PKWY
STE 230
ESCONDIDO, CA 92029
Effective as of 01-FEB-24

POPPER, STEVEN, MD

Provider ID: N/A

📍 2125 CITRACADO PKWY
STE 230
ESCONDIDO, CA 92029
Effective as of 01-JAN-24

QUAN, MICHELE GRACE, MD†

Provider ID: N/A

📍 2125 CITRACADO PKWY
STE 230
ESCONDIDO, CA 92029
Effective as of 01-SEP-22

RADIATION ONCOLOGY

COLEMAN, LORI, MD†

Provider ID: N/A

📍 2125 CITRACADO PKWY
STE 110
ESCONDIDO, CA 92029
Effective as of 01-JAN-21

FULLER, DONALD, MD†

Provider ID: N/A

📍 701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Effective as of 01-JAN-21

FULLER, DONALD, MD†

Provider ID: N/A

📍 701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Effective as of 01-MAY-24

FULLER, DONALD, MD†

Provider ID: N/A

📍 701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

FULLER, DONALD, MD†

Provider ID: N/A

📍 701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

FULLER, DONALD, MD†

Provider ID: N/A

📍 701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

IJAZ, TAHIR, MD†

Provider ID: N/A

📍 701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

IJAZ, TAHIR, MD†

Provider ID: N/A

📍 701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

IJAZ, TAHIR, MD†

Provider ID: N/A

📍 701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Effective as of 01-MAY-24

IJAZ, TAHIR, MD†

Provider ID: N/A

📍 701 E GRAND AVE STE 200

ESCONDIDO, CA 92025
Effective as of 01-JAN-21

JABBARI, SIAVASH, MD†

Provider ID: N/A

📍 2125 CITRACADO PKWY
STE 110
ESCONDIDO, CA 92029
Effective as of 01-OCT-22

SHIRAZI, REZA, MD†

Provider ID: N/A

📍 701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Effective as of 01-JAN-21

SHIRAZI, REZA, MD†

Provider ID: N/A

📍 701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Effective as of 01-MAY-24

SHIRAZI, REZA, MD†

Provider ID: N/A

📍 701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

SHIRAZI, REZA, MD†

Provider ID: N/A

📍 701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

SHIRAZI, REZA, MD†

Provider ID: N/A

📍 701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

VAKILIAN, SIAVOSH, MD†

Provider ID: N/A

📍 701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Teleservice

**C1. Lista de proveedores de la red
Médico de atención especializada**

Effective as of 01-SEP-22

VAKILIAN, SIAVOSH, MD†

Provider ID: N/A

701 E GRAND AVE STE 200
ESCONDIDO, CA 92025

Teleservice

Effective as of 01-JUL-21

VAKILIAN, SIAVOSH, MD†

Provider ID: N/A

701 E GRAND AVE STE 200
ESCONDIDO, CA 92025

Teleservice

Effective as of 01-MAY-21

VAKILIAN, SIAVOSH, MD†

Provider ID: N/A

701 E GRAND AVE STE 200
ESCONDIDO, CA 92025

Teleservice

Effective as of 01-MAY-24

VOLPP, PAUL, MD†

Provider ID: N/A

2125 CITRACADO PKWY
STE 110
ESCONDIDO, CA 92029

Effective as of 01-JAN-21

RADIOLOGY DIAGNOSTIC

VAKILIAN, SIAVOSH, MD†

Provider ID: N/A

701 E GRAND AVE STE 200
ESCONDIDO, CA 92025

Teleservice

Effective as of 01-SEP-22

**REGISTERED PHYSICAL
THERAPIST**

BOUTELLE, DAVID, PT

Provider ID: N/A

1815 E VALLEY PKWY STE 5
ESCONDIDO, CA 92027

Effective as of 01-FEB-24

BOUTELLE, BARBARA, PT

Provider ID: N/A

1815 E VALLEY PKWY STE 5
ESCONDIDO, CA 92027

Effective as of 01-FEB-24

FARRAR, COURTNEY, PT

Provider ID: N/A

1955 CITRACADO PKWY
STE 203
ESCONDIDO, CA 92029

Teleservice

Effective as of 01-JUL-23

FARRAR, COURTNEY, PT†

Provider ID: N/A

1340 W VALLEY PKWY STE
201
ESCONDIDO, CA 92029

Effective as of 01-JAN-21

MCGEE, JACQUELINE, PT

Provider ID: N/A

1815 E VALLEY PKWY STE 5
ESCONDIDO, CA 92027

Effective as of 01-JAN-21

SPEECH PATHOLOGIST

**CALDERON MORALES,
ASTRID, SP**

Provider ID: N/A

500 LA TERRAZA BLVD STE
150
ESCONDIDO, CA 92025

Effective as of 01-APR-24

DURNAN, CASSANDRA, SP

Provider ID: N/A

500 LA TERRAZA BLVD STE
150

ESCONDIDO, CA 92025

Effective as of 01-JUL-24

KOUKEYAN, KARIN, SP

Provider ID: N/A

500 LA TERRAZA BLVD STE
150

ESCONDIDO, CA 92025

Effective as of 01-JAN-23

SURGERY GENERAL

**CASILLAS BERUMEN, SERGIO,
MD**

Provider ID: N/A

1045 E PENNSYLVANIA
AVE
ESCONDIDO, CA 92025

Effective as of 01-FEB-24

**CASILLAS BERUMEN, SERGIO,
MD**

Provider ID: N/A

1045 E PENNSYLVANIA
AVE
ESCONDIDO, CA 92025

Effective as of 01-JUL-24

GROVE, JAY, MD†

Provider ID: N/A

2185 CITRACADO PKWY
ESCONDIDO, CA 92029

Teleservice

Effective as of 01-JAN-21

MOLDOVAN, STEFAN, MD†

Provider ID: N/A

1045 E PENNSYLVANIA
AVE
ESCONDIDO, CA 92025

Teleservice

Effective as of 01-MAR-24

MOLDOVAN, STEFAN, MD†

Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

1045 E PENNSYLVANIA AVE
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-MAR-24

MOLDOVAN, STEFAN, MD†
Provider ID: N/A

1045 E PENNSYLVANIA AVE
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-AUG-24

SURGERY GENERAL VASCULAR

CHAMMAS, JOSEPH, MD†
Provider ID: N/A

1045 E PENNSYLVANIA AVE
ESCONDIDO, CA 92025
Effective as of 01-JUL-24

CHANG, ALEXANDER, MD†
Provider ID: N/A

625 CITRACADO PKWY STE 203
ESCONDIDO, CA 92025
Effective as of 01-AUG-20

**MORENO MARTINEZ,
ENRIQUE, MD†**

Provider ID: N/A

1045 E PENNSYLVANIA AVE
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-MAR-24

NEMCEFF, DENNIS, MD†

Provider ID: N/A

625 CITRACADO PKWY STE 203

ESCONDIDO, CA 92025
Effective as of 01-JAN-21

SALLOUM, ALEXANDER, MD†

Provider ID: N/A

1045 E PENNSYLVANIA AVE
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-MAR-24

SALLOUM, ALEXANDER, MD†

Provider ID: N/A

1045 E PENNSYLVANIA AVE
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-MAR-24

SURGERY NEUROLOGICAL

HATEFI, DUSTIN, MD

Provider ID: N/A

2185 CITRACADO PKWY
ESCONDIDO, CA 92029
Effective as of 01-SEP-24

STERN, MARK, MD†

Provider ID: N/A

705 E OHIO AVE
ESCONDIDO, CA 92025
Effective as of 01-JAN-21

STERN, MARK, MD†

Provider ID: N/A

705 E OHIO AVE
ESCONDIDO, CA 92025
Effective as of 01-SEP-23

SURGERY ORTHOPEDIC

BARBA, DANIEL, MD

Provider ID: N/A

2130 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
Effective as of 01-MAR-23

KNUTSON, THOMAS, MD

Provider ID: N/A

2130 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
Effective as of 01-MAR-23

PALANCA, ARIEL, MD

Provider ID: N/A

2130 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
Effective as of 01-JAN-24

RAISZADEH, RAMIN, MD†

Provider ID: N/A

2125 CITRACADO PKWY
STE 310
ESCONDIDO, CA 92029
Effective as of 01-JAN-23

RAISZADEH, RAMIN, MD†

Provider ID: N/A

488 E VALLEY PKWY STE 316
ESCONDIDO, CA 92025
Effective as of 01-JAN-23

SHARP, LORRA, MD

Provider ID: N/A

2130 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
Effective as of 01-MAR-23

SURGERY THORACIC

LIN, YUAN, MD

Provider ID: N/A

2130 CITRACADO PKWY

C1. Lista de proveedores de la red Médico de atención especializada

STE 220
ESCONDIDO, CA 92029
Effective as of 01-MAR-23

UROLOGY

ANTHONY, JULIAN, MD

Provider ID: N/A
2130 CITRACADO PKWY
STE 210
ESCONDIDO, CA 92029
Effective as of 01-MAR-24

CARDIOVASCULAR DISEASE

SANGODKAR, SANDEEP, DO†

Provider ID: N/A
591 E ELDER ST STE C
FALLBROOK, CA 92028
Effective as of 01-MAR-20

SANGODKAR, SANDEEP, DO†

Provider ID: N/A
591 E ELDER ST STE C
FALLBROOK, CA 92028
Effective as of 01-MAR-20

CERTIFIED ACUPUNCTURIST

WACHNER, KRISTELYN, LAC†

Provider ID: N/A
1309 S MISSION RD
FALLBROOK, CA 92028
Effective as of 01-OCT-22

WACHNER, KRISTELYN, LAC†

Provider ID: N/A
1309 S MISSION RD
FALLBROOK, CA 92028
Effective as of 01-OCT-22

CERTIFIED NURSE

PRACTITIONER

KELLEHER, BRIDGET, NP

Provider ID: N/A
321 E ALVARADO ST
FALLBROOK, CA 92028
Effective as of 01-APR-24

STARICKA, MELISSA, NPF

Provider ID: N/A
1328 S MISSION RD
FALLBROOK, CA 92028
Effective as of 01-FEB-23

CHIROPRACTOR

BARTZ, PAUL, DC†

Provider ID: N/A
1309 S MISSION RD
FALLBROOK, CA 92028
Effective as of 01-JUL-22

FARSHLER, ANTHONY, DC†

Provider ID: N/A
1309 S MISSION RD
FALLBROOK, CA 92028
Effective as of 01-JUL-22

SHERIDAN, SHANE, DC

Provider ID: N/A
1309 S MISSION RD
FALLBROOK, CA 92028†
Effective as of 01-FEB-24

DERMATOLOGY

GILBOA, RUTH, MD†

Provider ID: N/A
1309 S MISSION RD STE A
FALLBROOK, CA 92028
Effective as of 01-JUN-21

ROSS, ANDREW, MD†

Provider ID: N/A
1309 S MISSION RD STE A

FALLBROOK, CA 92028
Effective as of 01-AUG-20

ROSS, ANDREW, MD†

Provider ID: N/A
1309 S MISSION RD STE A
FALLBROOK, CA 92028
Effective as of 01-JUL-22

SAMADY, JOSEPH, MD†

Provider ID: N/A
1309 S MISSION RD STE A
FALLBROOK, CA 92028
Effective as of 01-JUL-22

SAMADY, JOSEPH, MD†

Provider ID: N/A
1309 S MISSION RD STE A
FALLBROOK, CA 92028
Effective as of 01-AUG-20

SIRICHOTIRATANA, MELISSA, MD†

Provider ID: N/A
1309 S MISSION RD STE A
FALLBROOK, CA 92028
Effective as of 01-JAN-23

VENKAT, ARUN, MD†

Provider ID: N/A
1309 S MISSION RD STE A
FALLBROOK, CA 92028
Effective as of 01-JUN-21

WONG, DARRYL, MD†

Provider ID: N/A
1309 S MISSION RD STE A
FALLBROOK, CA 92028
Effective as of 01-JUN-21

GASTROENTEROLOGY

HONG, JOHN, MD†

Provider ID: N/A
521 E ELDER ST STE 104

C1. Lista de proveedores de la red Médico de atención especializada

FALLBROOK, CA 92028
Effective as of 01-JAN-21

INTERNAL MEDICINE

COX, JEREMY, DO

Provider ID: N/A

📍 591 E ELDER ST STE C
FALLBROOK, CA 92028
Effective as of 01-NOV-23

MOOLANI, UJJALA, MD

Provider ID: N/A

📍 591 E ELDER ST STE C
FALLBROOK, CA 92028
Effective as of 01-MAY-23

INTERVENTIONAL CARDIOLOGY

BISWAS, MIMI, MD

Provider ID: N/A

📍 591 E ELDER ST STE C
FALLBROOK, CA 92028
Teleservice
Effective as of 01-NOV-23

MESSENGER, BRADLEY, MD†

Provider ID: N/A

📍 591 E ELDER ST STE C
FALLBROOK, CA 92028
Effective as of 01-JAN-19

PAREKH, NIRAJ, MD†

Provider ID: N/A

📍 591 E ELDER ST STE C
FALLBROOK, CA 92028
Effective as of 01-SEP-24

SANGODKAR, SANDEEP, DO†

Provider ID: N/A

📍 591 E ELDER ST STE C
FALLBROOK, CA 92028
Effective as of 01-JAN-19

NEPHROLOGY

AL-DAHHAN, ZAID, MD

Provider ID: N/A

📍 591 E ELDER ST STE C
FALLBROOK, CA 92028
Effective as of 01-MAY-23

NAGASUNDER, ARABHI, DO

Provider ID: N/A

📍 591 E ELDER ST STE C
FALLBROOK, CA 92028
Teleservice
Effective as of 01-OCT-23

NEUROLOGY

UDDIN, MOHAMMAD, MD†

Provider ID: N/A

📍 577 E ELDER ST STE E
FALLBROOK, CA 92028
Effective as of 01-SEP-17

UDDIN, MOHAMMAD, MD†

Provider ID: N/A

📍 577 E ELDER ST STE E
FALLBROOK, CA 92028
Effective as of 01-OCT-20

UDDIN, MOHAMMAD, MD†

Provider ID: N/A

📍 577 E ELDER ST STE E
FALLBROOK, CA 92028
Effective as of 01-OCT-15

UDDIN, MOHAMMAD, MD†

Provider ID: N/A

📍 577 E ELDER ST STE E
FALLBROOK, CA 92028
Effective as of 01-OCT-20

UDDIN, MOHAMMAD, MD†

Provider ID: N/A

📍 577 E ELDER ST STE E
FALLBROOK, CA 92028

Effective as of 01-APR-22

UDDIN, MOHAMMAD, MD†

Provider ID: N/A

📍 577 E ELDER ST STE E
FALLBROOK, CA 92028
Effective as of 01-JUL-19

OBSTETRICS / GYNECOLOGY

STIGEN, THERESA, MD†

Provider ID: N/A

📍 577 E ELDER ST STE K
FALLBROOK, CA 92028
Effective as of 01-SEP-17

OPHTHALMOLOGY

DONALDSON, JARED, MD†

Provider ID: N/A

📍 521 E ELDER ST STE 102
FALLBROOK, CA 92028
Effective as of 01-SEP-22

DONALDSON, JARED, MD†

Provider ID: N/A

📍 521 E ELDER ST STE 102
FALLBROOK, CA 92028
Effective as of 01-DEC-22

DONALDSON, JARED, MD†

Provider ID: N/A

📍 521 E ELDER ST STE 102
FALLBROOK, CA 92028
Effective as of 01-JAN-23

JOHNSON, ROGER, MD†


Provider ID: N/A

📍 521 E ELDER ST STE 102
FALLBROOK, CA 92028
Effective as of 01-FEB-22

JOHNSON, ROGER, MD†


Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

 521 E ELDER ST STE 102
FALLBROOK, CA 92028
Effective as of 01-JAN-22

ZHOU, SIWEI, MD†


Provider ID: N/A

 521 E ELDER ST STE 102
FALLBROOK, CA 92028
Effective as of 01-JUL-23

OPTOMETRIST


ARCHIBALD, JOHN, OD†

Provider ID: N/A

 521 E ELDER ST STE 102
FALLBROOK, CA 92028
Effective as of 01-DEC-23


ARCHIBALD, JOHN, OD†

Provider ID: N/A

 521 E ELDER ST STE 102
FALLBROOK, CA 92028*
Effective as of 01-JUL-23


BULLUM, ANTHONY, OD†

Provider ID: N/A

 1328 S MISSION RD
FALLBROOK, CA 92028
Effective as of 01-JUL-22


COLEMAN, BROOKE, OD†

Provider ID: N/A

 521 E ELDER ST STE 102
FALLBROOK, CA 92028
Effective as of 01-FEB-22

COOPER, MICHAEL, OD†

Provider ID: N/A

 521 E ELDER ST STE 102
FALLBROOK, CA 92028
Effective as of 01-FEB-22

COOPER, MICHAEL, OD†

Provider ID: N/A


 521 E ELDER ST STE 102

FALLBROOK, CA 92028
Effective as of 01-SEP-22

PEDIATRICS


ROBINSON, DAISY, MD

Provider ID: N/A

 321 E ALVARADO ST
FALLBROOK, CA 92028
Effective as of 01-MAR-23


RONAN, KEVIN, MD

Provider ID: N/A

 321 E ALVARADO ST
FALLBROOK, CA 92028*
Effective as of 01-JUL-24

SMITH, LINDA, MD


Provider ID: N/A

 1328 S MISSION RD
FALLBROOK, CA 92028
Effective as of 01-JUL-24

PODIATRIST


NEGRON, RICARDO, DPM

Provider ID: N/A

 1309 S MISSION RD
FALLBROOK, CA 92028
Effective as of 01-JUL-21


NEGRON, RICARDO, DPM

Provider ID: N/A

 1309 S MISSION RD
FALLBROOK, CA 92028
Effective as of 01-JUL-21

NEGRON, RICARDO, DPM


Provider ID: N/A

 1309 S MISSION RD
FALLBROOK, CA 92028
Effective as of 01-JUL-22

ALLERGY IMMUNOLOGY


PANGANIBAN, CHRISTINE, MD†

Provider ID: N/A

 26672 PORTOLA PKWY STE
110
FOOTHILL RANCH, CA
92610
Effective as of 01-NOV-22


PANGANIBAN, CHRISTINE, MD†

Provider ID: N/A

 26672 PORTOLA PKWY STE
110
FOOTHILL RANCH, CA
92610
Effective as of 01-NOV-22


YOSHII, DENIS, DO†

Provider ID: N/A

 26750 TOWNE CENTRE DR
STE D
FOOTHILL RANCH, CA
92610
Effective as of 01-APR-23


YOSHII, DENIS, DO†

Provider ID: N/A

 26750 TOWNE CENTRE DR
STE D
FOOTHILL RANCH, CA
92610
Effective as of 01-JAN-18

YOSHII, DENIS, DO†

Provider ID: N/A

 26750 TOWNE CENTRE DR
STE D
FOOTHILL RANCH, CA
92610
Effective as of 01-APR-23

CERTIFIED NURSE PRACTITIONER

**C1. Lista de proveedores de la red
Médico de atención especializada**

KHAN, AHAD, NP

Provider ID: N/A

26672 PORTOLA PKWY
FOOTHILL RANCH, CA
92610

Effective as of 01-MAY-23

LIU, GRACE, NP

Provider ID: N/A

26672 PORTOLA PKWY STE
104
FOOTHILL RANCH, CA
92610

Effective as of 01-MAY-23

LIU, GRACE, NP

Provider ID: N/A

26672 PORTOLA PKWY STE
104
FOOTHILL RANCH, CA
92610

Effective as of 01-MAY-23

VISHEH, PARYA, NP

Provider ID: N/A

26730 TOWNE CENTRE DR
STE 102
FOOTHILL RANCH, CA
92610

Effective as of 01-MAY-24

**CERTIFIED REGISTERED
NURSE MIDWIFE**

**MCDANIEL-DAVIS, SHAYNA,
CRNM**

Provider ID: N/A

26672 PORTOLA PKWY STE
108
FOOTHILL RANCH, CA
92610

Effective as of 01-MAY-24

**MCDANIEL-DAVIS, SHAYNA,
CRNM**

Provider ID: N/A

26672 PORTOLA PKWY STE
108
FOOTHILL RANCH, CA
92610

Effective as of 01-MAY-24

CHIROPRACTOR

TUREK, PAUL, DC

Provider ID: N/A

27462 PORTOLA PKWY STE
201
FOOTHILL RANCH, CA
92610

Effective as of 01-JUL-21

DERMATOLOGY

AHADIAT, OMEED, MD

Provider ID: N/A

26700 TOWNE CENTRE DR
STE 170
FOOTHILL RANCH, CA
92610

Effective as of 01-DEC-23

**ENDOCRINOLOGY
METABOLISM DIABETES**

AHL, SCOTT, DO†

Provider ID: N/A

26672 PORTOLA PKWY STE
104
FOOTHILL RANCH, CA
92610

Effective as of 01-OCT-22

GASTROENTEROLOGY

ASHBY, KEVIN, MD

Provider ID: N/A

26700 TOWNE CENTRE DR
STE 100
FOOTHILL RANCH, CA

92610

Effective as of 01-MAR-20

ASHRAF, HEBA, MD

Provider ID: N/A

26672 PORTOLA PKWY STE
104
FOOTHILL RANCH, CA
92610

Effective as of 01-SEP-22

ASHRAF, HEBA, MD

Provider ID: N/A

26672 PORTOLA PKWY STE
104
FOOTHILL RANCH, CA
92610

Effective as of 01-SEP-22

ASHRAF, HEBA, MD

Provider ID: N/A

26672 PORTOLA PKWY STE
104
FOOTHILL RANCH, CA
92610

Effective as of 01-SEP-22

ASHRAF, HEBA, MD

Provider ID: N/A

26672 PORTOLA PKWY STE
104
FOOTHILL RANCH, CA
92610

Effective as of 01-JAN-23

ASHRAF, HEBA, MD

Provider ID: N/A

26672 PORTOLA PKWY STE
104
FOOTHILL RANCH, CA
92610

Effective as of 01-NOV-22

ASHRAF, HEBA, MD

Provider ID: N/A

**C1. Lista de proveedores de la red
Médico de atención especializada**

26672 PORTOLA PKWY STE 104
FOOTHILL RANCH, CA
92610

Effective as of 01-NOV-22

ASHRAF, HEBA, MD

Provider ID: N/A

26672 PORTOLA PKWY STE 104
FOOTHILL RANCH, CA
92610

Effective as of 01-OCT-23

BEMANIAN, SHAHROOZ, MD

Provider ID: N/A

26672 PORTOLA PKWY STE 104
FOOTHILL RANCH, CA
92610

Effective as of 01-OCT-23

BEMANIAN, SHAHROOZ, MD

Provider ID: N/A

26672 PORTOLA PKWY STE 104
FOOTHILL RANCH, CA
92610

Effective as of 01-JAN-23

LEE, PAUL, MD

Provider ID: N/A

26672 PORTOLA PKWY STE 104
FOOTHILL RANCH, CA
92610

Effective as of 01-OCT-23

OMAN, MATTHEW, MD

Provider ID: N/A

26672 PORTOLA PKWY STE 104
FOOTHILL RANCH, CA
92610

Effective as of 01-OCT-23

YU, VICTOR, MD

Provider ID: N/A

26672 PORTOLA PKWY STE 104
FOOTHILL RANCH, CA
92610

Effective as of 01-OCT-23

YU, VICTOR, MD

Provider ID: N/A

26672 PORTOLA PKWY STE 104
FOOTHILL RANCH, CA
92610

Effective as of 01-JAN-23

***OBSTETRICS /
GYNECOLOGY***

DAVIS, STEPHANIE, MD

Provider ID: N/A

26672 PORTOLA PKWY STE 108
FOOTHILL RANCH, CA
92610

Effective as of 01-FEB-23

DEJBAKHS, SHEILA, MD

Provider ID: N/A

26672 PORTOLA PKWY STE 180
FOOTHILL RANCH, CA
92610

Effective as of 01-OCT-22

MILLER, JAMIE, MD

Provider ID: N/A

26672 PORTOLA PKWY STE 108
FOOTHILL RANCH, CA
92610

Effective as of 01-NOV-23

PETERS, AMY, DO

Provider ID: N/A

26672 PORTOLA PKWY STE 108
FOOTHILL RANCH, CA
92610

Effective as of 01-NOV-23

PETERS, AMY, DO†

Provider ID: N/A

26672 PORTOLA PKWY STE 180
FOOTHILL RANCH, CA
92610

Effective as of 01-OCT-22

PRICE, KERRY, MD

Provider ID: N/A

26672 PORTOLA PKWY STE 180
FOOTHILL RANCH, CA
92610

Effective as of 01-OCT-22

PHYSICIANS ASSISTANT

VU, BAO-KHOI, PA†

Provider ID: N/A

26781 PORTOLA PKWY STE 4E
FOOTHILL RANCH, CA
92610

Effective as of 01-SEP-20

WU, VANNA, PA

Provider ID: N/A

26672 PORTOLA PKWY STE 104
FOOTHILL RANCH, CA
92610

Effective as of 01-MAR-24

WU, VANNA, PA

Provider ID: N/A

26672 PORTOLA PKWY STE 104
FOOTHILL RANCH, CA

C1. Lista de proveedores de la red Médico de atención especializada

92610
Effective as of 01-MAR-24

WU, VANNA, PA

Provider ID: N/A

26672 PORTOLA PKWY STE
104
FOOTHILL RANCH, CA
92610

Effective as of 01-MAR-24

WU, VANNA, PA

Provider ID: N/A

26672 PORTOLA PKWY STE
104
FOOTHILL RANCH, CA
92610

Effective as of 01-MAR-24

PULMONARY DISEASES

FRANKLIN RUTLAND, CEDRIC, MD†

Provider ID: N/A

26672 PORTOLA PKWY
FOOTHILL RANCH, CA
92610

Effective as of 01-JAN-21

RHEUMATOLOGY

MAHMOOD, FARAH, MD†

Provider ID: N/A

26700 TOWNE CENTRE DR
STE 165
FOOTHILL RANCH, CA
92610

Effective as of 01-OCT-19

SURGERY GENERAL

SALEM, YASSER, MD†

Provider ID: N/A

26781 PORTOLA PKWY STE
4E

FOOTHILL RANCH, CA
92610

Effective as of 01-AUG-20

SALEM, YASSER, MD†

Provider ID: N/A

26781 PORTOLA PKWY STE
4E
FOOTHILL RANCH, CA
92610

Effective as of 01-AUG-13

SALEM, YASSER, MD†

Provider ID: N/A

26781 PORTOLA PKWY STE
4E
FOOTHILL RANCH, CA
92610

Effective as of 01-AUG-17

SURGERY PLASTIC

DANESHMAND, HOOTAN, MD

Provider ID: N/A

27462 PORTOLA PKWY STE
100
FOOTHILL RANCH, CA
92610

Effective as of 01-APR-11

DANESHMAND, HOOTAN, MD

Provider ID: N/A

27462 PORTOLA PKWY STE
100
FOOTHILL RANCH, CA
92610

Effective as of 01-JUN-24

DANESHMAND, HOOTAN, MD

Provider ID: N/A

27462 PORTOLA PKWY STE
100
FOOTHILL RANCH, CA
92610

Effective as of 01-MAY-12

DANESHMAND, HOOTAN, MD

Provider ID: N/A

27462 PORTOLA PKWY STE
100
FOOTHILL RANCH, CA
92610

Effective as of 01-JAN-18

ADDICTIVE MEDICINE

PENT, MICHELLE, MD

Provider ID: N/A

1030 E FLORIDA AVE
HEMET, CA 92543

Effective as of 01-SEP-24

ALLERGY IMMUNOLOGY

BROWN, HOSEA, MD†

Provider ID: N/A

1000 E LATHAM AVE STE B
HEMET, CA 92543

Effective as of 01-FEB-22

BROWN, HOSEA, MD†

Provider ID: N/A

1000 E LATHAM AVE STE B
HEMET, CA 92543

Effective as of 01-MAY-15

BROWN, HOSEA, MD†

Provider ID: N/A

1000 E LATHAM AVE STE B
HEMET, CA 92543

Effective as of 01-JUL-23

SALEH, HANA, MD†

Provider ID: N/A

391 N SAN JACINTO ST
HEMET, CA 92543

Effective as of 01-SEP-15

ANESTHESIOLOGY

DORAISWAMY, ARUL, MD†

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

1264 E LATHAM AVE
HEMET, CA 92543
Effective as of 01-MAY-15

DORAISWAMY, ARUL, MD†

Provider ID: N/A

1264 E LATHAM AVE
HEMET, CA 92543
Effective as of 01-MAY-15

HYUN, SUZANNE, MD

Provider ID: N/A

3989 W STETSON AVE STE
102
HEMET, CA 92545
Effective as of 01-MAR-24

JEDAMSKI, WALDTRAUT, MD

Provider ID: N/A

1264 E LATHAM AVE
HEMET, CA 92543
Effective as of 01-OCT-19

PANG, GARY, MD†

Provider ID: N/A

3989 W STETSON AVE STE
102
HEMET, CA 92545
Effective as of 01-MAR-24

ANESTHESIOLOGY PAIN MANAGEMENT

CHEN, HAMILTON, MD†

Provider ID: N/A

3989 W STETSON AVE STE
102
HEMET, CA 92545
Effective as of 01-MAY-21

DORAISWAMY, ARUL, MD†

Provider ID: N/A

1264 E LATHAM AVE
HEMET, CA 92543

Effective as of 01-NOV-17

DORAISWAMY, ARUL, MD†

Provider ID: N/A

1264 E LATHAM AVE
HEMET, CA 92543
Effective as of 01-NOV-14

GUIANG, RAINIER, MD†

Provider ID: N/A

3989 W STETSON AVE STE
102
HEMET, CA 92545
Effective as of 01-MAR-24

GUIANG, RAINIER, MD†

Provider ID: N/A

3989 W STETSON AVE STE
102
HEMET, CA 92545
Effective as of 01-MAY-21

GUIANG, RAINIER, MD†

Provider ID: N/A

3989 W STETSON AVE STE
102
HEMET, CA 92545
Effective as of 01-JUL-24

HYUN, SUZANNE, MD

Provider ID: N/A

3989 W STETSON AVE STE
102
HEMET, CA 92545
Effective as of 01-JUL-24

KANU, ABDUL, MD

Provider ID: N/A

1011 E DEVONSHIRE AVE
HEMET, CA 92543
Teleservice

Effective as of 01-JUN-21

LEIER, TIM, MD

Provider ID: N/A

1011 E DEVONSHIRE AVE
STE 203
HEMET, CA 92543
Effective as of 01-SEP-19

PANG, GARY, MD†

Provider ID: N/A

3989 W STETSON AVE STE
102
HEMET, CA 92545
Effective as of 01-JUL-24

PANG, GARY, MD†

Provider ID: N/A

3989 W STETSON AVE STE
102
HEMET, CA 92545
Effective as of 01-MAY-21

CARDIOVASCULAR DISEASE

AGARWAL, ASHOK, MD

Provider ID: N/A

136 S SAN JACINTO ST
HEMET, CA 92543
Effective as of 01-JUL-23

AGGARWAL, SAURABH, MD†

Provider ID: N/A

949 CALHOUN PL STE D
HEMET, CA 92543
Effective as of 01-JUL-24

AGGARWAL, SAURABH, MD†

Provider ID: N/A

949 CALHOUN PL STE D
HEMET, CA 92543
Effective as of 01-AUG-22


AGGARWAL, SAURABH, MD†

Provider ID: N/A


949 CALHOUN PL STE D
HEMET, CA 92543
Effective as of 01-DEC-21

**C1. Lista de proveedores de la red
Médico de atención especializada**


AGGARWAL, SAURABH, MD†

Provider ID: N/A
 949 CALHOUN PL STE D
 HEMET, CA 92543
 Effective as of 01-AUG-22

AMIN, JATIN, MD†

Provider ID: N/A
 3853 W STETSON AVE STE
 104
 HEMET, CA 92545
 Teleservice
 Effective as of 01-JUL-24


AMIN, JATIN, MD†

Provider ID: N/A
 3853 W STETSON AVE STE
 104
 HEMET, CA 92545
 Teleservice
 Effective as of 01-MAY-21

ATTIA, NADER, DO†

Provider ID: N/A
 3853 W STETSON AVE STE
 104
 HEMET, CA 92545
 Teleservice
 Effective as of 01-AUG-24

ATTIA, NADER, DO†


Provider ID: N/A
 3853 W STETSON AVE STE
 104
 HEMET, CA 92545
 Teleservice
 Effective as of 01-MAY-21

ATTIA, NADER, DO†

Provider ID: N/A
 3853 W STETSON AVE STE
 104
 HEMET, CA 92545
 Teleservice

Effective as of 01-JUL-22


ATTIA, NADER, DO†

Provider ID: N/A
 3853 W STETSON AVE STE
 104
 HEMET, CA 92545
 Teleservice
 Effective as of 01-MAR-20


ATTIA, NADER, DO†

Provider ID: N/A
 3853 W STETSON AVE STE
 104
 HEMET, CA 92545
 Teleservice
 Effective as of 01-SEP-18


BISWAS, MIMI, MD†

Provider ID: N/A
 3853 W STETSON AVE STE
 104
 HEMET, CA 92545
 Teleservice
 Effective as of 01-SEP-18


COX, JEREMY, DO†

Provider ID: N/A
 3853 W STETSON AVE STE
 104
 HEMET, CA 92545
 Effective as of 01-SEP-18

GOKHROO, RAHUL, MD†


Provider ID: N/A
 949 CALHOUN PL STE D
 HEMET, CA 92543
 Effective as of 01-JUL-24

**GRANT ANDERSON, BETTY,
MD†**


Provider ID: N/A
 949 CALHOUN PL STE D
 HEMET, CA 92543

Effective as of 01-JUL-24


**GRANT ANDERSON, BETTY,
MD†**

Provider ID: N/A
 949 CALHOUN PL STE D
 HEMET, CA 92543
 Effective as of 01-AUG-23


MAPLETON, SHARINA, DO

Provider ID: N/A
 1030 E FLORIDA AVE
 HEMET, CA 92543*
 Effective as of 01-NOV-24


PAREKH, NIRAJ, MD†

Provider ID: N/A
 3853 W STETSON AVE STE
 104
 HEMET, CA 92545
 Teleservice
 Effective as of 01-SEP-24

PAREKH, NIRAJ, MD†

Provider ID: N/A
 3853 W STETSON AVE STE
 104
 HEMET, CA 92545
 Teleservice
 Effective as of 01-SEP-24

PAREKH, NIRAJ, MD†

Provider ID: N/A
 3853 W STETSON AVE STE
 104
 HEMET, CA 92545
 Teleservice
 Effective as of 01-SEP-24

RASTOGI, ANIL, MD†

Provider ID: N/A
 1275 E LATHAM AVE STE A
 HEMET, CA 92543
 Effective as of 01-MAY-15

CI. Lista de proveedores de la red Médico de atención especializada

RASTOGI, ANIL, MD†

Provider ID: N/A

📍 1275 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-SEP-09

RASTOGI, ANIL, MD†

Provider ID: N/A

📍 1275 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-SEP-00

RASTOGI, ANISHA, MD†

Provider ID: N/A

📍 1275 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-AUG-20

RASTOGI, ANISHA, MD†

Provider ID: N/A

📍 1275 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-FEB-21

RIVA, GREGORY, MD†

Provider ID: N/A

📍 1275 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-MAY-15

CERTIFIED NURSE PRACTITIONER

ABAYA, HONEYLYNN, NP

Provider ID: N/A

📍 3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-OCT-23

ADEDAYO, TOLULOPE, NP†

Provider ID: N/A

📍 422 N SAN JACINTO ST STE
A

HEMET, CA 92543
Effective as of 01-APR-21

ADEDAYO, TOLULOPE, NP

Provider ID: N/A

📍 1030 E FLORIDA AVE
HEMET, CA 92543
Effective as of 01-FEB-24

ADEGBITE, ADEKUNLE, NP†

Provider ID: N/A

📍 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-APR-23

ADEGBITE, ADEKUNLE, NP†

Provider ID: N/A

📍 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-APR-23

ADEGBITE, ADEKUNLE, NP†

Provider ID: N/A

📍 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-APR-23

ADEGBITE, ADEKUNLE, NP†

Provider ID: N/A

📍 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-SEP-22

ADEGBITE, ADEKUNLE, NP†

Provider ID: N/A

📍 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-SEP-22

AGUILAR, MICHELLE, NP†

Provider ID: N/A

📍 1000 E LATHAM AVE STE G
HEMET, CA 92543
Effective as of 01-MAY-21

AMJAD WARYAM, ASHEE AMJAD, NP†

Provider ID: N/A

📍 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-AUG-21

AMJAD WARYAM, ASHEE AMJAD, NP†

Provider ID: N/A

📍 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-AUG-21

AMJAD WARYAM, ASHEE AMJAD, NP†

Provider ID: N/A

📍 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-DEC-22

AMJAD WARYAM, ASHEE AMJAD, NP†

Provider ID: N/A

📍 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-DEC-22

ANEKWE, CHINWE, NP

Provider ID: N/A

📍 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-MAY-23

ANEKWE, CHINWE, NP

Provider ID: N/A

📍 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-MAY-23

BAKER, SERENA, NP

Provider ID: N/A

📍 3989 W STETSON AVE STE
202

C1. Lista de proveedores de la red Médico de atención especializada

HEMET, CA 92545
Effective as of 01-JUL-23

BAKER, SERENA, NP

Provider ID: N/A

📍 3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-JUL-23

BASA, GRACIOUS, NPF

Provider ID: N/A

📍 901 S STATE ST STE 600
HEMET, CA 92543
Effective as of 01-JUN-24

BEDFORD, RONALD, NP†

Provider ID: N/A

📍 850 E LATHAM AVE STE 201
HEMET, CA 92543
Effective as of 01-SEP-22

BEDFORD, RONALD, NP†

Provider ID: N/A

📍 850 E LATHAM AVE STE 201
HEMET, CA 92543
Effective as of 01-SEP-22

BRAR, SUKHDEEP, NP

Provider ID: N/A

📍 255 N GILBERT ST BLDG B4
HEMET, CA 92543
Effective as of 01-SEP-21

BRASKET, ADAM, NP†

Provider ID: N/A

📍 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-NOV-21

BRASKET, ADAM, NP†

Provider ID: N/A

📍 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-DEC-22

BRASKET, ADAM, NP†

Provider ID: N/A

📍 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-DEC-22

EDEM, MARY, NP†

Provider ID: N/A

📍 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-MAR-21

HUERTA, CARMEN, NP†

Provider ID: N/A

📍 850 E LATHAM AVE STE 201
HEMET, CA 92543
Effective as of 01-OCT-22

HUERTA, CARMEN, NP†

Provider ID: N/A

📍 850 E LATHAM AVE STE 201
HEMET, CA 92543
Effective as of 01-AUG-22

HUERTA, CARMEN, NP†

Provider ID: N/A

📍 850 E LATHAM AVE STE 201
HEMET, CA 92543
Effective as of 01-AUG-22

HUERTA, CARMEN, NP†

Provider ID: N/A

📍 850 E LATHAM AVE STE 201
HEMET, CA 92543
Effective as of 01-DEC-22

HUERTA, CARMEN, NP†

Provider ID: N/A

📍 850 E LATHAM AVE STE 201
HEMET, CA 92543
Effective as of 01-AUG-22

HUERTA, CARMEN, NP†

Provider ID: N/A

📍 850 E LATHAM AVE STE 201
HEMET, CA 92543
Effective as of 01-AUG-22

IGWE, CHINWENDU, NP†

Provider ID: N/A

📍 3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-AUG-19

IGWE, CHINWENDU, NP†

Provider ID: N/A

📍 3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-JAN-20

IHEMEDU, MAGNUS, NPF

Provider ID: N/A

📍 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-APR-23

IHEMEDU, MAGNUS, NPF

Provider ID: N/A

📍 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-APR-23

IHEMEDU, AMARACHI, NPF

Provider ID: N/A

📍 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-APR-23

IHEMEDU, AMARACHI, NPF

Provider ID: N/A

📍 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-APR-23

IHEMEDU, MAGNUS, NPF


Provider ID: N/A

📍 162 N SANTA FE ST


**C1. Lista de proveedores de la red
Médico de atención especializada**

HEMET, CA 92543
Effective as of 01-APR-23


IHEMEDU, AMARACHI, NPF

Provider ID: N/A
 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-APR-23


IHEMEDU, MAGNUS, NPF

Provider ID: N/A
 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-DEC-22


IHEMEDU, MAGNUS, NPF

Provider ID: N/A
 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-DEC-22


JOHNSON, KIMBERLY, NP†

Provider ID: N/A
 3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-SEP-22

JOHNSON, KIMBERLY, NP†

Provider ID: N/A
 3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-JAN-23

JOHNSON, KIMBERLY, NP†


Provider ID: N/A
 3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-SEP-22

JOHNSON, KIMBERLY, NP†


Provider ID: N/A
 3989 W STETSON AVE STE

202
HEMET, CA 92545
Effective as of 01-SEP-22


JOHNSON, KIMBERLY, NP†

Provider ID: N/A
 3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-JUL-23


JOHNSON, KIMBERLY, NP†

Provider ID: N/A
 3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-JUL-23


JOHNSON, KIMBERLY, NP†

Provider ID: N/A
 3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-JUL-23


JOHNSON, KIMBERLY, NP†

Provider ID: N/A
 3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-SEP-22


JOHNSON, KIMBERLY, NP†

Provider ID: N/A
 3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-JUL-23


JOHNSON, KIMBERLY, NP†

Provider ID: N/A
 3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-MAY-23


JOHNSON, KIMBERLY, NP†

Provider ID: N/A
 3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-MAY-23


JONES, LAKESHA, NP†

Provider ID: N/A
 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-DEC-22


JONES, LAKESHA, NP†

Provider ID: N/A
 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-DEC-22


KUMAR, NINA, NP

Provider ID: N/A
 1030 E FLORIDA AVE
HEMET, CA 92543
Effective as of 01-FEB-24


KUMAR, NINA, NP†

Provider ID: N/A
 422 N SAN JACINTO ST
HEMET, CA 92543
Effective as of 01-APR-21

LAWHORN, CHRISTA, NPF

Provider ID: N/A
 1701 E FLORIDA AVE
HEMET, CA 92544
Effective as of 01-JAN-24

LE, NGUYEN, NP

Provider ID: N/A
 1030 E FLORIDA AVE
HEMET, CA 92543
Effective as of 01-FEB-24

LEANO, ANYLOU, NP†

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

📍 1264 E LATHAM AVE
HEMET, CA 92543
Effective as of 01-JUL-17

LOWRY, DAVID, NP

Provider ID: N/A

📍 2390 E FLORIDA AVE STE
101
HEMET, CA 92544
Effective as of 01-AUG-24

MELOT, KAREN, NP

Provider ID: N/A

📍 1225 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-DEC-20

MELOT, KAREN, NP

Provider ID: N/A

📍 1225 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-DEC-20

MELOT, KAREN, NP

Provider ID: N/A

📍 1225 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-DEC-20

MILLON, TINA, NPF

Provider ID: N/A

📍 1225 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-SEP-23

MILLON, TINA, NPF

Provider ID: N/A

📍 1225 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-SEP-23

MILLON, TINA, NPF

Provider ID: N/A

📍 1225 E LATHAM AVE STE A

HEMET, CA 92543

Effective as of 01-SEP-23

NGUYEN, ANDY, NP†

Provider ID: N/A

📍 2390 E FLORIDA AVE STE
104
HEMET, CA 92544
Effective as of 01-JUL-21

NGUYEN, ANDY, NP†

Provider ID: N/A

📍 2390 E FLORIDA AVE STE
104
HEMET, CA 92544
Effective as of 01-JUL-21

O'NEIL, NICOLE, NP†

Provider ID: N/A

📍 1701 E FLORIDA AVE
HEMET, CA 92544
Effective as of 01-MAR-22

ONUOHA, NOJA, NP†

Provider ID: N/A

📍 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-MAR-23

ONUOHA, NOJA, NP†

Provider ID: N/A

📍 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-MAR-23

ONUOHA, NOJA, NP†

Provider ID: N/A

📍 162 N SANTA FE ST
HEMET, CA 92543*
Effective as of 01-NOV-22

ONUOHA, NOJA, NP†

Provider ID: N/A

📍 162 N SANTA FE ST
HEMET, CA 92543*

Effective as of 01-NOV-22

PAULHUS, PATRICIA, NP†

Provider ID: N/A

📍 3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-MAR-20

PAULHUS, PATRICIA, NP†

Provider ID: N/A

📍 3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-MAR-20

PAULHUS, PATRICIA, NP†

Provider ID: N/A

📍 3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-MAR-20

RATAJCZAK, CELESTE, NP

Provider ID: N/A

📍 1264 E LATHAM AVE
HEMET, CA 92543
Effective as of 01-FEB-24

SANCHEZ, YAHAIRA, NP†

Provider ID: N/A

📍 1003 E FLORIDA AVE STE
101
HEMET, CA 92543
Effective as of 01-DEC-22

SANCHEZ, YAHAIRA, NP†

Provider ID: N/A

📍 1003 E FLORIDA AVE STE
101
HEMET, CA 92543
Effective as of 01-MAR-22

SANCHEZ, YAHAIRA, NP†

Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

1003 E FLORIDA AVE STE
101
HEMET, CA 92543
Effective as of 01-OCT-22

SANCHEZ, YAHAIRA, NP†
Provider ID: N/A

1003 E FLORIDA AVE STE
104
HEMET, CA 92543
Effective as of 01-OCT-22

**SHARTZER, ANNA KARENINA,
NP†**

Provider ID: N/A

422 N SAN JACINTO ST
HEMET, CA 92543
Effective as of 01-SEP-22

SHEIKH, SARAH, NP

Provider ID: N/A

901 S STATE ST STE 600
HEMET, CA 92543
Effective as of 01-OCT-16

SHEIKH, SARAH, NP

Provider ID: N/A

901 S STATE ST STE 600
HEMET, CA 92543
Effective as of 01-MAY-23

SHIH, LU-HSUN, NP

Provider ID: N/A

225 LAURSEN ST
HEMET, CA 92543
Effective as of 01-APR-24

SINGH, JOGENDRA, NP†

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-OCT-22

SINGH, JOGENDRA, NP†

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-OCT-20

SINGH, JOGENDRA, NP†

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-OCT-20

SINGH, JOGENDRA, NP†

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-OCT-22

VALDEVERONA, KATHY, NP†

Provider ID: N/A

4020 W FLORIDA AVE
HEMET, CA 92545
Effective as of 01-NOV-19

VENTURA, ALEXIS, NP

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-APR-23

VENTURA, ALEXIS, NP

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-APR-23

VENTURA, ALEXIS, NP

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-JAN-23

VENTURA, ALEXIS, NP

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-JAN-23

VIDAL, ALYSSA, NPF

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-SEP-23

VIDAL, ALYSSA, NPF

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-SEP-23

VIDAL, ALYSSA, NPF

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-SEP-23

VIDAL, ALYSSA, NPF

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545
Effective as of 01-SEP-23

WILLIAM, PHEBEE, NP†

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-MAY-21

WILLIAM, PHEBEE, NP†

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-MAY-21

ZELEDON, JAIME, NP

Provider ID: N/A

422 N SAN JACINTO ST STE
B

C1. Lista de proveedores de la red Médico de atención especializada

HEMET, CA 92543
Effective as of 01-MAY-18

CHIROPRACTOR

BROWN, KEVIN, DC†

Provider ID: N/A

📍 2940 W FLORIDA AVE STE
B
HEMET, CA 92545
Effective as of 01-MAR-22

BROWN, KEVIN, DC†

Provider ID: N/A

📍 2940 W FLORIDA AVE STE
B
HEMET, CA 92545
Effective as of 01-MAR-22

BROWN, KEVIN, DC

Provider ID: N/A

📍 3012 W FLORIDA AVE
HEMET, CA 92545
Effective as of 01-AUG-23

BROWN, KEVIN, DC

Provider ID: N/A

📍 3012 W FLORIDA AVE
HEMET, CA 92545
Effective as of 01-AUG-23

HINES, TAYTE, DC

Provider ID: N/A

📍 903 E DEVONSHIRE AVE
STE D
HEMET, CA 92543
Effective as of 01-JAN-24

ROBINSON, DEAN, DC

Provider ID: N/A

📍 903 E DEVONSHIRE AVE
STE D
HEMET, CA 92543
Effective as of 01-JUL-22

WACHHOLZ, PAMELA, DC

Provider ID: N/A

📍 760 W ACACIA AVE STE 113
HEMET, CA 92543
Effective as of 01-SEP-09

WACHHOLZ, PAMELA, DC

Provider ID: N/A

📍 760 W ACACIA AVE STE 113
HEMET, CA 92543
Effective as of 01-FEB-11

WACHHOLZ, PAMELA, DC

Provider ID: N/A

📍 760 W ACACIA AVE STE 113
HEMET, CA 92543
Effective as of 01-JUL-23

DERMATOLOGY

HARFORD, ROBERT, MD†

Provider ID: N/A

📍 750 E LATHAM AVE STE 3
HEMET, CA 92543
Effective as of 01-DEC-20

KOUPAIE, JAFAR, MD

Provider ID: N/A

📍 3853 W STETSON AVE STE
201
HEMET, CA 92545
Effective as of 01-JUL-24

MITCHELL, JESSE, MD†

Provider ID: N/A

📍 3853 W STETSON AVE STE
201
HEMET, CA 92545
Effective as of 01-JUL-21

MITCHELL, JESSE, MD

Provider ID: N/A

📍 3989 W STETSON AVE STE
201
HEMET, CA 92545

Effective as of 01-DEC-23

MITCHELL, JESSE, MD†

Provider ID: N/A

📍 3853 W STETSON AVE STE
201
HEMET, CA 92545
Effective as of 01-JUL-21

MITCHELL, JESSE, MD

Provider ID: N/A

📍 3989 W STETSON AVE STE
201
HEMET, CA 92545
Effective as of 01-DEC-23

MITCHELL, JESSE, MD

Provider ID: N/A

📍 3989 W STETSON AVE STE
201
HEMET, CA 92545
Effective as of 01-DEC-23

MITCHELL, JESSE, MD

Provider ID: N/A

📍 3989 W STETSON AVE STE
201
HEMET, CA 92545
Effective as of 01-DEC-23

MUDGE, BRADLEY, MD†

Provider ID: N/A

📍 850 E LATHAM AVE STE 201
HEMET, CA 92543
Teleservice
Effective as of 01-OCT-21

OBBEREMOK, STEVE, MD

Provider ID: N/A

📍 901 S STATE ST STE 100
HEMET, CA 92543
Effective as of 01-AUG-23

OBBEREMOK, STEVE, MD

Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

720 E LATHAM AVE STE 1
HEMET, CA 92543*
Effective as of 01-JUL-23

SAIED, NAGI, MD†
Provider ID: N/A

850 E LATHAM AVE STE 201
HEMET, CA 92543
Teleservice
Effective as of 01-NOV-21

SAIED, NAGI, MD†
Provider ID: N/A

850 E LATHAM AVE STE 201
HEMET, CA 92543
Teleservice
Effective as of 01-OCT-21

SEYFZADEH, MANOUCHEHR, MD†
Provider ID: N/A

1280 E LATHAM AVE
HEMET, CA 92543
Effective as of 01-JUL-14

EMERGENCY MEDICINE

MATHUR, ARVIND, MD†
Provider ID: N/A

975 SAINT JOHN PL
HEMET, CA 92543
Effective as of 01-APR-23

ENDOCRINOLOGY

METABOLISM DIABETES

HAIDER, UZMA, MD†
Provider ID: N/A

1515 W FLORIDA AVE
HEMET, CA 92543
Effective as of 01-JUL-21

HAIDER, SHANZAY, MD
Provider ID: N/A

1515 W FLORIDA AVE
HEMET, CA 92543
Effective as of 01-MAR-24

HAIDER, SHANZAY, MD
Provider ID: N/A

1515 W FLORIDA AVE
HEMET, CA 92543
Effective as of 01-MAR-24

HAIDER, SHANZAY, MD
Provider ID: N/A

1515 W FLORIDA AVE
HEMET, CA 92543
Effective as of 01-MAR-24

HAIDER, SHANZAY, MD
Provider ID: N/A

1515 W FLORIDA AVE
HEMET, CA 92543
Effective as of 01-MAR-24

HAIDER, UZMA, MD†
Provider ID: N/A

1515 W FLORIDA AVE
HEMET, CA 92543
Effective as of 01-NOV-23

HAIDER, UZMA, MD†
Provider ID: N/A

1515 W FLORIDA AVE
HEMET, CA 92543
Effective as of 01-APR-24

HAIDER, UZMA, MD†
Provider ID: N/A

1515 W FLORIDA AVE
HEMET, CA 92543
Effective as of 01-DEC-20

HAIDER, UZMA, MD†
Provider ID: N/A

1515 W FLORIDA AVE
HEMET, CA 92543
Effective as of 01-DEC-20

SEYED, KAZEM, MD†
Provider ID: N/A

750 E LATHAM AVE STE 1
HEMET, CA 92543
Effective as of 01-AUG-20

FAMILY PRACTICE

CHAMBI-HERNANDEZ, RUTH, MD
Provider ID: N/A

1035 SAINT JOHN PL
HEMET, CA 92543
Effective as of 01-MAY-23

GASTROENTEROLOGY

CHAKRABARTY, MILANKUMAR, MD†
Provider ID: N/A

1003 E FLORIDA AVE STE 101
HEMET, CA 92543
Effective as of 01-MAY-15

CHAKRABARTY, MILANKUMAR, MD†
Provider ID: N/A

1003 E FLORIDA AVE STE 101
HEMET, CA 92543
Effective as of 01-JUL-23

CHAKRABARTY, MILANKUMAR, MD†
Provider ID: N/A

1003 E FLORIDA AVE STE 101
HEMET, CA 92543
Effective as of 01-MAY-15

CHAKRABARTY, MILANKUMAR, MD†
Provider ID: N/A

**C1. Lista de proveedores de la red
Médico de atención especializada**

1003 E FLORIDA AVE STE
101
HEMET, CA 92543
Effective as of 01-SEP-09

**CHAKRABARTY,
MILANKUMAR, MD†**

Provider ID: N/A

1003 E FLORIDA AVE STE
101
HEMET, CA 92543
Effective as of 01-AUG-20

NAKKA, SREENIVASA, MD†

Provider ID: N/A

949 CALHOUN PL STE A
HEMET, CA 92543
Teleservice
Effective as of 01-JUL-23

QASEEM, TAHIR, MD

Provider ID: N/A

1003 E FLORIDA AVE STE
101
HEMET, CA 92543
Effective as of 01-MAY-22

QASEEM, TAHIR, MD

Provider ID: N/A

1003 E FLORIDA AVE STE
101
HEMET, CA 92543
Effective as of 01-MAY-22

QASEEM, TAHIR, MD

Provider ID: N/A

1003 E FLORIDA AVE STE
101
HEMET, CA 92543
Effective as of 01-JAN-22

QASEEM, TAHIR, MD

Provider ID: N/A

1003 E FLORIDA AVE STE
101

HEMET, CA 92543
Effective as of 01-APR-22

QASEEM, TAHIR, MD

Provider ID: N/A

1003 E FLORIDA AVE STE
101
HEMET, CA 92543
Effective as of 01-JUL-23

QASEEM, TAHIR, MD

Provider ID: N/A

1003 E FLORIDA AVE STE
104
HEMET, CA 92543
Effective as of 01-DEC-22

QASEEM, TAHIR, MD

Provider ID: N/A

1003 E FLORIDA AVE STE
101
HEMET, CA 92543
Effective as of 01-DEC-22

SINGHVI, AJEET, MD†

Provider ID: N/A

397 N SAN JACINTO ST
HEMET, CA 92543
Effective as of 01-DEC-17

**HEMATOLOGY /
ONCOLOGY**

AGAJANIAN, RICHY, MD

Provider ID: N/A

1001 S STATE ST STE A
HEMET, CA 92543
Effective as of 01-JUL-23

BANTA, WARREN, MD†

Provider ID: N/A

2390 E FLORIDA AVE STE
105
HEMET, CA 92544
Effective as of 01-AUG-22

BANTA, WARREN, MD†

Provider ID: N/A

2390 E FLORIDA AVE STE
105
HEMET, CA 92544
Effective as of 01-AUG-22

BANTA, WARREN, MD†

Provider ID: N/A

2390 E FLORIDA AVE STE
105
HEMET, CA 92544
Effective as of 01-AUG-22

BANTA, WARREN, MD†

Provider ID: N/A

2390 E FLORIDA AVE STE
105
HEMET, CA 92544
Effective as of 01-AUG-22

BANTA, WARREN, MD†

Provider ID: N/A

2390 E FLORIDA AVE STE
105
HEMET, CA 92544
Effective as of 01-AUG-22

BASERI, BABAK, MD

Provider ID: N/A

1001 S STATE ST STE A
HEMET, CA 92543
Effective as of 01-APR-23

BELLO, OSAGIE, MD

Provider ID: N/A

2390 E FLORIDA AVE STE
105
HEMET, CA 92544
Effective as of 01-OCT-23

BELLO, OSAGIE, MD

Provider ID: N/A

2390 E FLORIDA AVE STE

**C1. Lista de proveedores de la red
Médico de atención especializada**

105
HEMET, CA 92544
Effective as of 01-OCT-23

BELLO, OSAGIE, MD

Provider ID: N/A
2390 E FLORIDA AVE STE
105
HEMET, CA 92544
Effective as of 01-OCT-23

LEE, BYUNG, DO†

Provider ID: N/A
2390 E FLORIDA AVE STE
105
HEMET, CA 92544
Effective as of 01-JUL-21

LEE, BYUNG, DO†

Provider ID: N/A
2390 E FLORIDA AVE STE
105
HEMET, CA 92544
Effective as of 01-JUL-21

LEE, BYUNG, DO†

Provider ID: N/A
2390 E FLORIDA AVE STE
105
HEMET, CA 92544
Effective as of 01-JUL-21

MARJON, PHILIP, MD

Provider ID: N/A
1001 S STATE ST STE A
HEMET, CA 92543
Effective as of 01-APR-23

MOST, CAROLE, MD†

Provider ID: N/A
2390 E FLORIDA AVE STE
105
HEMET, CA 92544
Effective as of 01-SEP-18

MOST, CAROLE, MD†

Provider ID: N/A
2390 E FLORIDA AVE STE
105
HEMET, CA 92544
Effective as of 01-SEP-18

MOST, CAROLE, MD†

Provider ID: N/A
2390 E FLORIDA AVE STE
105
HEMET, CA 92544
Effective as of 01-SEP-18

MOST, CAROLE, MD†

Provider ID: N/A
2390 E FLORIDA AVE STE
105
HEMET, CA 92544
Effective as of 01-MAR-21

SARWARI, NAWID, MD

Provider ID: N/A
1001 S STATE ST STE A
HEMET, CA 92543
Effective as of 01-APR-23

SAUNDERS, PHILLIP, DO

Provider ID: N/A
1001 S STATE ST STE A
HEMET, CA 92543
Effective as of 01-JUL-24

SAUNDERS, PHILLIP, DO†

Provider ID: N/A
1011 E DEVONSHIRE AVE
STE 201
HEMET, CA 92543
Effective as of 01-DEC-20

SAUNDERS, PHILLIP, DO

Provider ID: N/A
1001 S STATE ST STE A
HEMET, CA 92543
Effective as of 01-APR-23

SCHWERKOSKE, JOHN, MD

Provider ID: N/A
1001 S STATE ST STE A
HEMET, CA 92543
Effective as of 01-JUL-23

SHUM, MERRILL, MD

Provider ID: N/A
1011 E DEVONSHIRE AVE
STE 201
HEMET, CA 92543
Effective as of 01-JUL-23

TSAI, JAMES, MD†

Provider ID: N/A
201 LAURSEN ST
HEMET, CA 92543
Effective as of 01-SEP-09

TSANG, WALTER, MD†

Provider ID: N/A
2390 E FLORIDA AVE STE
105
HEMET, CA 92544
Effective as of 01-FEB-20

TSANG, WALTER, MD†

Provider ID: N/A
2390 E FLORIDA AVE STE
105
HEMET, CA 92544
Effective as of 01-FEB-20

TSANG, WALTER, MD†

Provider ID: N/A
2390 E FLORIDA AVE STE
105
HEMET, CA 92544
Effective as of 01-FEB-20

***HOSPICE AND PALLIATIVE
MEDICINE***

TAECHARVONGPHAIROJ,

C1. Lista de proveedores de la red Médico de atención especializada

VEERAVAT, MD

Provider ID: N/A

850 E LATHAM AVE STE
205
HEMET, CA 92543

Effective as of 01-MAR-24

INTERNAL MEDICINE

DHIMAN, DARSHAN, MD†

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545

Effective as of 01-DEC-23

DHIMAN, DARSHAN, MD†

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545

Effective as of 01-DEC-23

GRANT ANDERSON, BETTY, MD†

Provider ID: N/A

949 CALHOUN PL STE D
HEMET, CA 92543

Effective as of 01-JUN-17

MATHIAS, HERMAN, MD†

Provider ID: N/A

391 N SAN JACINTO ST
HEMET, CA 92543

Effective as of 01-DEC-23

NAGASUNDER, ARABHI, DO

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545

Teleservice

Effective as of 01-SEP-23

NAGASUNDER, ARABHI, DO

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545

Teleservice

Effective as of 01-SEP-23

NAGASUNDER, ARABHI, DO

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545

Teleservice

Effective as of 01-SEP-23

NAGASUNDER, ARABHI, DO

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545

Teleservice

Effective as of 01-SEP-23

PEARCE, DANIEL, DO

Provider ID: N/A

1030 E FLORIDA AVE
HEMET, CA 92543

Effective as of 01-OCT-23

RIVA, GREGORY, MD†

Provider ID: N/A

1275 E LATHAM AVE STE C
HEMET, CA 92543

Effective as of 01-APR-21

INTERNAL MEDICINE

GERIATRIC MEDICINE

MATHIAS, HERMAN, MD†

Provider ID: N/A

391 N SAN JACINTO ST
HEMET, CA 92543

Effective as of 01-AUG-95

INTERVENTIONAL CARDIOLOGY

AGARWAL, ASHOK, MD

Provider ID: N/A

136 S SAN JACINTO ST
HEMET, CA 92543

Effective as of 01-JAN-17

AGARWAL, ASHOK, MD

Provider ID: N/A

136 S SAN JACINTO ST
HEMET, CA 92543

Effective as of 01-JAN-17

AGARWAL, ASHOK, MD

Provider ID: N/A

136 S SAN JACINTO ST
HEMET, CA 92543

Effective as of 01-JAN-17

AMIN, JATIN, MD†

Provider ID: N/A

3853 W STETSON AVE STE
104
HEMET, CA 92545

Teleservice

Effective as of 01-JAN-19

ATTIA, NADER, DO†

Provider ID: N/A

3853 W STETSON AVE STE
104
HEMET, CA 92545

Teleservice

Effective as of 01-JAN-19

BISWAS, MIMI, MD†

Provider ID: N/A

3853 W STETSON AVE STE
104
HEMET, CA 92545

Teleservice

Effective as of 01-JAN-19

C1. Lista de proveedores de la red Médico de atención especializada

COX, JEREMY, DO†

Provider ID: N/A

☒ 3853 W STETSON AVE STE 104
HEMET, CA 92543
Effective as of 01-JAN-19

GOKHROO, RAHUL, MD†

Provider ID: N/A

☒ 949 CALHOUN PL STE D
HEMET, CA 92543
Effective as of 01-DEC-22

GOKHROO, RAHUL, MD†

Provider ID: N/A

☒ 949 CALHOUN PL STE D
HEMET, CA 92543
Effective as of 01-DEC-22

GOKHROO, RAHUL, MD†

Provider ID: N/A

☒ 949 CALHOUN PL STE D
HEMET, CA 92543
Effective as of 01-DEC-22

GRANT ANDERSON, BETTY, MD†

Provider ID: N/A

☒ 949 CALHOUN PL STE D
HEMET, CA 92543
Effective as of 01-JUL-14

MESSENGER, BRADLEY, MD†

Provider ID: N/A

☒ 3853 W STETSON AVE STE 104
HEMET, CA 92543
Effective as of 01-JAN-19

PAREKH, NIRAJ, MD†

Provider ID: N/A

☒ 3853 W STETSON AVE STE 104
HEMET, CA 92543

Teleservice

Effective as of 01-SEP-24

PAREKH, NIRAJ, MD†

Provider ID: N/A

☒ 3853 W STETSON AVE STE 104
HEMET, CA 92543

Teleservice

Effective as of 01-SEP-24

RASTOGI, ANISHA, MD†

Provider ID: N/A

☒ 1275 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-AUG-20

RIVA, GREGORY, MD†

Provider ID: N/A

☒ 1275 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-MAR-14

RIVA, GREGORY, MD†

Provider ID: N/A

☒ 1275 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-DEC-13

SANGODKAR, SANDEEP, DO

Provider ID: N/A

☒ 3853 W STETSON AVE STE 104
HEMET, CA 92543
Effective as of 01-NOV-23

LICENSED CLINICAL SOCIAL WORKER

ARIAS ALISHAHI, ELIZABETH, LCSW

Provider ID: N/A

☒ 903 E DEVONSHIRE AVE
STE D

HEMET, CA 92543

Effective as of 01-JAN-21

BRINSON, CIRSTEN, LCSW†

Provider ID: N/A

☒ 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-JUL-22

BRINSON, CIRSTEN, LCSW†

Provider ID: N/A

☒ 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-JUL-22

GRANDISON, BROOKE, LCSW

Provider ID: N/A

☒ 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-FEB-24

GRANDISON, BROOKE, LCSW

Provider ID: N/A

☒ 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-FEB-24

HARRIS, JACQUELLIN, LCSW

Provider ID: N/A

☒ 1030 E FLORIDA AVE
HEMET, CA 92543
Effective as of 01-SEP-24

HERSH, LINDSEY, LCSW†

Provider ID: N/A

☒ 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-JUL-23

HERSH, LINDSEY, LCSW†

Provider ID: N/A

☒ 162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-JUL-23

C1. Lista de proveedores de la red Médico de atención especializada

HERSH, LINDSEY, LCSW†
Provider ID: N/A
162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-AUG-22

JONES, VALORIA, LCSW†
Provider ID: N/A
162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-JUL-23

JONES, VALORIA, LCSW†
Provider ID: N/A
162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-JUL-23

JONES, VALORIA, LCSW†
Provider ID: N/A
162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-JAN-23

JONES, VALORIA, LCSW†
Provider ID: N/A
162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-JUL-23

**PIDDINGTON, CHRISTINE,
LCSW†**
Provider ID: N/A
162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-MAR-21

**PIDDINGTON, CHRISTINE,
LCSW†**
Provider ID: N/A
162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-DEC-22

PIDDINGTON, CHRISTINE,

LCSW†
Provider ID: N/A
162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-DEC-22

**TABIL-GALAPON, BERNICE,
LCSW**
Provider ID: N/A
1030 E FLORIDA AVE
HEMET, CA 92543
Effective as of 01-JUL-23

**VALDEZ-HERNANDEZ, ISRAEL,
LCSW†**
Provider ID: N/A
162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-JAN-23

**VALDEZ-HERNANDEZ, ISRAEL,
LCSW†**
Provider ID: N/A
162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-JAN-23

**VALDEZ-HERNANDEZ, ISRAEL,
LCSW†**
Provider ID: N/A
162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-APR-23

**VALDEZ-HERNANDEZ, ISRAEL,
LCSW†**
Provider ID: N/A
162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-APR-23

**MARRIAGE FAMILY
THERAPIST**

POOR, PATRICK, MFT†
Provider ID: N/A
162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-DEC-22

POOR, PATRICK, MFT†
Provider ID: N/A
162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-DEC-22

MEDICAL ONCOLOGY

PARSI, HOOMAN, MD
Provider ID: N/A
1001 S STATE ST STE A
HEMET, CA 92543
Effective as of 01-APR-23

SHAIKH, ANWER, MD
Provider ID: N/A
1001 S STATE ST STE A
HEMET, CA 92543
Effective as of 01-APR-23

SHAIKH, ANWER, MD
Provider ID: N/A
1001 S STATE ST STE A
HEMET, CA 92543
Effective as of 01-JUL-24

NEPHROLOGY

CHANG, DAVID, MD†
Provider ID: N/A
850 E LATHAM AVE STE D
HEMET, CA 92543
Effective as of 01-NOV-06

CHANG, DAVID, MD†
Provider ID: N/A
1011 E DEVONSHIRE AVE
STE 201
HEMET, CA 92543

**C1. Lista de proveedores de la red
Médico de atención especializada**

Effective as of 01-SEP-09

CHANG, DAVID, MD†

Provider ID: N/A

1011 E DEVONSHIRE AVE
STE 201
HEMET, CA 92543

Effective as of 01-SEP-09

**CHARLES COWAN, TRICIA,
DO†**

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545

Effective as of 01-SEP-17

**CHARLES COWAN, TRICIA,
DO†**

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545

Effective as of 01-SEP-17

**CHARLES COWAN, TRICIA,
DO†**

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545

Effective as of 01-MAR-18

**CHARLES COWAN, TRICIA,
DO†**

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545

Effective as of 01-AUG-17

**CHARLES COWAN, TRICIA,
DO†**

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545

Effective as of 01-OCT-20

**CHARLES COWAN, TRICIA,
DO†**

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545

Effective as of 01-OCT-17

**CHARLES COWAN, TRICIA,
DO†**

Provider ID: N/A

3989 W STETSON AVE
HEMET, CA 92545

Effective as of 01-AUG-17

**CHARLES COWAN, TRICIA,
DO†**

Provider ID: N/A

3989 W STETSON AVE
HEMET, CA 92545

Effective as of 01-AUG-17

DHIMAN, DARSHAN, MD†

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545

Effective as of 01-DEC-15

DHIMAN, DARSHAN, MD†

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545

Effective as of 01-DEC-15

DHIMAN, DARSHAN, MD†

Provider ID: N/A

3989 W STETSON AVE STE
202

HEMET, CA 92545

Effective as of 01-DEC-15

DHIMAN, DARSHAN, MD†

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545

Effective as of 01-DEC-15

DHIMAN, DARSHAN, MD†

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545

Effective as of 01-APR-18

DHIMAN, DARSHAN, MD†

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545

Effective as of 01-MAR-21

ISHAK, SALAM, MD†

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545

Effective as of 01-AUG-20

NAGASUNDER, ARABHI, DO

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545

Teleservice

Effective as of 01-NOV-23

NAGASUNDER, ARABHI, DO

Provider ID: N/A

3989 W STETSON AVE STE
202
HEMET, CA 92545

Teleservice

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-OCT-23

NAGASUNDER, ARABHI, DO

Provider ID: N/A

☒ 3989 W STETSON AVE STE
202
HEMET, CA 92545

Teleservice

Effective as of 01-OCT-23

NATH, ASHOK, MD†

Provider ID: N/A

☒ 3989 W STETSON AVE STE
202
HEMET, CA 92545

Effective as of 01-APR-20

YAN, ERIC, MD

Provider ID: N/A

☒ 3989 W STETSON AVE STE
202
HEMET, CA 92545

Effective as of 01-JUN-23

YAN, ERIC, MD

Provider ID: N/A

☒ 3989 W STETSON AVE STE
202
HEMET, CA 92545

Effective as of 01-JUN-23

YAN, ERIC, MD

Provider ID: N/A

☒ 3989 W STETSON AVE STE
202
HEMET, CA 92545

Effective as of 01-JUN-23

YOUSSEF, AMR, DO†

Provider ID: N/A

☒ 3989 W STETSON AVE STE
202
HEMET, CA 92545

Effective as of 01-JUN-22

YOUSSEF, AMR, DO†

Provider ID: N/A

☒ 3989 W STETSON AVE STE
202
HEMET, CA 92545

Effective as of 01-SEP-22

YOUSSEF, AMR, DO†

Provider ID: N/A

☒ 3989 W STETSON AVE STE
202
HEMET, CA 92545

Effective as of 01-SEP-22

OBSTETRICS / GYNECOLOGY

NIHIRA, MIKIO, MD†

Provider ID: N/A

☒ 1225 E LATHAM AVE STE A
HEMET, CA 92543

Effective as of 01-NOV-20

NIHIRA, MIKIO, MD†

Provider ID: N/A

☒ 1225 E LATHAM AVE STE A
HEMET, CA 92543

Effective as of 01-NOV-20

NIHIRA, MIKIO, MD†

Provider ID: N/A

☒ 1225 E LATHAM AVE STE A
HEMET, CA 92543

Effective as of 01-NOV-20

RIZVI, SYED, MD†

Provider ID: N/A

☒ 1600 E FLORIDA AVE STE
315
HEMET, CA 92544

Effective as of 01-MAR-22

RIZVI, SYED, MD†

Provider ID: N/A

☒ 1600 E FLORIDA AVE STE
315

HEMET, CA 92544

Effective as of 01-FEB-17

URSO, MARY JO, DO†

Provider ID: N/A

☒ 1225 E LATHAM AVE STE A
HEMET, CA 92543

Effective as of 01-DEC-20

URSO, MARY JO, DO†

Provider ID: N/A

☒ 1225 E LATHAM AVE STE A
HEMET, CA 92543

Effective as of 01-DEC-20

URSO, MARY JO, DO†

Provider ID: N/A

☒ 1225 E LATHAM AVE STE A
HEMET, CA 92543

Effective as of 01-DEC-20

URSO, MARY JO, DO†

Provider ID: N/A

☒ 1225 E LATHAM AVE STE A
HEMET, CA 92543

Effective as of 01-DEC-20

URSO, MARY JO, DO†

Provider ID: N/A

☒ 1225 E LATHAM AVE STE A
HEMET, CA 92543

Effective as of 01-DEC-20

URSO, MARY JO, DO†

Provider ID: N/A

☒ 1225 E LATHAM AVE STE A
HEMET, CA 92543

Effective as of 01-DEC-20

URSO, MARY JO, DO†

Provider ID: N/A

☒ 1225 E LATHAM AVE STE A
HEMET, CA 92543

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-JUL-23

OCCUPATIONAL THERAPIST

BONILLA, EDWARD, OT

Provider ID: N/A

☐ 3989 W STETSON AVE STE
105

HEMET, CA 92545

Effective as of 01-DEC-23

BONILLA, EDWARD, OT

Provider ID: N/A

☐ 3989 W STETSON AVE STE
105

HEMET, CA 92545

Effective as of 01-DEC-23

JENSEN, BROOKE, OT†

Provider ID: N/A

☐ 3889 W STETSON AVE STE
150

HEMET, CA 92545

Effective as of 01-JAN-20

OPHTHALMOLOGY

CHOW, JASON, MD†

Provider ID: N/A

☐ 3953 W STETSON AVE
HEMET, CA 92545

Effective as of 01-SEP-22

CHOW, JASON, MD†

Provider ID: N/A

☐ 3953 W STETSON AVE
HEMET, CA 92545

Effective as of 01-OCT-22

CHOW, JASON, MD†

Provider ID: N/A

☐ 3953 W STETSON AVE
HEMET, CA 92545

Effective as of 01-JUL-23

CHOW, JASON, MD†

Provider ID: N/A

☐ 3953 W STETSON AVE
HEMET, CA 92545

Effective as of 01-FEB-24

JACOBS, JEFFREY, MD†

Provider ID: N/A

☐ 2390 E FLORIDA AVE STE
207

HEMET, CA 92544

Effective as of 01-JUL-18

JACOBS, JEFFREY, MD†

Provider ID: N/A

☐ 2390 E FLORIDA AVE STE
207

HEMET, CA 92544

Effective as of 01-JUL-23

JACOBS, JEFFREY, MD†

Provider ID: N/A

☐ 2390 E FLORIDA AVE STE
207

HEMET, CA 92544

Effective as of 01-NOV-08

JACOBS, JEFFREY, MD†

Provider ID: N/A

☐ 2390 E FLORIDA AVE STE
207

HEMET, CA 92544

Effective as of 01-SEP-09

JACOBSON, ARTHUR, MD†

Provider ID: N/A

☐ 2390 E FLORIDA AVE STE
207

HEMET, CA 92544

Effective as of 01-SEP-09

JACOBSON, ARTHUR, MD†

Provider ID: N/A

☐ 2390 E FLORIDA AVE STE

207

HEMET, CA 92544

Effective as of 01-MAR-98

JACOBSON, ARTHUR, MD†

Provider ID: N/A

☐ 2390 E FLORIDA AVE STE
207

HEMET, CA 92544

Effective as of 01-JUL-23

JOHNSON, ROGER, MD†

Provider ID: N/A

☐ 3953 W STETSON AVE
HEMET, CA 92545

Effective as of 01-JUL-23

JOSEPH, JEFFREY, MD†

Provider ID: N/A

☐ 3953 W STETSON AVE
HEMET, CA 92545

Effective as of 01-AUG-20

JOSEPH, JEFFREY, MD†

Provider ID: N/A

☐ 3953 W STETSON AVE
HEMET, CA 92545

Effective as of 01-AUG-19

JOSEPH, JEFFREY, MD†

Provider ID: N/A

☐ 3953 W STETSON AVE
HEMET, CA 92545

Effective as of 01-DEC-21

LEE, JOHN, MD†

Provider ID: N/A

☐ 2390 E FLORIDA AVE STE
207

HEMET, CA 92544

Effective as of 01-JUL-23

LEE, JOHN, MD†

Provider ID: N/A


☐ 2390 E FLORIDA AVE STE

C1. Lista de proveedores de la red Médico de atención especializada

207
HEMET, CA 92544
Effective as of 01-JAN-11


LEE, JOHN, MD†

Provider ID: N/A

 2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Effective as of 01-FEB-11


LEE, JOHN, MD†

Provider ID: N/A

 2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Effective as of 01-MAR-14


NAMBIAR, MARGARET, MD†

Provider ID: N/A

 2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Effective as of 01-FEB-20


PHILLIPS, BARRATT, MD†

Provider ID: N/A

 3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-JAN-22


PHILLIPS, BARRATT, MD†

Provider ID: N/A

 3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-JAN-22


PHILLIPS, BARRATT, MD†

Provider ID: N/A

 3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-MAY-14


PHILLIPS, BARRATT, MD†

Provider ID: N/A

 3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-SEP-09


SKINNER, ANTHONY, MD

Provider ID: N/A

 2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Effective as of 01-APR-24


SKINNER, ANTHONY, MD

Provider ID: N/A

 2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Effective as of 01-APR-24


SKINNER, ANTHONY, MD

Provider ID: N/A

 2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Effective as of 01-APR-24


SORENSEN, ROBERT, MD†

Provider ID: N/A

 3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-SEP-09


SORENSEN, ROBERT, MD†

Provider ID: N/A

 3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-JUL-23


SORENSEN, ROBERT, MD†

Provider ID: N/A

 3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-JAN-22


SORENSEN, ROBERT, MD†

Provider ID: N/A

 3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-DEC-21


VIDOR, IRA, MD†

Provider ID: N/A

 361 N SAN JACINTO ST
HEMET, CA 92543
Effective as of 01-JUL-19


WARNER, MICHAEL, MD†

Provider ID: N/A

 2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Teleservice
Effective as of 01-SEP-09


WARNER, MICHAEL, MD†

Provider ID: N/A

 2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Teleservice
Effective as of 01-JUL-23


WARNER, MICHAEL, MD†

Provider ID: N/A

 2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Teleservice
Effective as of 01-MAR-14

WARNER, MICHAEL, MD†

Provider ID: N/A

 2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Teleservice
Effective as of 01-MAR-14

OPTOMETRIST

ARCHIBALD, JOHN, OD†

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-JUL-23

ARCHIBALD, JOHN, OD†

Provider ID: N/A

3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-DEC-23

BARR, AUSTIN, OD

Provider ID: N/A

2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Effective as of 01-MAR-23

BARR, AUSTIN, OD

Provider ID: N/A

2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Effective as of 01-NOV-22

BARR, AUSTIN, OD

Provider ID: N/A

2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Effective as of 01-NOV-22

BARR, AUSTIN, OD

Provider ID: N/A

2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Effective as of 01-NOV-22

COLEMAN, BROOKE, OD†

Provider ID: N/A

3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-AUG-20

COLEMAN, BROOKE, OD†

Provider ID: N/A

3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-JUL-23

COLEMAN, BROOKE, OD†

Provider ID: N/A

3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-JUL-11

FENNEMA, ERIC, OD†

Provider ID: N/A

3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-FEB-22

FENNEMA, ERIC, OD†

Provider ID: N/A

3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-SEP-22

LANE, KEVIN, OD†

Provider ID: N/A

2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Effective as of 01-SEP-09

LANE, KEVIN, OD†

Provider ID: N/A

2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Effective as of 01-FEB-11

LANE, KEVIN, OD†

Provider ID: N/A

2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Effective as of 01-JUL-23

LARSON, BRETT, OD†

Provider ID: N/A

3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-SEP-10

LARSON, BRETT, OD†

Provider ID: N/A

3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-FEB-22

LARSON, BRETT, OD†

Provider ID: N/A

3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-AUG-20

LARSON, BRETT, OD†

Provider ID: N/A

3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-JUL-23

MC CLEARY, DAVID, OD†

Provider ID: N/A

3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-JUL-23

MC CLEARY, DAVID, OD†

Provider ID: N/A

3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-AUG-18

MC CLEARY, DAVID, OD†

Provider ID: N/A

3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-DEC-21

TADROS, JESSICA, OD†

Provider ID: N/A

2390 E FLORIDA AVE STE

**C1. Lista de proveedores de la red
Médico de atención especializada**

207
HEMET, CA 92544
Effective as of 01-JUL-23

ULIBARRI, MATTHEW, OD†

Provider ID: N/A
☑ 2390 E FLORIDA AVE STE
207
HEMET, CA 92544
Effective as of 01-JUL-23

***PEDIATRIC
ENDOCRINOLOGY***

SEYED, KAZEM, MD†

Provider ID: N/A
☑ 750 E LATHAM AVE STE 1
HEMET, CA 92543
Effective as of 01-OCT-10

SEYED, KAZEM, MD†

Provider ID: N/A
☑ 750 E LATHAM AVE STE 1
HEMET, CA 92543
Effective as of 01-MAY-15

SEYED, KAZEM, MD†

Provider ID: N/A
☑ 750 E LATHAM AVE STE 1
HEMET, CA 92543
Effective as of 01-MAY-15

***PHYS MED/ REHAB PAIN
MEDICINE***

CHEN, HAMILTON, MD†

Provider ID: N/A
☑ 3989 W STETSON AVE STE
102
HEMET, CA 92545
Effective as of 01-JUL-24

***PHYSICAL MEDICINE /
REHABILITATION***

AILINANI, HARY, MD

Provider ID: N/A
☑ 1011 E DEVONSHIRE AVE
STE 203
HEMET, CA 92543
Effective as of 01-MAY-21

CHEN, HAMILTON, MD†

Provider ID: N/A
☑ 3989 W STETSON AVE STE
102
HEMET, CA 92545
Effective as of 01-MAR-24

LEE, JONATHAN KWANG, MD†

Provider ID: N/A
☑ 3889 W STETSON AVE STE
100
HEMET, CA 92545
Effective as of 01-JUL-15

PHYSICIANS ASSISTANT

ANDERSON, MATTHEW, PA†

Provider ID: N/A
☑ 3889 W STETSON AVE STE
100
HEMET, CA 92545
Effective as of 01-AUG-21

BAKER, ROBERT, PA

Provider ID: N/A
☑ 1011 E DEVONSHIRE AVE
STE 203
HEMET, CA 92543
Effective as of 01-MAR-24

BAKER, ROBERT, PA

Provider ID: N/A
☑ 1011 E DEVONSHIRE AVE
STE 203
HEMET, CA 92543
Effective as of 01-MAR-24

BAKER, ROBERT, PA

Provider ID: N/A

☑ 1011 E DEVONSHIRE AVE
STE 203
HEMET, CA 92543
Effective as of 01-MAR-24

BAKER, ROBERT, PA

Provider ID: N/A
☑ 1011 E DEVONSHIRE AVE
STE 203
HEMET, CA 92543
Effective as of 01-MAR-24

BAKER, ROBERT, PA

Provider ID: N/A
☑ 1011 E DEVONSHIRE AVE
STE 203
HEMET, CA 92543
Effective as of 01-MAR-24

CAGATAY, HARRIER, PA†

Provider ID: N/A
☑ 422 N SAN JACINTO ST STE
B-C
HEMET, CA 92543
Effective as of 01-AUG-20

CAGATAY, HARRIER, PA†

Provider ID: N/A
☑ 1011 E DEVONSHIRE AVE
HEMET, CA 92543
Effective as of 01-AUG-20

CERALDE, ALAN, PA†

Provider ID: N/A
☑ 3889 W STETSON AVE STE
100
HEMET, CA 92545
Effective as of 01-AUG-16

CERALDE, ALAN, PA†

Provider ID: N/A
☑ 3889 W STETSON AVE STE
100
HEMET, CA 92545

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-AUG-16

CERALDE, ALAN, PA†

Provider ID: N/A

📍 3889 W STETSON AVE STE
100
HEMET, CA 92545

Effective as of 01-AUG-16

CERALDE, ALAN, PA†

Provider ID: N/A

📍 3889 W STETSON AVE STE
100
HEMET, CA 92545

Effective as of 01-NOV-16

CURTIS, DANIEL, PA†

Provider ID: N/A

📍 949 CALHOUN PL STE D
HEMET, CA 92543

Effective as of 01-MAY-23

CURTIS, DANIEL, PA†

Provider ID: N/A

📍 949 CALHOUN PL STE D
HEMET, CA 92543

Effective as of 01-DEC-22

CURTIS, DANIEL, PA†

Provider ID: N/A

📍 949 CALHOUN PL STE D
HEMET, CA 92543

Effective as of 01-DEC-22

CURTIS, DANIEL, PA†

Provider ID: N/A

📍 949 CALHOUN PL STE D
HEMET, CA 92543

Effective as of 01-JUL-24

DE CARO, ROBERT, PA†

Provider ID: N/A

📍 1264 E LATHAM AVE
HEMET, CA 92543

Effective as of 01-OCT-19

DIETZLER, MARQUE, PA†

Provider ID: N/A

📍 4020 W FLORIDA AVE
HEMET, CA 92545

Effective as of 01-JUL-19

GONZALEZ, KEVIN, PA

Provider ID: N/A

📍 3989 W STETSON AVE STE
201
HEMET, CA 92545

Effective as of 01-DEC-23

GONZALEZ, KEVIN, PA

Provider ID: N/A

📍 3989 W STETSON AVE STE
201
HEMET, CA 92545

Effective as of 01-DEC-23

GONZALEZ, KEVIN, PA

Provider ID: N/A

📍 3989 W STETSON AVE STE
201
HEMET, CA 92545

Effective as of 01-DEC-23

GONZALEZ, KEVIN, PA

Provider ID: N/A

📍 3989 W STETSON AVE STE
201
HEMET, CA 92545

Effective as of 01-DEC-23

HUNSAKER, NALANI, PA†

Provider ID: N/A

📍 1515 W FLORIDA AVE
HEMET, CA 92543

Effective as of 01-DEC-20

HUNSAKER, NALANI, PA†

Provider ID: N/A

📍 1515 W FLORIDA AVE
HEMET, CA 92543

Effective as of 01-DEC-20

HUNSAKER, NALANI, PA†

Provider ID: N/A

📍 1515 W FLORIDA AVE
HEMET, CA 92543

Effective as of 01-NOV-23

LANIER, JAME, PA†

Provider ID: N/A

📍 1264 E LATHAM AVE
HEMET, CA 92543

Effective as of 01-OCT-19

LANIER, JAME, PA†

Provider ID: N/A

📍 1264 E LATHAM AVE
HEMET, CA 92543

Effective as of 01-JUL-17

MACHO, DANIELLA, PA†

Provider ID: N/A

📍 1701 E FLORIDA AVE
HEMET, CA 92544

Effective as of 01-FEB-17

MITCHELL, PAUL, PA

Provider ID: N/A

📍 1011 E DEVONSHIRE AVE
STE 101
HEMET, CA 92543

Effective as of 01-FEB-24

MITCHELL, PAUL, PA

Provider ID: N/A

📍 422 N SAN JACINTO ST STE
B
HEMET, CA 92543

Effective as of 01-JUN-18

MOORE, PAMELA, PA†

Provider ID: N/A

📍 3889 W STETSON AVE STE
120
HEMET, CA 92545

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-DEC-17

QUEROL, CYRUS, PA

Provider ID: N/A

☒ 901 S STATE ST STE 100
HEMET, CA 92543

Effective as of 01-APR-24

RODDICK, JASON, PA

Provider ID: N/A

☒ 3989 W STETSON AVE STE
201
HEMET, CA 92545

Effective as of 01-DEC-23

RODDICK, JASON, PA

Provider ID: N/A

☒ 3989 W STETSON AVE STE
201
HEMET, CA 92545

Effective as of 01-DEC-23

RODDICK, JASON, PA

Provider ID: N/A

☒ 3989 W STETSON AVE STE
201
HEMET, CA 92545

Effective as of 01-DEC-23

RODDICK, JASON, PA

Provider ID: N/A

☒ 3989 W STETSON AVE STE
201
HEMET, CA 92545

Effective as of 01-DEC-23

RODDICK, JASON, PA†

Provider ID: N/A

☒ 3853 W STETSON AVE STE
201
HEMET, CA 92545

Effective as of 01-JUL-23

SHORES, CLORINDA, PA†

Provider ID: N/A

☒ 255 N GILBERT ST BLDG B4
HEMET, CA 92543

Effective as of 01-OCT-17

SMITH, ANTHONY, PA†

Provider ID: N/A

☒ 3889 W STETSON AVE STE
200
HEMET, CA 92545

Effective as of 01-JUN-18

SMITH, ANTHONY, PA†

Provider ID: N/A

☒ 3889 W STETSON AVE STE
200
HEMET, CA 92545

Effective as of 01-JUN-18

SZCZESIK, KRYSTIAN, PA†

Provider ID: N/A

☒ 3889 W STETSON AVE STE
100
HEMET, CA 92545

Effective as of 01-MAY-18

SZCZESIK, KRYSTIAN, PA†

Provider ID: N/A

☒ 3889 W STETSON AVE STE
100
HEMET, CA 92545

Effective as of 01-MAY-18

SZCZESIK, KRYSTIAN, PA†

Provider ID: N/A

☒ 3889 W STETSON AVE STE
100
HEMET, CA 92545

Effective as of 01-MAY-18

PODIATRIST

DRAKE, ROBERT, DPM

Provider ID: N/A

☒ 255 N GILBERT ST STE B1
HEMET, CA 92543

Effective as of 01-APR-15

DRAKE, ROBERT, DPM

Provider ID: N/A

☒ 255 N GILBERT ST STE B1
HEMET, CA 92543

Effective as of 01-APR-15

DRAKE, ROBERT, DPM

Provider ID: N/A

☒ 255 N GILBERT ST STE B1
HEMET, CA 92543

Effective as of 01-APR-15

DRAKE, ROBERT, DPM

Provider ID: N/A

☒ 255 N GILBERT ST STE B1
HEMET, CA 92543*

Effective as of 01-JUL-23

HAAS, RICHARD, DPM†

Provider ID: N/A

☒ 760 W ACACIA AVE STE 117
HEMET, CA 92543

Effective as of 01-JUL-23

PAOLERCIO, NANCY, DPM

Provider ID: N/A

☒ 255 N GILBERT ST STE B1
HEMET, CA 92543

Effective as of 01-MAR-17

PAOLERCIO, NANCY, DPM

Provider ID: N/A

☒ 255 N GILBERT ST STE B1
HEMET, CA 92543

Effective as of 01-MAR-17

PAOLERCIO, NANCY, DPM

Provider ID: N/A

☒ 255 N GILBERT ST STE B1
HEMET, CA 92543

Effective as of 01-MAR-17

PSYCHIATRY

C1. Lista de proveedores de la red Médico de atención especializada

ADEYEMO, OLUWAFEMI, MD

Provider ID: N/A

361 N SAN JACINTO ST
HEMET, CA 92543

Effective as of 01-MAR-15

ADEYEMO, OLUWAFEMI, MD

Provider ID: N/A

361 N SAN JACINTO ST
HEMET, CA 92543

Effective as of 01-JUL-24

ADEYEMO, OLUWAFEMI, MD

Provider ID: N/A

361 N SAN JACINTO ST
HEMET, CA 92543

Effective as of 01-JUN-17

ADEYEMO, OLUWAFEMI, MD

Provider ID: N/A

361 N SAN JACINTO ST
HEMET, CA 92543

Effective as of 01-SEP-17

ADEYEMO, OLUWAFEMI, MD

Provider ID: N/A

361 N SAN JACINTO ST
HEMET, CA 92543

Effective as of 01-MAR-15

ADEYEMO, OLUWAFEMI, MD

Provider ID: N/A

361 N SAN JACINTO ST
HEMET, CA 92543

Effective as of 01-JUL-24

ADEYEMO, OLUWAFEMI, MD

Provider ID: N/A

361 N SAN JACINTO ST
HEMET, CA 92543

Effective as of 01-JUN-17

ADEYEMO, OLUWAFEMI, MD

Provider ID: N/A

361 N SAN JACINTO ST
HEMET, CA 92543

Effective as of 01-SEP-17

JAKKULA, JAGAN, MD†

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-AUG-22

JAKKULA, JAGAN, MD†

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-AUG-22

JAKKULA, JAGAN, MD†

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-OCT-20

JAKKULA, JAGAN, MD†

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-NOV-23

JAKKULA, JAGAN, MD†

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-OCT-20

JAKKULA, JAGAN, MD†

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-AUG-22

JAKKULA, JAGAN, MD†

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-AUG-22

JAKKULA, JAGAN, MD†

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-NOV-23

PENT, MICHELLE, MD

Provider ID: N/A

1030 E FLORIDA AVE
HEMET, CA 92543

Effective as of 01-SEP-24

PENT, MICHELLE, MD

Provider ID: N/A

1030 E FLORIDA AVE
HEMET, CA 92543

Effective as of 01-SEP-24

PERSAUD, PRIA, MD

Provider ID: N/A

903 E DEVONSHIRE AVE
STE D
HEMET, CA 92543

Effective as of 01-AUG-20

PERSAUD, PRIA, MD

Provider ID: N/A

903 E DEVONSHIRE AVE
STE D
HEMET, CA 92543

Effective as of 01-AUG-20

PUCHAKAYALA, NANDITA, MD†

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-JUN-21

PUCHAKAYALA, NANDITA, MD†

Provider ID: N/A

162 N SANTA FE ST
HEMET, CA 92543

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-SEP-23

PUCHAKAYALA, NANDITA, MD†

Provider ID: N/A

☒ 162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-JUN-21

PUCHAKAYALA, NANDITA, MD†

Provider ID: N/A

☒ 162 N SANTA FE ST
HEMET, CA 92543

Effective as of 01-SEP-23

PSYCHOLOGIST

DUNN, JOSEPH, PhD

Provider ID: N/A

☒ 1011 E DEVONSHIRE AVE
STE 203
HEMET, CA 92543

Effective as of 01-JUN-23

DUNN, JOSEPH, PhD

Provider ID: N/A

☒ 1011 E DEVONSHIRE AVE
STE 203
HEMET, CA 92543

Effective as of 01-JUN-23

PULMONARY DISEASES

LU, CHONG PING, MD†

Provider ID: N/A

☒ 1000 E LATHAM AVE
HEMET, CA 92543

Effective as of 01-JUL-23

LU, CHONG PING, MD†

Provider ID: N/A

☒ 1000 E LATHAM AVE
HEMET, CA 92543

Effective as of 01-SEP-00

LU, CHONG PING, MD†

Provider ID: N/A

☒ 1000 E LATHAM AVE
HEMET, CA 92543

Effective as of 01-SEP-09

LU, CHONG PING, MD†

Provider ID: N/A

☒ 1000 E LATHAM AVE
HEMET, CA 92543

Effective as of 01-SEP-09

RADIATION ONCOLOGY

RHA, JANICE, MD†

Provider ID: N/A

☒ 430 W STETSON AVE
HEMET, CA 92543

Effective as of 01-DEC-21

RADIOLOGY DIAGNOSTIC

BURROUGHS, GLORIA, MD†

Provider ID: N/A

☒ 540 N JACINTO ST
HEMET, CA 92543

Effective as of 01-MAR-07

BURROUGHS, GLORIA, MD†

Provider ID: N/A

☒ 850 E LATHAM AVE STE 101
HEMET, CA 92543

Effective as of 01-OCT-17

BURROUGHS, GLORIA, MD†

Provider ID: N/A

☒ 850 E LATHAM AVE STE 101
HEMET, CA 92543

Effective as of 01-OCT-17

BURROUGHS, GLORIA, MD†

Provider ID: N/A

☒ 850 E LATHAM AVE STE 101
HEMET, CA 92543

Effective as of 01-OCT-17

REGISTERED PHYSICAL THERAPIST

MONTERO, MARIA, PT

Provider ID: N/A

☒ 1515 W FLORIDA AVE STE E
HEMET, CA 92543

Effective as of 01-APR-23

MONTERO, MARIA, PT

Provider ID: N/A

☒ 1515 W FLORIDA AVE STE E
HEMET, CA 92543

Effective as of 01-APR-23

SMITH, DIANNE, PT†

Provider ID: N/A

☒ 1515 W FLORIDA AVE STE E
HEMET, CA 92543

Effective as of 01-JUN-17

RHEUMATOLOGY

COLBURN, KEITH, MD†

Provider ID: N/A

☒ 949 CALHOUN PL STE F
HEMET, CA 92543

Effective as of 01-MAR-21

MEHTA, AMAL, MD†

Provider ID: N/A

☒ 949 CALHOUN PL STE F
HEMET, CA 92543

Effective as of 01-JUL-23

MEHTA, AMAL, MD†

Provider ID: N/A

☒ 949 CALHOUN PL STE F
HEMET, CA 92543

Effective as of 01-SEP-18

RAMASWAMY, DHARMARAJAN, MD†

**C1. Lista de proveedores de la red
Médico de atención especializada**

Provider ID: N/A

949 CALHOUN PL STE F
HEMET, CA 92543
Effective as of 01-SEP-18

**RAMASWAMY,
DHARMARAJAN, MD†**

Provider ID: N/A

949 CALHOUN PL STE F
HEMET, CA 92543
Effective as of 01-JUL-23

***SURGERY COLON
SURGERY***

GORSKI, TITO, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-MAY-22

GORSKI, TITO, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-MAY-22

SURGERY GENERAL

ATCHISON, MARVIN, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-SEP-22

ATCHISON, MARVIN, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-MAY-22

ATCHISON, MARVIN, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-MAY-22

ATCHISON, MARVIN, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-JUL-21

ATCHISON, MARVIN, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-JUL-21

ATCHISON, MARVIN, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-DEC-21

ATCHISON, MARVIN, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-DEC-20

BARRERA, KAYLENE, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-MAY-22

BARRERA, KAYLENE, MD†

Provider ID: N/A

3853 W STETSON AVE STE

105

HEMET, CA 92545
Effective as of 01-MAY-22

BARRERA, KAYLENE, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-APR-22

BARRERA, KAYLENE, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-SEP-22

GORSKI, TITO, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-SEP-22

GORSKI, YARA, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-SEP-22

GORSKI, TITO, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-APR-22

GORSKI, TITO, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-FEB-24

**C1. Lista de proveedores de la red
Médico de atención especializada**

IGWE, DANIEL, MD†

Provider ID: N/A

1225 E LATHAM AVE STE A
HEMET, CA 92543

Effective as of 01-JUL-18

IGWE, DANIEL, MD†

Provider ID: N/A

1225 E LATHAM AVE STE A
HEMET, CA 92543

Effective as of 01-JUL-18

IGWE, DANIEL, MD†

Provider ID: N/A

1225 E LATHAM AVE STE A
HEMET, CA 92543

Effective as of 01-JUL-18

JOHNSEN, HEGE, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545

Effective as of 01-SEP-22

JOHNSEN, HEGE, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545

Effective as of 01-MAY-22

JOHNSEN, HEGE, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545

Effective as of 01-MAY-22

JOHNSEN, HEGE, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545

Effective as of 01-APR-22

MAC, OLIVIA, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545

Effective as of 01-DEC-22

NAFIU, BOLAJI, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545

Effective as of 01-APR-20

NAFIU, BOLAJI, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545

Effective as of 01-SEP-22

NOURI, SARVENAZ, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545

Effective as of 01-NOV-22

SHARMA, SURENDRA, MD†

Provider ID: N/A

4020 W FLORIDA AVE
HEMET, CA 92545

Effective as of 01-SEP-09

SHARMA, SURENDRA, MD†

Provider ID: N/A

4020 W FLORIDA AVE
HEMET, CA 92545

Effective as of 01-SEP-09

SHARMA, SURENDRA, MD†

Provider ID: N/A

4020 W FLORIDA AVE

HEMET, CA 92545

Effective as of 01-SEP-00

TIU, BRIAN, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545

Effective as of 01-SEP-22

WANG, XIUJIE, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545

Effective as of 01-SEP-19

WANG, XIUJIE, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545

Effective as of 01-DEC-21

SURGERY GENERAL

VASCULAR

GORSKI, YARA, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545

Effective as of 01-MAY-22

GORSKI, YARA, MD†

Provider ID: N/A

3853 W STETSON AVE STE
105
HEMET, CA 92545

Effective as of 01-MAY-22

KARMUR, AMIT, DO†

Provider ID: N/A

3853 W STETSON AVE STE
105

C1. Lista de proveedores de la red Médico de atención especializada

HEMET, CA 92545
Effective as of 01-JAN-22

NAFIU, BOLAJI, MD†

Provider ID: N/A
☒ 3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-DEC-21

NAFIU, BOLAJI, MD†

Provider ID: N/A
☒ 3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-MAY-22

TIU, BRIAN, MD†

Provider ID: N/A
☒ 3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-APR-22

WANG, XIUJIE, MD†

Provider ID: N/A
☒ 3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-OCT-20

WANG, XIUJIE, MD†

Provider ID: N/A
☒ 3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-OCT-20

WANG, XIUJIE, MD†

Provider ID: N/A
☒ 3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-MAY-22

WANG, XIUJIE, MD†

Provider ID: N/A
☒ 3853 W STETSON AVE STE
105
HEMET, CA 92545
Effective as of 01-MAY-22

SURGERY HEAD

LE, SANG, MD†

Provider ID: N/A
☒ 3889 W STETSON AVE STE
100
HEMET, CA 92545
Effective as of 01-JUL-15

SURGERY ORTHOPEDIC

ALLEN, JONATHAN, MD†

Provider ID: N/A
☒ 3889 W STETSON AVE STE
100
HEMET, CA 92545
Teleservice
Effective as of 01-JUL-15

ALLEN, JONATHAN, MD†

Provider ID: N/A
☒ 3889 W STETSON AVE STE
100
HEMET, CA 92545
Teleservice
Effective as of 01-DEC-21

ALLEN, JONATHAN, MD†

Provider ID: N/A
☒ 3889 W STETSON AVE STE
100
HEMET, CA 92545
Teleservice
Effective as of 01-APR-24

ALLEN, JONATHAN, MD†

Provider ID: N/A

☒ 3889 W STETSON AVE STE
100
HEMET, CA 92545
Teleservice
Effective as of 01-DEC-21

BURTON, PAUL, DO†

Provider ID: N/A
☒ 3889 W STETSON AVE STE
100
HEMET, CA 92545
Effective as of 01-APR-24

BURTON, PAUL, DO†

Provider ID: N/A
☒ 3889 W STETSON AVE STE
100
HEMET, CA 92545
Effective as of 01-DEC-21

BURTON, PAUL, DO†

Provider ID: N/A
☒ 3889 W STETSON AVE STE
100
HEMET, CA 92545
Effective as of 01-DEC-21

BURTON, PAUL, DO†

Provider ID: N/A
☒ 3889 W STETSON AVE STE
100
HEMET, CA 92545
Effective as of 01-JUL-15

BURTON, PAUL, DO†

Provider ID: N/A
☒ 3889 W STETSON AVE STE
100
HEMET, CA 92545
Effective as of 01-MAR-21


CAPUTO, ROY, MD

Provider ID: N/A
☒ 3889 W STETSON AVE STE
100


**C1. Lista de proveedores de la red
Médico de atención especializada**

HEMET, CA 92545
Effective as of 01-APR-24


CHAN, JASON, MD

Provider ID: N/A
 3889 W STETSON AVE STE 100
 HEMET, CA 92545
 Effective as of 01-JUL-24


ELSISSY, PETER, MD†

Provider ID: N/A
 3889 W STETSON AVE STE 100
 HEMET, CA 92545
 Effective as of 01-JUL-24


ELSISSY, PETER, MD†

Provider ID: N/A
 3889 W STETSON AVE STE 100
 HEMET, CA 92545
 Effective as of 01-MAR-24


ELSISSY, PETER, MD†

Provider ID: N/A
 3889 W STETSON AVE STE 100
 HEMET, CA 92545
 Effective as of 01-MAY-16


ELSISSY, PETER, MD†

Provider ID: N/A
 3889 W STETSON AVE STE 100
 HEMET, CA 92545
 Effective as of 01-AUG-21


ELSISSY, PETER, MD†

Provider ID: N/A
 3889 W STETSON AVE STE 100
 HEMET, CA 92545
 Effective as of 01-AUG-21


GHAZAL, RONNY, MD

Provider ID: N/A
 3889 W STETSON AVE STE 100
 HEMET, CA 92545
 Effective as of 01-MAR-24


GRAMES, BARRY, MD†

Provider ID: N/A
 3889 W STETSON AVE STE 100
 HEMET, CA 92545
 Effective as of 01-MAR-24


GRAMES, BARRY, MD†

Provider ID: N/A
 3889 W STETSON AVE STE 100
 HEMET, CA 92545
 Effective as of 01-JUL-24


GRAMES, BARRY, MD†

Provider ID: N/A
 3889 W STETSON AVE STE 100
 HEMET, CA 92545
 Effective as of 01-MAY-16

GRAMES, BARRY, MD†

Provider ID: N/A
 3889 W STETSON AVE STE 200
 HEMET, CA 92545
 Effective as of 01-MAR-21

GUSTAFSON, GEORGE, MD†


Provider ID: N/A
 3889 W STETSON AVE STE 100
 HEMET, CA 92545
 Effective as of 01-AUG-15

GUSTAFSON, GEORGE, MD†


Provider ID: N/A
 3889 W STETSON AVE STE

100
 HEMET, CA 92545
 Effective as of 01-JUL-24


HADLEY, ZACHARY, MD†

Provider ID: N/A
 3889 W STETSON AVE STE 100
 HEMET, CA 92545
 Effective as of 01-JUL-24


HADLEY, ZACHARY, MD

Provider ID: N/A
 3889 W STETSON AVE HEMET, CA 92545
 Effective as of 01-MAY-24


HUSAIN, ASGHAR, MD

Provider ID: N/A
 3889 W STETSON AVE STE 100
 HEMET, CA 92545
 Effective as of 01-MAR-24


LAROSE, CONNOR, MD†

Provider ID: N/A
 3889 W STETSON AVE STE 100
 HEMET, CA 92545
 Effective as of 01-MAR-21

LE, SANG, MD†

Provider ID: N/A
 3889 W STETSON AVE STE 100
 HEMET, CA 92545
 Effective as of 01-JUL-15

LE, SANG, MD†

Provider ID: N/A
 3889 W STETSON AVE STE 100
 HEMET, CA 92545
 Effective as of 01-JUL-15

C1. Lista de proveedores de la red Médico de atención especializada

LE, SANG, MD†

Provider ID: N/A

3889 W STETSON AVE STE
100
HEMET, CA 92545
Effective as of 01-NOV-16

LE, SANG, MD†

Provider ID: N/A

3889 W STETSON AVE STE
100
HEMET, CA 92545
Effective as of 01-MAR-21

MATIKO, JAMES, MD†

Provider ID: N/A

3889 W STETSON AVE STE
100
HEMET, CA 92545
Effective as of 01-MAR-24

PANSE, MILIND, MD†

Provider ID: N/A

1225 E LATHAM AVE STE A
HEMET, CA 92543*
Effective as of 01-JUL-23

POWERS, BRET, DO

Provider ID: N/A

3889 W STETSON AVE STE
100
HEMET, CA 92545
Effective as of 01-SEP-24

WONG, ANDREW, MD†

Provider ID: N/A

1011 E DEVONSHIRE AVE
STE 203
HEMET, CA 92543
Effective as of 01-NOV-09

UROLOGY

NIHIRA, MIKIO, MD†

Provider ID: N/A

1225 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-OCT-21

NIHIRA, MIKIO, MD†

Provider ID: N/A

1225 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-OCT-21

FAMILY PRACTICE

CHISUM, FAITH, MD

Provider ID: N/A

949 PALM AVE
IMPERIAL BEACH, CA 91932
Effective as of 01-FEB-23

SUMMERS-DAY, COURTNEY, MD†

Provider ID: N/A

949 PALM AVE
IMPERIAL BEACH, CA
91932*
Effective as of 01-JUL-22

INTERNAL MEDICINE

RYAN, DANA, MD

Provider ID: N/A

949 PALM AVE
IMPERIAL BEACH, CA 91932
Effective as of 01-APR-23

REGISTERED PHYSICAL THERAPIST

CHENG, BRANDON, PT

Provider ID: N/A

600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
Effective as of 01-FEB-24

DORSEY, KYLE, PT

Provider ID: N/A

600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
Effective as of 01-FEB-24

HERMAN, RACHEL, PT

Provider ID: N/A

600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
Effective as of 01-FEB-24

KARANDE, PRACHI, PT†

Provider ID: N/A

600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
Effective as of 01-JAN-22

NGUYEN, TIA, PT

Provider ID: N/A

600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
Effective as of 01-MAR-24

NOVENCIDO, ANDREW, PT†

Provider ID: N/A

600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
Effective as of 01-SEP-22

SUGGS, SARAH, PT

Provider ID: N/A

600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
Effective as of 01-MAY-23

VILLANUEVA, GIOVANNI, PT†

Provider ID: N/A

600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
Effective as of 01-JAN-21

ALLERGY IMMUNOLOGY

CARR, WARNER, MD

Provider ID: N/A


15785 LAGUNA CANYON

C1. Lista de proveedores de la red Médico de atención especializada

RD STE 100
IRVINE, CA 92618
Effective as of 01-JUL-23


FRIEDMAN, BRUCE, MD†

Provider ID: N/A

 22 ODYSSEY STE 240
IRVINE, CA 92618
Effective as of 01-JUL-23


FRIEDMAN, BRUCE, MD†

Provider ID: N/A

 22 ODYSSEY STE 240
IRVINE, CA 92618
Effective as of 01-JUL-23


FRIEDMAN, BRUCE, MD†

Provider ID: N/A

 22 ODYSSEY STE 240
IRVINE, CA 92618
Effective as of 01-DEC-21


FRIEDMAN, BRUCE, MD†

Provider ID: N/A

 22 ODYSSEY STE 240
IRVINE, CA 92618
Effective as of 01-DEC-21


FRIEDMAN, BRUCE, MD†

Provider ID: N/A

 22 ODYSSEY STE 240
IRVINE, CA 92618
Effective as of 01-DEC-21


FRIEDMAN, BRUCE, MD†

Provider ID: N/A

 22 ODYSSEY STE 240
IRVINE, CA 92618
Effective as of 01-DEC-21


FRIEDMAN, BRUCE, MD†

Provider ID: N/A

 22 ODYSSEY STE 240
IRVINE, CA 92618
Effective as of 01-DEC-21


FRIEDMAN, BRUCE, MD†

Provider ID: N/A

 22 ODYSSEY STE 240
IRVINE, CA 92618
Effective as of 01-MAY-23


FRIEDMAN, BRUCE, MD†

Provider ID: N/A

 22 ODYSSEY STE 240
IRVINE, CA 92618
Effective as of 01-MAY-23


FRIEDMAN, BRUCE, MD†

Provider ID: N/A

 22 ODYSSEY STE 240
IRVINE, CA 92618
Effective as of 01-MAY-23


FRIEDMAN, BRUCE, MD†

Provider ID: N/A

 22 ODYSSEY STE 240
IRVINE, CA 92618
Effective as of 01-MAY-23


FRIEDMAN, BRUCE, MD†

Provider ID: N/A

 22 ODYSSEY STE 240
IRVINE, CA 92618
Effective as of 01-MAY-23


FRIEDMAN, BRUCE, MD†

Provider ID: N/A

 22 ODYSSEY STE 240
IRVINE, CA 92618
Effective as of 01-MAY-23


LEE-KIM, CHRISTINE, DO

Provider ID: N/A

 15785 LAGUNA CANYON
RD STE 100
IRVINE, CA 92618
Effective as of 01-FEB-23


LEE-KIM, CHRISTINE, DO

Provider ID: N/A

 15785 LAGUNA CANYON
RD STE 100
IRVINE, CA 92618
Effective as of 01-FEB-23


MEHTA, VINAY, MD

Provider ID: N/A

 15785 LAGUNA CANYON
RD STE 100
IRVINE, CA 92618
Effective as of 01-MAR-23


MEHTA, VINAY, MD

Provider ID: N/A

 15785 LAGUNA CANYON
RD STE 100
IRVINE, CA 92618
Effective as of 01-MAR-23


MEHTA, VINAY, MD

Provider ID: N/A

 15785 LAGUNA CANYON
RD STE 100
IRVINE, CA 92618
Effective as of 01-MAR-23


MEHTA, VINAY, MD

Provider ID: N/A

 15785 LAGUNA CANYON
RD STE 100
IRVINE, CA 92618
Effective as of 01-MAR-23


MEHTA, VINAY, MD

Provider ID: N/A

 15785 LAGUNA CANYON
RD STE 100
IRVINE, CA 92618
Effective as of 01-MAR-23

VENKAT, GEETA, MD†

Provider ID: N/A

 18 ENDEAVOR STE 208
IRVINE, CA 92618

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-OCT-17

VENKAT, GEETA, MD[†]

Provider ID: N/A

📍 18 ENDEAVOR STE 208
IRVINE, CA 92618

Effective as of 01-OCT-17

ANESTHESIOLOGY

HO, LARRY, MD

Provider ID: N/A

📍 15701 ROCKFIELD BLVD
IRVINE, CA 92618

Effective as of 01-SEP-10

PERERA-THANGARATNAM, D, MD[†]

Provider ID: N/A

📍 5 HOLLAND STE 101
IRVINE, CA 92618

Effective as of 01-SEP-19

ANESTHESIOLOGY PAIN MANAGEMENT

BESHAI, ALFRED, MD

Provider ID: N/A

📍 16405 SAND CANYON AVE
STE 210
IRVINE, CA 92618

Effective as of 01-MAR-24

BESHAI, ALFRED, MD

Provider ID: N/A

📍 16405 SAND CANYON AVE
STE 210
IRVINE, CA 92618

Effective as of 01-DEC-23

BESHAI, ALFRED, MD

Provider ID: N/A

📍 16405 SAND CANYON AVE
STE 210
IRVINE, CA 92618

Effective as of 01-JUN-22

HO, LARRY, MD

Provider ID: N/A

📍 15701 ROCKFIELD BLVD
IRVINE, CA 92618

Effective as of 01-APR-11

HO, LARRY, MD

Provider ID: N/A

📍 15701 ROCKFIELD BLVD
IRVINE, CA 92618

Effective as of 01-OCT-01

JILLANI, ASIF, MD

Provider ID: N/A

📍 16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618

Effective as of 01-NOV-17

JILLANI, ASIF, MD

Provider ID: N/A

📍 16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618

Effective as of 01-NOV-17

MAHROU, REZA, MD[†]

Provider ID: N/A

📍 113 WATERWORKS WAY
STE 345
IRVINE, CA 92618

Effective as of 01-JAN-15

MAHROU, REZA, MD[†]

Provider ID: N/A

📍 113 WATERWORKS WAY
STE 345
IRVINE, CA 92618

Effective as of 01-JAN-15

RAFIZAD, AMIR, MD[†]

Provider ID: N/A

📍 113 WATERWORKS WAY

STE 345

IRVINE, CA 92618

Effective as of 01-JAN-15

RAFIZAD, AMIR, MD[†]

Provider ID: N/A

📍 113 WATERWORKS WAY
STE 345
IRVINE, CA 92618

Effective as of 01-JAN-15

AUDIOLOGIST

NIAVARANY, PIRAYEH, AuD

Provider ID: N/A

📍 18 ENDEAVOR STE 208
IRVINE, CA 92618

Effective as of 01-NOV-22

NIAVARANY, PIRAYEH, AuD

Provider ID: N/A

📍 18 ENDEAVOR STE 208
IRVINE, CA 92618

Effective as of 01-NOV-22

CARDIAC

ELECTROPHYSIOLOGY

BURRIS, RYAN, MD

Provider ID: N/A

📍 16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-NOV-22

BURRIS, RYAN, MD

Provider ID: N/A

📍 16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-NOV-22

MITIKU, TEFERI, MD[†]


Provider ID: N/A

📍 16305 SAND CANYON AVE


**C1. Lista de proveedores de la red
Médico de atención especializada**

STE 255
IRVINE, CA 92618
Effective as of 01-FEB-22

MITIKU, TEFERI, MD†


Provider ID: N/A
 16305 SAND CANYON AVE
STE 255
IRVINE, CA 92618
Effective as of 01-FEB-22

WARRIER, NIKHIL, MD†


Provider ID: N/A
 16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618
Effective as of 01-OCT-23

**CARDIOVASCULAR
DISEASE**


ASHTIANI, ALI, MD

Provider ID: N/A
 16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618
Effective as of 01-FEB-22

ASHTIANI, ALI, MD

Provider ID: N/A
 16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618
Effective as of 01-FEB-22

ASHTIANI, ALI, MD


Provider ID: N/A
 16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618
Effective as of 01-MAY-22

ASHTIANI, ALI, MD


Provider ID: N/A
 16300 SAND CANYON AVE

STE 201
IRVINE, CA 92618
Effective as of 01-OCT-23


COHEN, STEPHEN, MD†

Provider ID: N/A
 16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618
Effective as of 01-OCT-23


COHEN, STEPHEN, MD†

Provider ID: N/A
 16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618
Effective as of 01-MAY-22


COHEN, STEPHEN, MD†

Provider ID: N/A
 16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618
Effective as of 01-APR-18

COHEN, STEPHEN, MD†

Provider ID: N/A
 16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618
Effective as of 01-APR-18

COHEN, STEPHEN, MD†

Provider ID: N/A
 16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618
Effective as of 01-APR-18

DOAN VAN, NICOLAS, MD†

Provider ID: N/A
 16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618
Effective as of 01-DEC-21


DOAN VAN, NICOLAS, MD†

Provider ID: N/A
 16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618
Effective as of 01-OCT-23


ELSAYED, SARAH SABRY, MD†

Provider ID: N/A
 16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618
Effective as of 01-OCT-23


ELSAYED, SARAH SABRY, MD†

Provider ID: N/A
 16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618
Effective as of 01-JAN-22

ESLAMI, BAHRAM, MD†

Provider ID: N/A
 16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618
Effective as of 01-APR-18

ESLAMI, BAHRAM, MD†

Provider ID: N/A
 16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618
Effective as of 01-APR-18


ESLAMI, BAHRAM, MD†

Provider ID: N/A
 16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618
Effective as of 01-APR-18


ESLAMI, BAHRAM, MD†

Provider ID: N/A


**C1. Lista de proveedores de la red
Médico de atención especializada**

 16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618
Effective as of 01-APR-18


ESLAMI, BAHRAM, MD†
Provider ID: N/A

 16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618
Effective as of 01-OCT-23


ESLAMI-FARSANI, MAHMOUD, MD†
Provider ID: N/A

 16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618
Effective as of 01-OCT-23


ESLAMI-FARSANI, MAHMOUD, MD†
Provider ID: N/A

 16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618
Effective as of 01-APR-18

MELTZER, PAUL, MD†
Provider ID: N/A

 16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618
Effective as of 01-APR-18

MELTZER, PAUL, MD†
Provider ID: N/A


 16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618
Effective as of 01-APR-18

MELTZER, PAUL, MD†
Provider ID: N/A


 16300 SAND CANYON AVE

STE 201
IRVINE, CA 92618
Effective as of 01-APR-18


MELTZER, PAUL, MD†
Provider ID: N/A

 16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618
Effective as of 01-JAN-20


MELTZER, PAUL, MD†
Provider ID: N/A

 16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618
Effective as of 01-MAY-22


MELTZER, PAUL, MD†
Provider ID: N/A

 16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618
Effective as of 01-OCT-23


NGUYEN, HOANG, MD†
Provider ID: N/A

 16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618
Effective as of 01-OCT-23


NGUYEN, HUY, MD†
Provider ID: N/A

 16305 SAND CANYON AVE
STE 255
IRVINE, CA 92618
Effective as of 01-JAN-20


NGUYEN, HOANG, MD†
Provider ID: N/A

 16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618
Effective as of 01-DEC-21


NI, YU-MING, MD†
Provider ID: N/A

 16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618
Effective as of 01-AUG-22


NI, YU-MING, MD†
Provider ID: N/A

 16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618
Effective as of 01-OCT-23


PATEL, SANJIV, MD†
Provider ID: N/A

 16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618
Effective as of 01-OCT-23


PATEL, SANJIV, MD†
Provider ID: N/A

 16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618
Effective as of 01-JAN-22

WARRIER, NIKHIL, MD†
Provider ID: N/A


 16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618
Effective as of 01-DEC-21

WERTMAN, BRETT, MD
Provider ID: N/A


 16305 SAND CANYON AVE
STE 255
IRVINE, CA 92618
Effective as of 01-JAN-20

WONG, JENNIFER, MD†
Provider ID: N/A


**C1. Lista de proveedores de la red
Médico de atención especializada**

 16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618
Effective as of 01-OCT-23


WONG, JENNIFER, MD[†]
Provider ID: N/A

 16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618
Effective as of 01-JAN-22


YALVAC, ETHAN, MD[†]
Provider ID: N/A

 16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618
Effective as of 01-JAN-20


YALVAC, ETHAN, MD[†]
Provider ID: N/A

 16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618
Effective as of 01-MAY-22

YALVAC, ETHAN, MD[†]
Provider ID: N/A

 16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618
Effective as of 01-OCT-23

YANG, TAE, MD[†]
Provider ID: N/A

 16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618
Effective as of 01-OCT-23


YANG, TAE, MD[†]
Provider ID: N/A

 16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618


Effective as of 01-JAN-22

***CERTIFIED
ACUPUNCTURIST***


CHOI, JI EI, LAC[†]
Provider ID: N/A

 15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618
Effective as of 01-MAR-22


CHOI, JI EI, LAC[†]
Provider ID: N/A

 15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618
Effective as of 01-FEB-23


CHOI, JI EI, LAC[†]
Provider ID: N/A

 15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618
Effective as of 01-OCT-22


CHOI, JI EI, LAC[†]
Provider ID: N/A

 15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618
Effective as of 01-OCT-22

CHOI, JI EI, LAC[†]
Provider ID: N/A


 15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618
Effective as of 01-OCT-22

CHOI, JI EI, LAC[†]
Provider ID: N/A


 15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618

Effective as of 01-OCT-22


HONG, HEE KYUNG, LAC
Provider ID: N/A

 113 WATERWORKS WAY
STE 205
IRVINE, CA 92618
Effective as of 01-AUG-22


HONG, HEE KYUNG, LAC
Provider ID: N/A

 113 WATERWORKS WAY
STE 205
IRVINE, CA 92618
Effective as of 01-AUG-22


KIM, CHEL, LAC
Provider ID: N/A

 113 WATERWORKS WAY
STE 205
IRVINE, CA 92618
Effective as of 01-MAY-21


KIM, LAUREN SOOJIN, LAC
Provider ID: N/A

 113 WATERWORKS WAY
STE 205
IRVINE, CA 92618
Effective as of 01-MAY-21

KIM, LAUREN SOOJIN, LAC
Provider ID: N/A

 113 WATERWORKS WAY
STE 205
IRVINE, CA 92618
Effective as of 01-MAY-21

LEE, BRIAN, LAC[†]
Provider ID: N/A

 15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618
Effective as of 01-MAY-21

LEE, BRIAN, LAC[†]

**C1. Lista de proveedores de la red
Médico de atención especializada**

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618
Effective as of 01-MAY-21

LEE, BRIAN, LAC†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618
Effective as of 01-MAY-21

LEE, BRIAN, LAC†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618
Effective as of 01-MAY-21

LEE, BRIAN, LAC†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618
Effective as of 01-MAY-21

LEE, BRIAN, LAC†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618
Effective as of 01-AUG-22

LEE, BRIAN, LAC†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618
Effective as of 01-FEB-23

LEE, SEMI, LAC

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 330

IRVINE, CA 92618

Effective as of 01-JUL-23

LEE, SEMI, LAC

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618
Effective as of 01-JUL-23

LEE, SEMI, LAC

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618
Effective as of 01-JUL-23

LEE, SEMI, LAC

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618
Effective as of 01-JUL-23

LEE, SEMI, LAC

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 330
IRVINE, CA 92618
Effective as of 01-JUN-23

**PARSI KANEMOTO, MARYAM,
LAC†**

Provider ID: N/A

22 ODYSSEY STE 165
IRVINE, CA 92618
Effective as of 01-SEP-21

**CERTIFIED NURSE
PRACTITIONER**

CARR, CHERYL, NP

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 100

IRVINE, CA 92618

Effective as of 01-APR-23

CARR, CHERYL, NP

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 100
IRVINE, CA 92618
Effective as of 01-APR-23

CARR, CHERYL, NP

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 100
IRVINE, CA 92618
Effective as of 01-MAY-23

CARR, CHERYL, NP

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 100
IRVINE, CA 92618
Effective as of 01-MAY-23

CARR, CHERYL, NP

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 100
IRVINE, CA 92618
Effective as of 01-JUN-24

CHOI, RANA, NP†

Provider ID: N/A

15775 LAGUNA CANYON
RD STE 210
IRVINE, CA 92618
Effective as of 01-SEP-19

DESAI, SONAM, NPF†

Provider ID: N/A

16300 SAND CANYON AVE
STE 311
IRVINE, CA 92618*
Effective as of 01-OCT-22

C1. Lista de proveedores de la red Médico de atención especializada

FERRANTE, JADE, NP

Provider ID: N/A

8607 IRVINE CENTER DR
IRVINE, CA 92618
Effective as of 01-NOV-23

LIU, GRACE, NP

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-MAY-23

LIU, GRACE, NP

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-MAY-23

PARK, SE, NP

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JUL-23

PARK, SE, NP

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JUN-24

PARK, SE, NP

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JUL-23

PARK, SE, NP

Provider ID: N/A

16305 SAND CANYON AVE
STE 200

IRVINE, CA 92618
Effective as of 01-JUL-23

PARK, SE, NP

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JUL-23

REED, BRENDYN, NP

Provider ID: N/A

8607 IRVINE CENTER DR
IRVINE, CA 92618
Effective as of 01-JUL-24

REED, BRENDYN, NP

Provider ID: N/A

8607 IRVINE CENTER DR
IRVINE, CA 92618
Effective as of 01-JUL-24

WU, JENNY, NP

Provider ID: N/A

16300 SAND CANYON AVE
STE 311
IRVINE, CA 92618
Effective as of 01-DEC-23

CERTIFIED REGISTERED NURSE MIDWIFE

MCDANIEL-DAVIS, SHAYNA, CRNM

Provider ID: N/A

16305 SAND CANYON AVE
STE 275
IRVINE, CA 92618
Effective as of 01-MAY-24

MCDANIEL-DAVIS, SHAYNA, CRNM

Provider ID: N/A

16305 SAND CANYON AVE

STE 275
IRVINE, CA 92618
Effective as of 01-MAY-24

SAJADI, ALISA, CRNM

Provider ID: N/A

16305 SAND CANYON AVE
STE 275
IRVINE, CA 92618
Effective as of 01-DEC-23

CHIROPRACTOR

KANG, KYUNG, DC

Provider ID: N/A

14875 JEFFREY RD STE 210
IRVINE, CA 92618
Effective as of 01-OCT-23

KIM, SEON-HOON SEAN, DC

Provider ID: N/A

113 WATERWORKS WAY
STE 205
IRVINE, CA 92618
Effective as of 01-OCT-23

KIM, SEON-HOON SEAN, DC

Provider ID: N/A

113 WATERWORKS WAY
STE 205
IRVINE, CA 92618
Effective as of 01-MAR-22

KIM, SEON-HOON SEAN, DC

Provider ID: N/A

113 WATERWORKS WAY
STE 205
IRVINE, CA 92618
Effective as of 01-MAR-22

KIM, SEON-HOON SEAN, DC

Provider ID: N/A

113 WATERWORKS WAY
STE 205
IRVINE, CA 92618

CI. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-JAN-23

WEDDLE, DIRK, DC

Provider ID: N/A

15375 BARRANCA PKWY
STE J104
IRVINE, CA 92618

Effective as of 01-JAN-18

CLINICAL NEUROPSYCHOLOGIST

BENNETT, LAUREN, PhD

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618*

Effective as of 01-OCT-22

BENNETT, LAUREN, PhD

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618*

Effective as of 01-OCT-22

BENNETT, LAUREN, PhD

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-SEP-24

BENNETT, LAUREN, PhD

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-SEP-24

SCHENEMAN, KELLY, PSYD

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-SEP-24

SCHENEMAN, KELLY, PSYD

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-SEP-24

DERMATOLOGY

BAGHERI, BITA, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-JAN-21

WANG, STEVEN, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618

Effective as of 01-JUL-22

WANG, STEVEN, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618

Effective as of 01-JUL-22

EMERGENCY MEDICINE

KADAKIA, AMAR, MD†

Provider ID: N/A

11 TECHNOLOGY DR
IRVINE, CA 92618

Effective as of 01-JAN-18

ENDOCRINOLOGY METABOLISM DIABETES

CHAVEZ, BRIAN, MD†

Provider ID: N/A

22 ODYSSEY STE 115
IRVINE, CA 92618

Teleservice

Effective as of 01-AUG-21

CHAVEZ, BRIAN, MD†

Provider ID: N/A

22 ODYSSEY STE 115
IRVINE, CA 92618

Teleservice

Effective as of 01-OCT-23

FARJOUDI, FARHAD, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 108
IRVINE, CA 92618

Effective as of 01-MAY-22

FARJOUDI, FARHAD, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 108
IRVINE, CA 92618

Effective as of 01-MAY-22

FARJOUDI, FARHAD, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 250
IRVINE, CA 92618

Effective as of 01-JUN-22

FARJOUDI, FARHAD, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 250
IRVINE, CA 92618

Effective as of 01-JUN-22

HOSSEINI, ALIREZA, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-MAR-22

HOSSEINI, ALIREZA, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-MAY-24

HOSSEINI, ALIREZA, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-MAR-22

HOSSEINI, ALIREZA, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-MAR-22

HOSSEINI, ALIREZA, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-MAR-22

HOSSEINI, ALIREZA, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-JUL-22

HOSSEINI, ALIREZA, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-JUL-22

HOSSEINI, ALIREZA, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-JUL-22

MARKMAN, LISA, MD

Provider ID: N/A

22 ODYSSEY STE 115
IRVINE, CA 92618

Effective as of 01-MAR-23

MARKMAN, LISA, MD

Provider ID: N/A

22 ODYSSEY STE 115
IRVINE, CA 92618

Effective as of 01-MAR-23

MARKMAN, LISA, MD

Provider ID: N/A

22 ODYSSEY STE 115
IRVINE, CA 92618

Effective as of 01-MAR-23

MARKMAN, LISA, MD

Provider ID: N/A

22 ODYSSEY STE 115
IRVINE, CA 92618

Effective as of 01-MAR-23

MEHTA, SHILPA, MD†

Provider ID: N/A

22 ODYSSEY STE 115
IRVINE, CA 92618

Teleservice

Effective as of 01-JUN-19

MEHTA, SHILPA, MD†

Provider ID: N/A

22 ODYSSEY STE 115
IRVINE, CA 92618

Teleservice

Effective as of 01-JAN-23

MEHTA, SHILPA, MD†

Provider ID: N/A

22 ODYSSEY STE 115
IRVINE, CA 92618

Teleservice

Effective as of 01-JUN-19

MEHTA, SHILPA, MD†

Provider ID: N/A

22 ODYSSEY STE 115
IRVINE, CA 92618

Teleservice

Effective as of 01-OCT-23

VYAS, URVI, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 311
IRVINE, CA 92618

Effective as of 01-JUN-24

VYAS, URVI, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 311
IRVINE, CA 92618

Effective as of 01-JUN-24

FAMILY PRACTICE

BURRIS, RYAN, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-FEB-23

BURRIS, RYAN, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-FEB-23

FAMILY PRACTICE

**C1. Lista de proveedores de la red
Médico de atención especializada**

SPORTS MEDICINE

RIVADENEYRA, ADAM, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618

Effective as of 01-NOV-17

RIVADENEYRA, ADAM, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618

Effective as of 01-JAN-19

***FEMALE PELVIC MED AND
RECONSTRUCTIVE SURG***

MWESIGWA, PATRICIA, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-MAR-22

SHOURESHI, POONE, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-SEP-23

SHOURESHI, POONE, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-SEP-23

GASTROENTEROLOGY

ASHRAF, HEBA, MD

Provider ID: N/A

113 WATERWORKS WAY

STE 155
IRVINE, CA 92618
Effective as of 01-JAN-23

ASHRAF, HEBA, MD

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-OCT-23

ASHRAF, HEBA, MD

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-NOV-22

ASHRAF, HEBA, MD

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-NOV-22

ASHRAF, HEBA, MD

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-SEP-22

ASHRAF, HEBA, MD

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-SEP-22

ASHRAF, HEBA, MD

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-SEP-22

ASHRAF, HEBA, MD

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-MAY-23

BABAKNIA, ARDALAN, MD†

Provider ID: N/A

15775 LAGUNA CANYON
RD STE 240
IRVINE, CA 92618

Effective as of 01-MAY-12

BABAKNIA, ARDALAN, MD†

Provider ID: N/A

15775 LAGUNA CANYON
RD STE 240
IRVINE, CA 92618

Effective as of 01-APR-11

BEMANIAN, SHAHROOZ, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-JUN-24

BEMANIAN, SHAHROOZ, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-MAY-16

BEMANIAN, SHAHROOZ, MD†

Provider ID: N/A


113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-OCT-23


BEMANIAN, SHAHROOZ, MD†

Provider ID: N/A


**C1. Lista de proveedores de la red
Médico de atención especializada**

 113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-JAN-21


BEMANIAN, SHAHROOZ, MD†
Provider ID: N/A

 113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-JAN-20


BEMANIAN, SHAHROOZ, MD†
Provider ID: N/A

 113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-JAN-16


BEMANIAN, SHAHROOZ, MD†
Provider ID: N/A

 113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-JAN-18


CHOI, DAVID, DO†
Provider ID: N/A

 113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-AUG-22

CHOI, DAVID, DO†
Provider ID: N/A


 113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-JUL-22

CHOI, DAVID, DO†
Provider ID: N/A


 113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-JUL-22


CHOI, DAVID, DO†
Provider ID: N/A

 113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-JUL-22


CHOI, DAVID, DO†
Provider ID: N/A

 113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-MAY-23


CHOI, DAVID, DO†
Provider ID: N/A

 113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-JUL-22


CHOI, DAVID, DO†
Provider ID: N/A

 113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-OCT-23

CHOI, DAVID, DO†
Provider ID: N/A


 113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-MAY-22

CHOI, DAVID, DO†
Provider ID: N/A


 113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-MAY-22

HWANG, CAROLINE, MD


Provider ID: N/A

 16405 SAND CANYON AVE
STE 280
IRVINE, CA 92618
Effective as of 01-JUN-23


HWANG, CAROLINE, MD
Provider ID: N/A

 16405 SAND CANYON AVE
STE 280
IRVINE, CA 92618
Effective as of 01-JUN-23


HWANG, CAROLINE, MD
Provider ID: N/A

 500 SUPERIOR AVE
STE 100
IRVINE, CA 92618
Effective as of 01-AUG-23


HWANG, CAROLINE, MD
Provider ID: N/A

 500 SUPERIOR AVE
STE 100
IRVINE, CA 92618
Effective as of 01-AUG-23


KAUFMAN, DAVID, DO
Provider ID: N/A

 18 ENDEAVOR STE 204
IRVINE, CA 92618
Effective as of 01-JUL-12

KUMAR, RASHMI, MD
Provider ID: N/A

 16405 SAND CANYON AVE
STE 280
IRVINE, CA 92618
Effective as of 01-OCT-23

KUMAR, RASHMI, MD
Provider ID: N/A

 16405 SAND CANYON AVE
STE 280
IRVINE, CA 92618

**C1. Lista de proveedores de la red
Médico de atención especializada**

Effective as of 01-OCT-23

LEE, PAUL, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618

Effective as of 01-OCT-23

LEE, JAMES, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-JUN-23

LEE, JAMES, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-JUN-23

LEE, PAUL, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618

Effective as of 01-JAN-23

LEE, PAUL, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-MAY-16

LEE, PAUL, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-JUN-24

LEE, PAUL, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-OCT-23

LEE, BRIAN, MD

Provider ID: N/A

16405 SAND CANYON AVE
IRVINE, CA 92618

Effective as of 01-AUG-24

LEE, PAUL, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-JAN-18

LEE, PAUL, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-JAN-23

LEE, PAUL, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-JAN-21

LEE, PAUL, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-JAN-20

OHARA, JUN ICHI, MD

Provider ID: N/A

22 ODYSSEY STE 170A
IRVINE, CA 92618

Effective as of 01-JUN-19

OMAN, MATTHEW, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-JUN-24

OMAN, MATTHEW, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618

Effective as of 01-JAN-23

OMAN, MATTHEW, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618

Effective as of 01-OCT-23

OMAN, MATTHEW, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-OCT-23

OMAN, MATTHEW, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-JAN-18

OMAN, MATTHEW, MD†

Provider ID: N/A


113 WATERWORKS WAY
STE 155
IRVINE, CA 92618

Effective as of 01-JAN-20


OMAN, MATTHEW, MD†

Provider ID: N/A


**C1. Lista de proveedores de la red
Médico de atención especializada**

 113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-JAN-21


OMAN, MATTHEW, MD†
Provider ID: N/A

 113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-FEB-18


OMAN, MATTHEW, MD†
Provider ID: N/A

 113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-AUG-18


OMAN, MATTHEW, MD†
Provider ID: N/A

 113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-AUG-18


SINGH, HARDEEP, MD†
Provider ID: N/A

 16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-OCT-20

SINGH, HARDEEP, MD†
Provider ID: N/A


 16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-MAY-17

SINGH, HARDEEP, MD†
Provider ID: N/A


 16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-MAY-17


SINGH, HARDEEP, MD†
Provider ID: N/A

 16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-JUN-23


SINGH, HARDEEP, MD†
Provider ID: N/A

 16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-JUN-23


YAP, KONG PENG, MD†
Provider ID: N/A

 15825 LAGUNA CANYON
RD STE 106
IRVINE, CA 92618
Effective as of 01-JAN-14


YU, VICTOR, MD†
Provider ID: N/A

 113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-JAN-18

YU, VICTOR, MD†
Provider ID: N/A


 113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-JAN-20

YU, VICTOR, MD†
Provider ID: N/A


 113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-JAN-21

YU, VICTOR, MD†


Provider ID: N/A

 113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-JAN-23


YU, FANG, MD†
Provider ID: N/A

 15825 LAGUNA CANYON
RD STE 106
IRVINE, CA 92618
Effective as of 01-JAN-23


YU, FANG, MD†
Provider ID: N/A

 15825 LAGUNA CANYON
RD STE 106
IRVINE, CA 92618
Effective as of 01-JAN-18


YU, VICTOR, MD†
Provider ID: N/A

 113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-JUN-24


YU, FANG, MD†
Provider ID: N/A

 15825 LAGUNA CANYON
RD STE 106
IRVINE, CA 92618
Effective as of 01-OCT-23

YU, VICTOR, MD†
Provider ID: N/A

 113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-OCT-23

YU, VICTOR, MD†
Provider ID: N/A

 113 WATERWORKS WAY
STE 155

**C1. Lista de proveedores de la red
Médico de atención especializada**

IRVINE, CA 92618
Effective as of 01-MAY-16

**GYNECOLOGIC
ONCOLOGY**

ABAID, LISA, MD†

Provider ID: N/A
16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-NOV-18

BECK, TIFFANY, MD†

Provider ID: N/A
16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-AUG-22

BECK, TIFFANY, MD†

Provider ID: N/A
16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-AUG-22

LEVINE, MONICA, MD

Provider ID: N/A
16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-OCT-23

LEVINE, MONICA, MD

Provider ID: N/A
16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-OCT-23

MENDIVIL, ALBERTO, MD†

Provider ID: N/A
16105 SAND CANYON AVE
STE 260

IRVINE, CA 92618
Effective as of 01-FEB-23

MENDIVIL, ALBERTO, MD†

Provider ID: N/A
16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-AUG-22

MENDIVIL, ALBERTO, MD†

Provider ID: N/A
16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-AUG-22

MENDIVIL, ALBERTO, MD†

Provider ID: N/A
16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-FEB-23

MENDIVIL, ALBERTO, MD†

Provider ID: N/A
16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-FEB-23

**HEMATOLOGY /
ONCOLOGY**

GOLDENSON, BENJAMIN, MD

Provider ID: N/A
16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618
Effective as of 01-AUG-23

HOMSI, YASER, MD

Provider ID: N/A
16105 SAND CANYON AVE
STE 230

IRVINE, CA 92618
Effective as of 01-MAY-24

NANGIA, CHAITALI, MD†

Provider ID: N/A
16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618*
Effective as of 01-OCT-22

NANGIA, CHAITALI, MD†

Provider ID: N/A
16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618*
Effective as of 01-OCT-22

PANDIT, LALITA, MD†

Provider ID: N/A
16300 SAND CANYON AVE
STE 609
IRVINE, CA 92618
Teleservice
Effective as of 01-OCT-19

PANDIT, LALITA, MD†

Provider ID: N/A
16300 SAND CANYON AVE
STE 609
IRVINE, CA 92618
Teleservice
Effective as of 01-OCT-21

SEERY, TARA, MD†

Provider ID: N/A
16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618
Effective as of 01-JAN-21

SEERY, TARA, MD†

Provider ID: N/A
16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618

**C1. Lista de proveedores de la red
Médico de atención especializada**

Effective as of 01-JAN-21

HEPATOLOGY

FONG, TSE LING, MD

Provider ID: N/A

16405 SAND CANYON AVE
STE 280
IRVINE, CA 92618

Effective as of 01-JAN-24

FONG, TSE LING, MD

Provider ID: N/A

16405 SAND CANYON AVE
STE 280
IRVINE, CA 92618

Effective as of 01-JAN-24

INFECTIOUS DISEASE

SARAFIAN, FARJAD, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-MAY-23

SARAFIAN, FARJAD, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-APR-23

SARAFIAN, FARJAD, MD

Provider ID: N/A

16100 SAND CANYON AVE
STE 240
IRVINE, CA 92618

Effective as of 01-AUG-20

SARAFIAN, FARJAD, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 220

IRVINE, CA 92618

Effective as of 01-APR-23

INTERNAL MEDICINE

AHDOOT, JACOB, MD†

Provider ID: N/A

15775 LAGUNA CANYON
RD STE 220
IRVINE, CA 92618

Effective as of 01-JAN-20

APPEL, RICHARD, MD†

Provider ID: N/A

11 TECHNOLOGY DR
IRVINE, CA 92618

Effective as of 01-JAN-18

BRAVO, ARLENE, MD

Provider ID: N/A

16405 SAND CANYON AVE
STE 280
IRVINE, CA 92618

Effective as of 01-JUL-24

BRAVO, ARLENE, MD

Provider ID: N/A

16405 SAND CANYON AVE
STE 280
IRVINE, CA 92618

Effective as of 01-JUL-24

CABRERA, JUAN, MD

Provider ID: N/A

11 TECHNOLOGY DR
IRVINE, CA 92618

Effective as of 01-JAN-18

CHENG, CATHY, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 230
IRVINE, CA 92618

Teleservice

Effective as of 01-JUL-23

CHENG, CATHY, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 230
IRVINE, CA 92618

Teleservice

Effective as of 01-JUL-23

CHIEN, JOHN, MD†

Provider ID: N/A

16200 SAND CANYON AVE
IRVINE, CA 92618

Effective as of 01-JAN-18

DANESH, HOUMAN, MD†

Provider ID: N/A

11 TECHNOLOGY DR
IRVINE, CA 92618*

Effective as of 01-JAN-18

DAVIS, BARBARA, DO†

Provider ID: N/A

11 TECHNOLOGY DR
IRVINE, CA 92618

Effective as of 01-JAN-18

EL-BERSHAWI, AHMED, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 225
IRVINE, CA 92618

Effective as of 01-MAR-21

GEIGER, ERIK, MD†

Provider ID: N/A

11 TECHNOLOGY DR
IRVINE, CA 92618

Effective as of 01-JAN-18

GHOSH, SUBRATO, MD†

Provider ID: N/A

11 TECHNOLOGY DR
IRVINE, CA 92618

Effective as of 01-JAN-18

C1. Lista de proveedores de la red Médico de atención especializada

HUNG, JENNIFER, DO†

Provider ID: N/A

11 TECHNOLOGY DR
IRVINE, CA 92618

Effective as of 01-JAN-18

LEE, RONALD, MD†

Provider ID: N/A

11 TECHNOLOGY DR
IRVINE, CA 92618

Effective as of 01-JAN-18

LU, CHRISTIAN, MD†

Provider ID: N/A

11 TECHNOLOGY DR
IRVINE, CA 92618

Effective as of 01-JAN-18

MIRSAEIDGHAZI, POURYA, MD†

Provider ID: N/A

11 TECHNOLOGY DR
IRVINE, CA 92618

Effective as of 01-JAN-18

NGUYEN, VIET, DO†

Provider ID: N/A

11 TECHNOLOGY DR
IRVINE, CA 92618

Effective as of 01-JAN-18

NGUYEN, THUY, DO†

Provider ID: N/A

11 TECHNOLOGY DR
IRVINE, CA 92618

Effective as of 01-JAN-18

PEREZ, FRANCISCO, MD†

Provider ID: N/A

11 TECHNOLOGY DR
IRVINE, CA 92618

Effective as of 01-JAN-18

SHAHAMIRI, SEAN, MD†

Provider ID: N/A

11 TECHNOLOGY DR
IRVINE, CA 92618

Effective as of 01-JAN-18

SHUNE, HONG, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 311
IRVINE, CA 92618

Effective as of 01-JAN-20

SYCHANGCO, PAUL, MD†

Provider ID: N/A

11 TECHNOLOGY DR
IRVINE, CA 92618

Effective as of 01-JAN-18

TAHERI, NIMA, MD†

Provider ID: N/A

11 TECHNOLOGY DR
IRVINE, CA 92618

Effective as of 01-JAN-18

YAP, MICHAEL, MD†

Provider ID: N/A

11 TECHNOLOGY DR
IRVINE, CA 92618

Effective as of 01-JAN-18

ZAHED, SHAHAB, MD†

Provider ID: N/A

11 TECHNOLOGY DR
IRVINE, CA 92618

Effective as of 01-JAN-18

INTERVENTIONAL CARDIOLOGY

BERG, CHRISTOPHER, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-NOV-23

BERG, CHRISTOPHER, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-NOV-23

BERG, CHRISTOPHER, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-NOV-23

BERG, CHRISTOPHER, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-NOV-23

BERG, CHRISTOPHER, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618

Effective as of 01-JUN-24

ESLAMI-FARSANI, MAHMOUD, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-APR-18

ESLAMI-FARSANI, MAHMOUD, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618

Effective as of 01-APR-18

**C1. Lista de proveedores de la red
Médico de atención especializada**

HOWELL, STACEY, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618
Effective as of 01-JUN-24

HOWELL, STACEY, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618
Effective as of 01-NOV-23

HOWELL, STACEY, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618
Effective as of 01-NOV-23

HOWELL, STACEY, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618
Effective as of 01-NOV-23

HOWELL, STACEY, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618
Effective as of 01-NOV-23

KAZEMI, SEPIDEH, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 601
IRVINE, CA 92618
Effective as of 01-JAN-21

NGUYEN, HUY, MD†

Provider ID: N/A

16305 SAND CANYON AVE

STE 255
IRVINE, CA 92618
Effective as of 01-SEP-17

NGUYEN, HUY, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 255
IRVINE, CA 92618
Effective as of 01-SEP-17

NGUYEN, HUY, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 255
IRVINE, CA 92618
Effective as of 01-JAN-21

SCHACHTER, JESSICA, DO

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618
Effective as of 01-NOV-23

SCHACHTER, JESSICA, DO

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618
Effective as of 01-NOV-23

SCHACHTER, JESSICA, DO

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618
Effective as of 01-NOV-23

SCHACHTER, JESSICA, DO

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618
Effective as of 01-NOV-23

SCHACHTER, JESSICA, DO

Provider ID: N/A

16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618
Effective as of 01-JUN-24

WERTMAN, BRETT, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 255
IRVINE, CA 92618
Effective as of 01-SEP-17

WERTMAN, BRETT, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 255
IRVINE, CA 92618
Effective as of 01-SEP-17

WERTMAN, BRETT, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 255
IRVINE, CA 92618
Effective as of 01-JAN-21

YALVAC, ETHAN, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618
Effective as of 01-JAN-21

YALVAC, ETHAN, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618
Effective as of 01-APR-18

YALVAC, ETHAN, MD†

Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618
Effective as of 01-APR-18

LICENSED CLINICAL SOCIAL WORKER

ARZATE, VANESSA, LCSW

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-MAY-24

ARZATE, VANESSA, LCSW

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-MAY-24

BOODMAN, SANDRA, LCSW

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-JUL-24

BOODMAN, SANDRA, LCSW

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-DEC-23

BOODMAN, SANDRA, LCSW

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-JUL-24

BOWNES, MARISA, LCSW

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-AUG-24

BOWNES, MARISA, LCSW

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-AUG-24

HUMPHRIES, CORINNE, LCSW

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-DEC-23

HUMPHRIES, CORINNE, LCSW

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-DEC-23

MARQUEZ, ANTONIO, LCSW

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-JUN-24

PASTERNAK, RACHEL, LCSW

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-JUL-24

PASTERNAK, RACHEL, LCSW

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618

Effective as of 01-JUL-24

PYUN, JEONG, LCSW

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-MAY-24

PYUN, JEONG, LCSW

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-MAY-24

LICENSED PROFESSIONAL CLINICAL COUNSELOR

KURPIUS-BROCK, MARINDA, LPCC

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-MAY-24

KURPIUS-BROCK, MARINDA, LPCC

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-MAY-24

MARRIAGE FAMILY THERAPIST

BLAKEMORE, JASON, MFT

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-MAY-24

C1. Lista de proveedores de la red Médico de atención especializada

BLAKEMORE, JASON, MFT

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-MAY-24

CASEY, CARLEE, MFT

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-MAY-24

CASEY, CARLEE, MFT

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-MAY-24

FATEMI, SEPIDEH, MFT

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-JUN-24

FATEMI, SEPIDEH, MFT

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-JUN-24

HAYDIS, MARIA, MFT

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-JUL-24

HAYDIS, MARIA, MFT

Provider ID: N/A

15635 ALTON PKWY STE

350

IRVINE, CA 92618
Effective as of 01-JUL-24

JOHNSTON, KARLY, MFT

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-MAY-24

JOHNSTON, KARLY, MFT

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-MAY-24

LIU, CHIA CHI, MFT

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-JUL-23

LIU, CHIA CHI, MFT

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-JUL-23

MAJDALANI, KAREN, MFT

Provider ID: N/A

60 STEPPING STONE
IRVINE, CA 92603
Effective as of 01-JUN-23

MAJDALANI, KAREN, MFT

Provider ID: N/A

60 STEPPING STONE
IRVINE, CA 92603
Effective as of 01-JUN-23

MCCURRY, LISA, MFT

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-MAY-24

MCCURRY, LISA, MFT

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-MAY-24

MCGUCKIN, RICHARD, MFT

Provider ID: N/A

31 MORNING GLORY
IRVINE, CA 92603
Effective as of 01-OCT-21

MCINTYRE, SUSAN, MFT

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-DEC-23

MCINTYRE, SUSAN, MFT

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-DEC-23

ONEILL, SEAN, MFT

Provider ID: N/A

60 STEPPING STONE
IRVINE, CA 92603
Effective as of 01-JUN-23

ONEILL, SEAN, MFT

Provider ID: N/A

60 STEPPING STONE
IRVINE, CA 92603
Effective as of 01-JUN-23

**C1. Lista de proveedores de la red
Médico de atención especializada**

ROMERO, DIANA, MFT

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618

Effective as of 01-MAY-24

ROMERO, DIANA, MFT

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618

Effective as of 01-MAY-24

SHAH, SALMA, MFT

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618

Effective as of 01-DEC-23

SHAH, SALMA, MFT

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618

Effective as of 01-DEC-23

SHARMA, POOJA, MFT

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618

Effective as of 01-MAY-24

SHARMA, POOJA, MFT

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618

Effective as of 01-MAY-24

**MATERNAL AND FETAL
MEDICINE**

BUSH, MELISSA, MD†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 360
IRVINE, CA 92618

Effective as of 01-FEB-21

BUSH, MELISSA, MD†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 360
IRVINE, CA 92618

Effective as of 01-SEP-16

CHAU, CINDY, MD

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 360
IRVINE, CA 92618

Effective as of 01-MAY-24

DAY, ROBERT, MD†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 360
IRVINE, CA 92618

Effective as of 01-MAY-22

KFIR, MENASHE, MD†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 360
IRVINE, CA 92618

Effective as of 01-JUN-19

KFIR, MENASHE, MD†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 360
IRVINE, CA 92618

Effective as of 01-SEP-16

KFIR, MENASHE, MD†

Provider ID: N/A

15785 LAGUNA CANYON

RD STE 360

IRVINE, CA 92618

Effective as of 01-FEB-23

KFIR, MENASHE, MD†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 360
IRVINE, CA 92618

Effective as of 01-JAN-23

KFIR, MENASHE, MD†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 360
IRVINE, CA 92618

Effective as of 01-JAN-23

KFIR, MENASHE, MD†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 360
IRVINE, CA 92618

Effective as of 01-JAN-23

MASAKI, DAMON, MD†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 360
IRVINE, CA 92618

Effective as of 01-DEC-19

MASAKI, DAMON, MD†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 360
IRVINE, CA 92618

Effective as of 01-MAY-19

SHRIVASTAVA, VINEET, MD

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 360
IRVINE, CA 92618

Effective as of 01-MAR-23

**C1. Lista de proveedores de la red
Médico de atención especializada**

MEDICAL ONCOLOGY

BECERRA, CARLOS, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618
Effective as of 01-MAR-23

BECERRA, CARLOS, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618
Effective as of 01-MAR-23

HAMOUI, NAHID, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 604
IRVINE, CA 92618
Effective as of 01-SEP-13

KHAGI, SIMON, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618
Effective as of 01-OCT-23

KHAGI, SIMON, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618
Effective as of 01-OCT-23

MITA, MONICA, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618
Effective as of 01-MAY-24

MITA, MONICA, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618
Effective as of 01-MAY-24

PANDIT, LALITA, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 609
IRVINE, CA 92618
Teleservice
Effective as of 01-JAN-21

NEPHROLOGY

AHDOOT, JACOB, MD†

Provider ID: N/A

15775 LAGUNA CANYON
RD STE 220
IRVINE, CA 92618
Effective as of 01-OCT-23

AHDOOT, JACOB, MD†

Provider ID: N/A

15775 LAGUNA CANYON
RD STE 220
IRVINE, CA 92618
Effective as of 01-JAN-18

AHDOOT, JACOB, MD†

Provider ID: N/A

15775 LAGUNA CANYON
RD STE 220
IRVINE, CA 92618
Effective as of 01-JAN-14

AHDOOT, JACOB, MD†

Provider ID: N/A

15775 LAGUNA CANYON
RD STE 220
IRVINE, CA 92618
Effective as of 01-JAN-20

AHDOOT, JACOB, MD†

Provider ID: N/A

15775 LAGUNA CANYON
RD STE 220
IRVINE, CA 92618
Effective as of 01-JAN-21

AHDOOT, JACOB, MD†

Provider ID: N/A

15775 LAGUNA CANYON
RD STE 220
IRVINE, CA 92618
Effective as of 01-JUN-18

AHDOOT, JACOB, MD†

Provider ID: N/A

15775 LAGUNA CANYON
RD STE 220
IRVINE, CA 92618
Effective as of 01-MAY-12

AHDOOT, JACOB, MD†

Provider ID: N/A

15775 LAGUNA CANYON
RD STE 220
IRVINE, CA 92618
Effective as of 01-APR-11

JAMES, JOJI, MD

Provider ID: N/A

22 ODYSSEY STE 115
IRVINE, CA 92618
Effective as of 01-AUG-23

MANSOURY, HADI, MD†

Provider ID: N/A

11 TECHNOLOGY DR
IRVINE, CA 92618
Effective as of 01-JAN-18

MESBAH, AZITA, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Teleservice

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-MAY-23

SAWHNEY, SAJEET, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-JUL-24

SAWHNEY, SAJEET, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-APR-21

YANG, PHILIP, MD†

Provider ID: N/A

15825 LAGUNA CANYON
RD STE 202
IRVINE, CA 92618

Effective as of 01-OCT-23

YANG, PHILIP, MD†

Provider ID: N/A

15825 LAGUNA CANYON
RD STE 202
IRVINE, CA 92618

Effective as of 01-JUN-18

YANG, PHILIP, MD†

Provider ID: N/A

15825 LAGUNA CANYON
RD STE 202
IRVINE, CA 92618

Effective as of 01-JUL-17

YANG, PHILIP, MD†

Provider ID: N/A

15825 LAGUNA CANYON
RD STE 202
IRVINE, CA 92618

Effective as of 01-OCT-19

YANG, PHILIP, MD†

Provider ID: N/A

15825 LAGUNA CANYON
RD STE 202
IRVINE, CA 92618

Effective as of 01-MAY-20

NEUROLOGY

CLEEREMANS, BRUCE, MD

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-JAN-21

JANKOWSKI, PAWEL, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-MAY-23

MAHDAD, MEHRDAD, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 609
IRVINE, CA 92618

Effective as of 01-JAN-17

MAHDAD, MEHRDAD, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 609
IRVINE, CA 92618

Effective as of 01-JAN-17

MAHDAD, MEHRDAD, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 609
IRVINE, CA 92618

Effective as of 01-OCT-21

MAHDAD, MEHRDAD, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 609
IRVINE, CA 92618

Effective as of 01-OCT-21

MAHDAD, MEHRDAD, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 609
IRVINE, CA 92618

Effective as of 01-JAN-14

MAHDAD, MEHRDAD, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 609
IRVINE, CA 92618

Effective as of 01-APR-08

MORIN, RUTH, PSYD

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-SEP-24

PARK, JAMES, DO

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-OCT-22

PARK, JAMES, DO

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-OCT-22

PATEL, JAY, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-JAN-20

THAKKAR, SANDEEP, DO[†]

Provider ID: N/A

16405 SAND CANYON AVE
STE 265
IRVINE, CA 92618

Effective as of 01-AUG-22

THAKKAR, SANDEEP, DO[†]

Provider ID: N/A

16405 SAND CANYON AVE
STE 265
IRVINE, CA 92618

Effective as of 01-AUG-22

THAKKAR, SANDEEP, DO[†]

Provider ID: N/A

16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-MAR-18

THAKKAR, SANDEEP, DO[†]

Provider ID: N/A

16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-MAR-19

WHITMAN, GREGORY, MD

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-JAN-20

WHITMAN, GREGORY, MD

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-JAN-21

NEUROLOGY CHILD

ELBALALESY, NASER, MD[†]

Provider ID: N/A

113 WATERWORKS WAY
STE 350
IRVINE, CA 92618

Effective as of 01-AUG-23

ELBALALESY, NASER, MD[†]

Provider ID: N/A

113 WATERWORKS WAY
STE 350
IRVINE, CA 92618

Effective as of 01-AUG-23

ELBALALESY, NASER, MD[†]

Provider ID: N/A

113 WATERWORKS WAY
STE 350
IRVINE, CA 92618

Effective as of 01-JUN-19

ELBALALESY, NASER, MD[†]

Provider ID: N/A

113 WATERWORKS WAY
STE 350
IRVINE, CA 92618

Effective as of 01-MAR-19

ELBALALESY, NASER, MD[†]

Provider ID: N/A

113 WATERWORKS WAY
STE 350
IRVINE, CA 92618

Effective as of 01-AUG-23

ELBALALESY, NASER, MD[†]

Provider ID: N/A

113 WATERWORKS WAY
STE 350
IRVINE, CA 92618

Effective as of 01-AUG-23

ELBALALESY, NASER, MD[†]

Provider ID: N/A

113 WATERWORKS WAY

STE 350

IRVINE, CA 92618

Effective as of 01-MAR-19

ELBALALESY, NASER, MD[†]

Provider ID: N/A

113 WATERWORKS WAY
STE 350
IRVINE, CA 92618

Effective as of 01-MAR-19

ELBALALESY, NASER, MD[†]

Provider ID: N/A

113 WATERWORKS WAY
STE 350
IRVINE, CA 92618

Effective as of 01-MAR-19

ELBALALESY, NASER, MD[†]

Provider ID: N/A

113 WATERWORKS WAY
STE 350
IRVINE, CA 92618

Effective as of 01-MAR-19

ELBALALESY, NASER, MD[†]

Provider ID: N/A

113 WATERWORKS WAY
STE 350
IRVINE, CA 92618

Effective as of 01-MAR-19

ELBALALESY, NASER, MD[†]

Provider ID: N/A

113 WATERWORKS WAY
STE 350
IRVINE, CA 92618

Effective as of 01-OCT-22

NUCLEAR MEDICINE

REDDY, RYAN, MD

Provider ID: N/A


16105 SAND CANYON AVE
STE 215

C1. Lista de proveedores de la red Médico de atención especializada

IRVINE, CA 92618
Effective as of 01-OCT-23

REDDY, RYAN, MD


Provider ID: N/A

 16105 SAND CANYON AVE
STE 215
IRVINE, CA 92618
Effective as of 01-OCT-23

OBSTETRICS / GYNECOLOGY


AHDOOT, MORRIS, MD†

Provider ID: N/A

 15775 LAGUNA CANYON
RD STE 200
IRVINE, CA 92618
Effective as of 01-APR-20


AHDOOT, MORRIS, MD†

Provider ID: N/A

 15775 LAGUNA CANYON
RD STE 200
IRVINE, CA 92618
Effective as of 01-APR-11


AHDOOT, MORRIS, MD†

Provider ID: N/A

 15775 LAGUNA CANYON
RD STE 200
IRVINE, CA 92618
Effective as of 01-APR-20

AHDOOT, MORRIS, MD†

Provider ID: N/A

 15775 LAGUNA CANYON
RD STE 200
IRVINE, CA 92618
Effective as of 01-MAY-12

AHDOOT, MORRIS, MD†


Provider ID: N/A

 15775 LAGUNA CANYON
RD STE 200

IRVINE, CA 92618
Effective as of 01-JAN-21


AHDOOT, MORRIS, MD†

Provider ID: N/A

 15775 LAGUNA CANYON
RD STE 200
IRVINE, CA 92618
Effective as of 01-JUL-12


AHDOOT, MORRIS, MD†

Provider ID: N/A

 15775 LAGUNA CANYON
RD STE 200
IRVINE, CA 92618
Effective as of 01-FEB-21


AHDOOT, MORRIS, MD†

Provider ID: N/A

 15775 LAGUNA CANYON
RD STE 200
IRVINE, CA 92618
Effective as of 01-FEB-21


AHDOOT, MORRIS, MD†

Provider ID: N/A

 15775 LAGUNA CANYON
RD STE 200
IRVINE, CA 92618
Effective as of 01-JAN-18


BARR, JESSICA, DO

Provider ID: N/A

 22 ODYSSEY STE 200
IRVINE, CA 92618
Effective as of 01-DEC-23


BARR, JESSICA, DO

Provider ID: N/A

 22 ODYSSEY STE 200
IRVINE, CA 92618
Effective as of 01-DEC-23


BUSH, MELISSA, MD†

Provider ID: N/A

 15785 LAGUNA CANYON
RD STE 360
IRVINE, CA 92618
Effective as of 01-MAY-24


COUGH, HEIDI, MD

Provider ID: N/A

 16105 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-OCT-22


DAVIS, STEPHANIE, MD

Provider ID: N/A

 16105 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-OCT-22


HASHEMI, EMAD, MD†

Provider ID: N/A

 16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-NOV-20


HASHEMI, EMAD, MD†

Provider ID: N/A

 16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-NOV-20


KONG, GRACE, MD

Provider ID: N/A

 16105 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-OCT-22

LEE, KATHERINE, MD

Provider ID: N/A

 16305 SAND CANYON AVE
STE 275
IRVINE, CA 92618

**C1. Lista de proveedores de la red
Médico de atención especializada**

Effective as of 01-JUN-23

LEE, KATHERINE, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-JUN-23

LIN, JAMES, MD

Provider ID: N/A

16300 SAND CANYON AVE
STE 901
IRVINE, CA 92618

Effective as of 01-SEP-15

MARINESCU, CATALIN, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 265
IRVINE, CA 92618

Effective as of 01-JAN-20

MARINESCU, CATALIN, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 265
IRVINE, CA 92618

Effective as of 01-JAN-21

MASAKI, DAMON, MD†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 360
IRVINE, CA 92618

Effective as of 01-JAN-22

MASAKI, DAMON, MD†

Provider ID: N/A

15785 LAGUNA CANYON
RD STE 360
IRVINE, CA 92618

Effective as of 01-JAN-22

MENDELSON, SUSAN, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-NOV-23

MILLER, JAMIE, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-NOV-23

PETERS, AMY, DO

Provider ID: N/A

16105 SAND CANYON AVE
STE 200
IRVINE, CA 92618

Effective as of 01-NOV-23

PETERS, AMY, DO

Provider ID: N/A

16305 SAND CANYON AVE
STE 275
IRVINE, CA 92618

Effective as of 01-NOV-23

STERNFELD, DANIEL, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 275
IRVINE, CA 92618

Effective as of 01-JUN-24

STERNFELD, DANIEL, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 275
IRVINE, CA 92618

Effective as of 01-SEP-20

TANAMAI, VAYA, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 275

IRVINE, CA 92618

Effective as of 01-MAY-20

OPHTHALMOLOGY

GE, NENGJIE, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 608
IRVINE, CA 92618

Effective as of 01-OCT-23

GE, NENGJIE, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 608
IRVINE, CA 92618

Effective as of 01-JAN-17

GE, NENGJIE, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 608
IRVINE, CA 92618

Effective as of 01-MAR-23

GE, NENGJIE, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 608
IRVINE, CA 92618

Effective as of 01-JUL-12

GE, NENGJIE, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 608
IRVINE, CA 92618

Effective as of 01-MAR-23

GE, NENGJIE, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 608
IRVINE, CA 92618

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-JAN-18

GHIASI, ZAHRA, MD†

Provider ID: N/A

113 WATERWORKS WAY
STE 245
IRVINE, CA 92618

Effective as of 01-JAN-17

GWYNN, DAVID, MD

Provider ID: N/A

22 ODYSSEY STE 150
IRVINE, CA 92618

Effective as of 01-MAR-23

LEE, ANDREW, MD

Provider ID: N/A

18 ENDEAVOR STE 104
IRVINE, CA 92618

Effective as of 01-OCT-23

LEE, ANDREW, MD

Provider ID: N/A

18 ENDEAVOR STE 104
IRVINE, CA 92618

Effective as of 01-MAY-23

LEE, JIMMY, MD†

Provider ID: N/A

15825 LAGUNA CANYON
RD STE 201
IRVINE, CA 92618

Effective as of 01-OCT-23

LEE, JIMMY, MD†

Provider ID: N/A

15825 LAGUNA CANYON
RD STE 201
IRVINE, CA 92618

Effective as of 01-JUL-22

MARVASTI, AMIR, MD

Provider ID: N/A

15825 LAGUNA CANYON
RD STE 201

IRVINE, CA 92618

Effective as of 01-JAN-23

MARVASTI, AMIR, MD

Provider ID: N/A

15825 LAGUNA CANYON
RD STE 201
IRVINE, CA 92618

Effective as of 01-OCT-23

NGUYEN, BAO-THU, MD†

Provider ID: N/A

15825 LAGUNA CANYON
RD STE 201
IRVINE, CA 92618*

Effective as of 01-OCT-23

NGUYEN, BAO-THU, MD†

Provider ID: N/A

15825 LAGUNA CANYON
RD STE 201
IRVINE, CA 92618

Effective as of 01-MAY-19

NGUYEN, BAO-THU, MD†

Provider ID: N/A

15825 LAGUNA CANYON
RD STE 201
IRVINE, CA 92618

Effective as of 01-MAY-19

NGUYEN, BAO-THU, MD†

Provider ID: N/A

15825 LAGUNA CANYON
RD STE 201
IRVINE, CA 92618*

Effective as of 01-JAN-23

OAKLEY, ZACKERY, MD

Provider ID: N/A

114 PACIFICA STE 390
IRVINE, CA 92618

Effective as of 01-JUL-24

OAKLEY, ZACKERY, MD

Provider ID: N/A

114 PACIFICA STE 390
IRVINE, CA 92618

Effective as of 01-JUL-24

TAYANI, RAMIN, MD

Provider ID: N/A

22 ODYSSEY STE 150
IRVINE, CA 92618

Effective as of 01-MAR-23

VAIDYA, NADEEM, MD†

Provider ID: N/A

16100 SAND CANYON AVE
STE 385
IRVINE, CA 92618

Effective as of 01-FEB-21

VAIDYA, NADEEM, MD†

Provider ID: N/A

16100 SAND CANYON AVE
STE 385
IRVINE, CA 92618

Effective as of 01-OCT-23

VAIDYA, NADEEM, MD†

Provider ID: N/A

16100 SAND CANYON AVE
STE 385
IRVINE, CA 92618

Effective as of 01-JAN-21

VAIDYA, NADEEM, MD†

Provider ID: N/A

16100 SAND CANYON AVE
STE 385
IRVINE, CA 92618

Effective as of 01-MAR-16

VAIDYA, NADEEM, MD†

Provider ID: N/A

16100 SAND CANYON AVE
STE 385
IRVINE, CA 92618

Effective as of 01-FEB-21

C1. Lista de proveedores de la red Médico de atención especializada

OPTOMETRIST

OWYANG, ASHLEY, OD

Provider ID: N/A

📍 15825 LAGUNA CANYON RD STE 201
IRVINE, CA 92618
Effective as of 01-OCT-23

OWYANG, ASHLEY, OD

Provider ID: N/A

📍 15825 LAGUNA CANYON RD STE 201
IRVINE, CA 92618
Effective as of 01-JAN-23

TRAN, STEPHANIE, OD

Provider ID: N/A

📍 15825 LAGUNA CANYON RD STE 201
IRVINE, CA 92618
Effective as of 01-JAN-23

TRAN, STEPHANIE, OD

Provider ID: N/A

📍 15825 LAGUNA CANYON RD STE 201
IRVINE, CA 92618
Effective as of 01-OCT-23

WANG, MATTHEW, OD†

Provider ID: N/A

📍 22 ODYSSEY STE 150
IRVINE, CA 92618
Effective as of 01-JAN-23

WANG, MATTHEW, OD†

Provider ID: N/A

📍 22 ODYSSEY STE 150
IRVINE, CA 92618
Effective as of 01-JAN-18

WANG, STEVEN, OD

Provider ID: N/A

📍 22 ODYSSEY STE 150
IRVINE, CA 92618
Effective as of 01-OCT-23

WANG, MATTHEW, OD†

Provider ID: N/A

📍 22 ODYSSEY STE 150
IRVINE, CA 92618
Effective as of 01-OCT-23

ORAL MAXILLOFACIAL SURGEON

KALANTARI, OUZHAN, DMD

Provider ID: N/A

📍 114 PACIFICA STE 420
IRVINE, CA 92618
Effective as of 01-NOV-23

OTOLARYNGOLOGY

BALAKER, ASHLEY, MD†

Provider ID: N/A

📍 18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-JUN-19

BALAKER, ASHLEY, MD†

Provider ID: N/A

📍 18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-APR-23

BALAKER, ASHLEY, MD†

Provider ID: N/A

📍 18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-APR-23

BALAKER, ASHLEY, MD†

Provider ID: N/A

📍 18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-JUN-24

BALAKER, ASHLEY, MD†

Provider ID: N/A

📍 18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-MAY-19

BUEN, FLOYD, MD†

Provider ID: N/A

📍 18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-NOV-20

BUEN, FLOYD, MD†

Provider ID: N/A

📍 18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-NOV-20

BUEN, FLOYD, MD†

Provider ID: N/A

📍 18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-DEC-20

BUEN, FLOYD, MD†

Provider ID: N/A

📍 18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-DEC-20

BUEN, FLOYD, MD†

Provider ID: N/A

📍 18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-DEC-20

CHO, MICHAEL, MD†


Provider ID: N/A

📍 16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618
Effective as of 01-JAN-15

CHO, MICHAEL, MD†


Provider ID: N/A

**C1. Lista de proveedores de la red
Médico de atención especializada**

 16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618
Effective as of 01-JAN-15


CROCKETT, DENNIS, MD†

Provider ID: N/A

 18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-JUL-19


CROCKETT, DENNIS, MD†

Provider ID: N/A

 18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-JUL-19


CROCKETT, DENNIS, MD†

Provider ID: N/A

 18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-JAN-18


GE, NORMAN, MD†

Provider ID: N/A

 113 WATERWORKS WAY
STE 145
IRVINE, CA 92618
Effective as of 01-OCT-12


GE, NORMAN, MD†

Provider ID: N/A

 113 WATERWORKS WAY
STE 145
IRVINE, CA 92618
Effective as of 01-JAN-18


GE, NORMAN, MD†

Provider ID: N/A

 113 WATERWORKS WAY
STE 145
IRVINE, CA 92618
Effective as of 01-FEB-23


GE, NORMAN, MD†

Provider ID: N/A

 113 WATERWORKS WAY
STE 145
IRVINE, CA 92618
Effective as of 01-FEB-23


GE, NORMAN, MD†

Provider ID: N/A

 113 WATERWORKS WAY
STE 145
IRVINE, CA 92618
Effective as of 01-JAN-23


GE, NORMAN, MD†

Provider ID: N/A

 113 WATERWORKS WAY
STE 145
IRVINE, CA 92618
Effective as of 01-FEB-23


LUU, QUANG, MD†

Provider ID: N/A

 18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-OCT-18


LUU, QUANG, MD†

Provider ID: N/A

 18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-OCT-18


MUNDI, JAGMEET, MD†

Provider ID: N/A

 18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-MAY-19


MUNDI, JAGMEET, MD†

Provider ID: N/A

 18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-JUN-16


MUNDI, JAGMEET, MD†

Provider ID: N/A

 18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-JUN-16


PETTIS, ROBERT, MD†

Provider ID: N/A

 16100 SAND CANYON AVE
STE 230
IRVINE, CA 92618
Effective as of 01-MAY-20


SUN, JOHN, MD†

Provider ID: N/A

 22 ODYSSEY STE 100
IRVINE, CA 92618
Effective as of 01-MAR-16


SUN, PAUL, MD†

Provider ID: N/A

 22 ODYSSEY STE 100
IRVINE, CA 92618
Effective as of 01-NOV-17


SUN, JOHN, MD†

Provider ID: N/A

 22 ODYSSEY STE 100
IRVINE, CA 92618
Effective as of 01-NOV-17


SUN, PAUL, MD†

Provider ID: N/A

 22 ODYSSEY STE 100
IRVINE, CA 92618
Effective as of 01-NOV-17

SUN, PAUL, MD†

Provider ID: N/A

 22 ODYSSEY STE 100
IRVINE, CA 92618
Effective as of 01-OCT-23

SUN, PAUL, MD†

Provider ID: N/A

 22 ODYSSEY STE 100

C1. Lista de proveedores de la red Médico de atención especializada

IRVINE, CA 92618
Effective as of 01-FEB-16

SUN, JOHN, MD†

Provider ID: N/A

☒ 22 ODYSSEY STE 100
IRVINE, CA 92618

Effective as of 01-OCT-23

SUN, JOHN, MD†

Provider ID: N/A

☒ 22 ODYSSEY STE 100
IRVINE, CA 92618

Effective as of 01-NOV-17

SUN, JOHN, MD†

Provider ID: N/A

☒ 22 ODYSSEY STE 100
IRVINE, CA 92618

Effective as of 01-JAN-20

SUN, PAUL, MD†

Provider ID: N/A

☒ 22 ODYSSEY STE 100
IRVINE, CA 92618

Effective as of 01-JAN-17

SUN, JOHN, MD†

Provider ID: N/A

☒ 22 ODYSSEY STE 100
IRVINE, CA 92618

Effective as of 01-JAN-17

SUN, PAUL, MD†

Provider ID: N/A

☒ 22 ODYSSEY STE 100
IRVINE, CA 92618

Effective as of 01-JAN-14

SUN, JOHN, MD†

Provider ID: N/A

☒ 22 ODYSSEY STE 100
IRVINE, CA 92618

Effective as of 01-JAN-14

SUN, JOHN, MD†

Provider ID: N/A

☒ 22 ODYSSEY STE 100
IRVINE, CA 92618

Effective as of 01-JAN-21

SUN, PAUL, MD†

Provider ID: N/A

☒ 22 ODYSSEY STE 100
IRVINE, CA 92618

Effective as of 01-JAN-21

THOMPSON, CHRISTOPHER, MD†

Provider ID: N/A

☒ 18 ENDEAVOR STE 208
IRVINE, CA 92618

Effective as of 01-AUG-16

THOMPSON, CHRISTOPHER, MD†

Provider ID: N/A

☒ 18 ENDEAVOR STE 208
IRVINE, CA 92618

Effective as of 01-AUG-16

YIAN, CHRISTOPHER, MD†

Provider ID: N/A

☒ 22 ODYSSEY STE 100
IRVINE, CA 92618

Effective as of 01-JAN-21

YIAN, CHRISTOPHER, MD†

Provider ID: N/A

☒ 22 ODYSSEY STE 100
IRVINE, CA 92618

Effective as of 01-FEB-16

YIAN, CHRISTOPHER, MD†

Provider ID: N/A

☒ 22 ODYSSEY STE 100
IRVINE, CA 92618

Effective as of 01-JAN-14

YIAN, CHRISTOPHER, MD†

Provider ID: N/A

☒ 22 ODYSSEY STE 100
IRVINE, CA 92618

Effective as of 01-NOV-17

YIAN, CHRISTOPHER, MD†

Provider ID: N/A

☒ 22 ODYSSEY STE 100
IRVINE, CA 92618

Effective as of 01-OCT-23

YIAN, CHRISTOPHER, MD†

Provider ID: N/A

☒ 22 ODYSSEY STE 100
IRVINE, CA 92618

Effective as of 01-NOV-17

ZUCKERMAN, KENNETH, MD

Provider ID: N/A

☒ 16300 SAND CANYON AVE
STE 704

IRVINE, CA 92618

Effective as of 01-JUL-12

PEDIATRICS

SUN, STEVEN, MD

Provider ID: N/A

☒ 22 ODYSSEY STE 230
IRVINE, CA 92618

Effective as of 01-MAY-24

PHYS MED/ REHAB PAIN MEDICINE

PATEL, KETAN, MD

Provider ID: N/A

☒ 113 WATERWORKS WAY
STE 240

IRVINE, CA 92618

Effective as of 01-MAY-24

PHYSICAL MEDICINE / REHABILITATION

CI. Lista de proveedores de la red Médico de atención especializada

LAI, KHANG, DO

Provider ID: N/A

15701 ROCKFIELD BLVD
IRVINE, CA 92618
Effective as of 01-APR-11

LAI, KHANG, DO

Provider ID: N/A

15701 ROCKFIELD BLVD
IRVINE, CA 92618
Effective as of 01-NOV-14

LAI, KHANG, DO

Provider ID: N/A

15701 ROCKFIELD BLVD
IRVINE, CA 92618
Effective as of 01-DEC-14

SEKO, KYLE, DO

Provider ID: N/A

9080 IRVINE CENTER DR
IRVINE, CA 92618
Effective as of 01-FEB-22

PHYSICIANS ASSISTANT

ALMANZA, MORENNE, PA

Provider ID: N/A

16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-JUN-24

ALMANZA, MORENNE, PA

Provider ID: N/A

16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-JUN-24

BOLADIAN, LANA, PA

Provider ID: N/A

16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618

Effective as of 01-JUN-24

BOLADIAN, LANA, PA

Provider ID: N/A

16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618
Effective as of 01-JUN-24

BOW, LINDA, PA†

Provider ID: N/A

22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-SEP-23

CARR, OLIVIA, PA

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-APR-24

CARR, OLIVIA, PA

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-APR-24

CHRISTIE, CAMERON, PA

Provider ID: N/A

8607 IRVINE CENTER DR
IRVINE, CA 92618
Effective as of 01-DEC-23

KIM, MOSES, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-APR-21

KISCADEN, LAUREN, PA

Provider ID: N/A

18 ENDEAVOR STE 208

IRVINE, CA 92618

Effective as of 01-APR-23

KISCADEN, LAUREN, PA

Provider ID: N/A

18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-APR-23

PHILLIPS, JOSHUA, PA

Provider ID: N/A

16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618
Effective as of 01-AUG-24

PHILLIPS, JOSHUA, PA

Provider ID: N/A

16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618
Effective as of 01-AUG-24

ROUGHLEY, MATTHEW, PA

Provider ID: N/A

16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618
Effective as of 01-DEC-23

SOBHANIAN, SHAHAB, PA

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-NOV-22

SOBHANIAN, SHAHAB, PA

Provider ID: N/A

16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-NOV-22

STONE, MICHELLE, PA

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-FEB-23

STONE, MICHELLE, PA

Provider ID: N/A

16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-FEB-23

STONE, MICHELLE, PA

Provider ID: N/A

16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-JAN-23

STONE, MICHELLE, PA

Provider ID: N/A

16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-JAN-23

STONE, MICHELLE, PA

Provider ID: N/A

16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-JAN-23

WONG, POLLYANNA, PA

Provider ID: N/A

16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618
Effective as of 01-JAN-23

WONG, POLLYANNA, PA

Provider ID: N/A

16105 SAND CANYON AVE
STE 230

IRVINE, CA 92618

Effective as of 01-JAN-23

WU, VANNA, PA

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-MAR-24

WU, VANNA, PA

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-MAR-24

WU, VANNA, PA

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-MAR-24

WU, VANNA, PA

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-JUL-24

WU, VANNA, PA

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-MAR-24

WU, VANNA, PA

Provider ID: N/A

113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-JUL-24

PODIATRIST

BATHAEE, FARSHAD, DPM

Provider ID: N/A

113 WATERWORKS WAY
STE 250
IRVINE, CA 92618
Effective as of 01-DEC-21

COYER, MICHAEL, DPM†

Provider ID: N/A

16405 SAND CANYON AVE
STE 270
IRVINE, CA 92618
Effective as of 01-JUL-18

COYER, MICHAEL, DPM†

Provider ID: N/A

16405 SAND CANYON AVE
STE 270
IRVINE, CA 92618
Effective as of 01-JUN-24

COYER, MICHAEL, DPM†

Provider ID: N/A

16405 SAND CANYON AVE
STE 270
IRVINE, CA 92618
Effective as of 01-JAN-20

KOLODENKER, GENNADY, DPM†

Provider ID: N/A

16405 SAND CANYON AVE
STE 270
IRVINE, CA 92618
Effective as of 01-JUN-24

KOLODENKER, GENNADY, DPM†

Provider ID: N/A

16405 SAND CANYON AVE
STE 270
IRVINE, CA 92618
Effective as of 01-JUL-18

C1. Lista de proveedores de la red Médico de atención especializada

LIN, PARKSON, DPM

Provider ID: N/A

☐ 2 HUGHES STE 150

IRVINE, CA 92618

Effective as of 01-JAN-17

ROOHIAN, ARSHIA, DPM

Provider ID: N/A

☐ 113 WATERWORKS WAY

STE 250

IRVINE, CA 92618

Effective as of 01-DEC-21

ROOHIAN, ARSHIA, DPM

Provider ID: N/A

☐ 113 WATERWORKS WAY

STE 250

IRVINE, CA 92618

Effective as of 01-JUL-20

SOLAR, SARA, DPM†

Provider ID: N/A

☐ 16405 SAND CANYON AVE

STE 270

IRVINE, CA 92618

Effective as of 01-NOV-22

SOLAR, SARA, DPM†

Provider ID: N/A

☐ 16405 SAND CANYON AVE

STE 270

IRVINE, CA 92618

Effective as of 01-NOV-22

TIEN, AUDRIS, DPM†

Provider ID: N/A

☐ 16405 SAND CANYON AVE

STE 270

IRVINE, CA 92618

Effective as of 01-JUL-21

TIEN, AUDRIS, DPM†

Provider ID: N/A

☐ 16405 SAND CANYON AVE

STE 270

IRVINE, CA 92618

Effective as of 01-JUL-21

TIEN, AUDRIS, DPM†

Provider ID: N/A

☐ 16405 SAND CANYON AVE

STE 270

IRVINE, CA 92618

Effective as of 01-DEC-20

TIEN, AUDRIS, DPM†

Provider ID: N/A

☐ 16405 SAND CANYON AVE

STE 270

IRVINE, CA 92618

Effective as of 01-DEC-20

VINCENT, EBONIE, DPM†

Provider ID: N/A

☐ 16405 SAND CANYON AVE

STE 270

IRVINE, CA 92618

Effective as of 01-AUG-19

VINCENT, EBONIE, DPM†

Provider ID: N/A

☐ 16405 SAND CANYON AVE

STE 270

IRVINE, CA 92618

Effective as of 01-AUG-19

VINCENT, EBONIE, DPM†

Provider ID: N/A

☐ 16405 SAND CANYON AVE

STE 270

IRVINE, CA 92618

Effective as of 01-JAN-21

YANG, DAVID, DPM

Provider ID: N/A

☐ 18 ENDEAVOR STE 206

IRVINE, CA 92618

Effective as of 01-OCT-23

YANG, DAVID, DPM

Provider ID: N/A

☐ 18 ENDEAVOR STE 206

IRVINE, CA 92618

Effective as of 01-JAN-23

YANG, ANDREW, DPM†

Provider ID: N/A

☐ 16405 SAND CANYON AVE

STE 270

IRVINE, CA 92618

Effective as of 01-DEC-20

YANG, ANDREW, DPM†

Provider ID: N/A

☐ 16405 SAND CANYON AVE

STE 270

IRVINE, CA 92618

Effective as of 01-DEC-20

PSYCHIATRY

RITTER, AARON, MD

Provider ID: N/A

☐ 16305 SAND CANYON AVE

STE 230

IRVINE, CA 92618

Effective as of 01-NOV-22

RITTER, AARON, MD

Provider ID: N/A

☐ 16305 SAND CANYON AVE

STE 230

IRVINE, CA 92618

Effective as of 01-NOV-22

RITTER, AARON, MD

Provider ID: N/A

☐ 16305 SAND CANYON AVE

STE 230


IRVINE, CA 92618

Effective as of 01-NOV-22

RITTER, AARON, MD


Provider ID: N/A

**C1. Lista de proveedores de la red
Médico de atención especializada**

 16305 SAND CANYON AVE
STE 230
IRVINE, CA 92618
Effective as of 01-NOV-22


SALO, CLINT, DO†

Provider ID: N/A

 2 HUGHES STE 100
IRVINE, CA 92618
Effective as of 01-AUG-17


SALO, CLINT, DO†

Provider ID: N/A

 2 HUGHES STE 100
IRVINE, CA 92618
Effective as of 01-NOV-16


SALO, CLINT, DO†

Provider ID: N/A

 2 HUGHES STE 100
IRVINE, CA 92618
Effective as of 01-NOV-16


SALO, CLINT, DO†

Provider ID: N/A

 2 HUGHES STE 100
IRVINE, CA 92618
Effective as of 01-AUG-17


SZPUNAR, MERCEDES, MD

Provider ID: N/A

 16305 SAND CANYON AVE
STE 201
IRVINE, CA 92618
Effective as of 01-MAR-23


SZPUNAR, MERCEDES, MD

Provider ID: N/A

 16305 SAND CANYON AVE
STE 201
IRVINE, CA 92618
Effective as of 01-MAR-23


SZPUNAR, MERCEDES, MD

Provider ID: N/A

 16305 SAND CANYON AVE
STE 201
IRVINE, CA 92618
Effective as of 01-MAR-23

SZPUNAR, MERCEDES, MD


Provider ID: N/A

 16305 SAND CANYON AVE
STE 201
IRVINE, CA 92618
Effective as of 01-MAR-23

PSYCHOLOGIST


ALEXANDER, DEBORAH, PSYD

Provider ID: N/A

 15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-DEC-23


ALEXANDER, DEBORAH, PSYD

Provider ID: N/A

 15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-JUL-24


ALEXANDER, DEBORAH, PSYD

Provider ID: N/A

 15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-JUL-24

ALEXANDER, DEBORAH, PSYD

Provider ID: N/A

 15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-DEC-23

ALEXANDER, DEBORAH, PSYD


Provider ID: N/A

 15635 ALTON PKWY STE

350
IRVINE, CA 92618
Effective as of 01-JUL-24


ALEXANDER, DEBORAH, PSYD

Provider ID: N/A

 15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-JUL-24


ALEXANDER, DEBORAH, PSYD

Provider ID: N/A

 15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-DEC-23


ALEXANDER, DEBORAH, PSYD

Provider ID: N/A

 15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-DEC-23


HUFANA, ALYSSA, PhD

Provider ID: N/A

 15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-AUG-24


HUFANA, ALYSSA, PhD

Provider ID: N/A

 15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-AUG-24

HUFANA, ALYSSA, PhD

Provider ID: N/A

 15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-AUG-24

**C1. Lista de proveedores de la red
Médico de atención especializada**

HUFANA, ALYSSA, PhD

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-AUG-24

KANG, EILEEN, PhD

Provider ID: N/A

6 VENTURE
IRVINE, CA 92618
Effective as of 01-MAR-20

KANG, EILEEN, PhD

Provider ID: N/A

6 VENTURE
IRVINE, CA 92618
Effective as of 01-MAR-20

KANG, EILEEN, PhD

Provider ID: N/A

6 VENTURE
IRVINE, CA 92618
Effective as of 01-MAR-20

KANG, EILEEN, PhD

Provider ID: N/A

6 VENTURE
IRVINE, CA 92618
Effective as of 01-MAR-20

LEHMAN, ERICA, PSYD

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-MAY-24

LEHMAN, ERICA, PSYD

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-MAY-24

LEHMAN, ERICA, PSYD

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-MAY-24

LEHMAN, ERICA, PSYD

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618
Effective as of 01-MAY-24

MILLER, ASHLEY, PSYD

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-JUL-24

MILLER, ASHLEY, PSYD

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-JUL-24

MILLER, ASHLEY, PSYD

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-JUL-24

MILLER, ASHLEY, PSYD

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-JUL-24

MORIN, RUTH, PSYD

Provider ID: N/A

16405 SAND CANYON AVE

STE 220

IRVINE, CA 92618
Effective as of 01-SEP-24

MORIN, RUTH, PSYD

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-SEP-24

MORIN, RUTH, PSYD

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-JAN-24

MORIN, RUTH, PSYD

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-JAN-24

MORIN, RUTH, PSYD

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-JAN-24

MORIN, RUTH, PSYD

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-JAN-24

MORIN, RUTH, PSYD

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-SEP-24

C1. Lista de proveedores de la red Médico de atención especializada

MORIN, RUTH, PSYD

Provider ID: N/A

16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618

Effective as of 01-SEP-24

MUNAVU, LILY, PSYD

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618

Effective as of 01-DEC-23

MUNAVU, LILY, PSYD

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618

Effective as of 01-JUL-24

MUNAVU, LILY, PSYD

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618

Effective as of 01-JUL-24

MUNAVU, LILY, PSYD

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618

Effective as of 01-DEC-23

MUNAVU, LILY, PSYD

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618

Effective as of 01-JUL-24

MUNAVU, LILY, PSYD

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618

Effective as of 01-JUL-24

MUNAVU, LILY, PSYD

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618

Effective as of 01-DEC-23

MUNAVU, LILY, PSYD

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618

Effective as of 01-DEC-23

PETERSON, JENYFFER, PSYD

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618

Effective as of 01-DEC-23

PETERSON, JENYFFER, PSYD

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618

Effective as of 01-DEC-23

PETERSON, JENYFFER, PSYD

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618

Effective as of 01-DEC-23

PETERSON, JENYFFER, PSYD

Provider ID: N/A

15635 ALTON PKWY STE
350
IRVINE, CA 92618

Effective as of 01-DEC-23

PULMONARY DISEASES

EL-BERSHAWI, AHMED, MD[†]

Provider ID: N/A

4 HUGHES STE 100
IRVINE, CA 92618

Effective as of 01-JUN-22

EL-BERSHAWI, AHMED, MD[†]

Provider ID: N/A

4 HUGHES STE 100
IRVINE, CA 92618

Effective as of 01-JUN-22

GHAZARIAN, ZERON, MD[†]

Provider ID: N/A

16305 SAND CANYON AVE
STE 225
IRVINE, CA 92618

Effective as of 01-MAR-21

GOZZO, YVETTE, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 230
IRVINE, CA 92618

Effective as of 01-JAN-21

HARIANAWALA, SALIM, MD[†]

Provider ID: N/A

4 HUGHES STE 100
IRVINE, CA 92618

Effective as of 01-JUN-22

HARIANAWALA, SALIM, MD[†]

Provider ID: N/A

4 HUGHES STE 100
IRVINE, CA 92618

Effective as of 01-JUN-22

RADIATION ONCOLOGY

LIN, KEVIN, MD[†]

**C1. Lista de proveedores de la red
Médico de atención especializada**

Provider ID: N/A

16105 SAND CANYON AVE
IRVINE, CA 92618
Effective as of 01-JAN-21

LIN, KEVIN, MD†

Provider ID: N/A

16105 SAND CANYON AVE
STE 150
IRVINE, CA 92618
Effective as of 01-JAN-20

RADIOLOGY DIAGNOSTIC

ULANER, GARY, MD†

Provider ID: N/A

16105 SAND CANYON AVE
STE 215
IRVINE, CA 92618
Effective as of 01-OCT-22

ULANER, GARY, MD†

Provider ID: N/A

16105 SAND CANYON AVE
STE 215
IRVINE, CA 92618
Effective as of 01-OCT-22

SURGERY COLON

SURGERY

MILANCHI, SIAMAK, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 604
IRVINE, CA 92618
Effective as of 01-APR-15

MILANCHI, SIAMAK, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 604
IRVINE, CA 92618
Effective as of 01-APR-15

MILANCHI, SIAMAK, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 604
IRVINE, CA 92618
Effective as of 01-JAN-21

NG, DANIEL, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-MAY-24

NG, DANIEL, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-MAY-24

SURGERY GENERAL

CHUNG, NATHAN, MD†

Provider ID: N/A

16405 SAND CANYON AVE
STE 230
IRVINE, CA 92618
Effective as of 01-MAR-21

CHUNG, NATHAN, MD†

Provider ID: N/A

16405 SAND CANYON AVE
STE 230
IRVINE, CA 92618
Effective as of 01-MAR-21

COLEMAN, COLLEEN, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-JAN-20

FORRESTER, JARED, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618
Effective as of 01-OCT-23

FORRESTER, JARED, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618
Effective as of 01-OCT-23

HAMOUI, NAHID, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 604
IRVINE, CA 92618
Effective as of 01-DEC-19

HAMOUI, NAHID, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 604
IRVINE, CA 92618
Effective as of 01-DEC-19

HAMOUI, NAHID, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 604
IRVINE, CA 92618
Effective as of 01-JAN-23

HAMOUI, NAHID, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 604
IRVINE, CA 92618
Effective as of 01-JAN-21

HAMOUI, NAHID, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 604

C1. Lista de proveedores de la red Médico de atención especializada

IRVINE, CA 92618
Effective as of 01-JAN-14

HURWITZ, MICHAEL, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 260

IRVINE, CA 92618
Effective as of 01-JAN-20

JENSEN, NATISHA, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 260

IRVINE, CA 92618
Effective as of 01-AUG-23

KRAFT, ELIZABETH, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 160

IRVINE, CA 92618
Effective as of 01-OCT-23

KRAFT, ELIZABETH, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 160

IRVINE, CA 92618
Effective as of 01-OCT-23

MACDONALD, HEATHER, MD†

Provider ID: N/A

16305 SAND CANYON AVE
STE 160

IRVINE, CA 92618
Effective as of 01-JAN-21

MILANCHI, SIAMAK, MD†

Provider ID: N/A

16300 SAND CANYON AVE
STE 604

IRVINE, CA 92618
Effective as of 01-JAN-18

NISHANIAN, GARABED, MD†

Provider ID: N/A

16100 SAND CANYON AVE
STE 350

IRVINE, CA 92618
Effective as of 01-NOV-15

NISHANIAN, GARABED, MD†

Provider ID: N/A

16100 SAND CANYON AVE
STE 350

IRVINE, CA 92618
Effective as of 01-JAN-20

SHAVER, JOHN, MD†

Provider ID: N/A

16305 SAND CANYON AVE
IRVINE, CA 92618

Effective as of 01-NOV-19

SHAVER, JOHN, MD†

Provider ID: N/A

16305 SAND CANYON AVE
IRVINE, CA 92618

Effective as of 01-NOV-19

WANG, THOMAS, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 230

IRVINE, CA 92618
Effective as of 01-MAY-24

WOLF, RONALD, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 230

IRVINE, CA 92618
Effective as of 01-NOV-23

SURGERY GENERAL VASCULAR

NISHANIAN, GARABED, MD†

Provider ID: N/A

16100 SAND CANYON AVE
STE 350

IRVINE, CA 92618
Effective as of 01-JAN-21

NISHANIAN, GARABED, MD†

Provider ID: N/A

16100 SAND CANYON AVE
STE 350

IRVINE, CA 92618
Effective as of 01-NOV-15

SURGERY

NEUROLOGICAL

JANKOWSKI, PAWEL, MD

Provider ID: N/A

16305 SAND CANYON AVE
STE 220

IRVINE, CA 92618
Effective as of 01-MAY-23

MEHTA, VIVEK, MD†

Provider ID: N/A

16405 SAND CANYON AVE
STE 220

IRVINE, CA 92618
Effective as of 01-JAN-21

MEHTA, VIVEK, MD†

Provider ID: N/A

16405 SAND CANYON AVE
STE 220

IRVINE, CA 92618
Effective as of 01-JAN-21

MEHTA, VIVEK, MD†

Provider ID: N/A


16405 SAND CANYON AVE
STE 220

IRVINE, CA 92618
Effective as of 01-AUG-21

MEHTA, VIVEK, MD†


Provider ID: N/A

**C1. Lista de proveedores de la red
Médico de atención especializada**

 16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-AUG-21


MEHTA, VIVEK, MD†

Provider ID: N/A

 16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-AUG-21


MEHTA, VIVEK, MD†

Provider ID: N/A

 16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-AUG-21


MEHTA, VIVEK, MD

Provider ID: N/A

 16405 SAND CANYON AVE
STE 300
IRVINE, CA 92618
Effective as of 01-APR-24


OZGUR, BURAK, MD†

Provider ID: N/A

 16405 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-MAR-23

OZGUR, BURAK, MD†

Provider ID: N/A

 16405 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JAN-21

SURGERY ORTHOPEDIC

ALEXANDER, GERALD, MD†


Provider ID: N/A

 16300 SAND CANYON AVE

STE 511
IRVINE, CA 92618
Effective as of 01-JAN-21


ALEXANDER, GERALD, MD†

Provider ID: N/A

 16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618
Effective as of 01-MAR-18


ALEXANDER, GERALD, MD†

Provider ID: N/A

 16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618
Effective as of 01-MAR-18


ALI, RAED, MD

Provider ID: N/A

 113 WATERWORKS WAY
STE 225
IRVINE, CA 92618
Effective as of 01-JAN-23


ALI, RAED, MD†

Provider ID: N/A

 113 WATERWORKS WAY
STE 240
IRVINE, CA 92618
Effective as of 01-JAN-19


ALI, RAED, MD†

Provider ID: N/A

 113 WATERWORKS WAY
STE 240
IRVINE, CA 92618
Effective as of 01-OCT-23


ALI, RAED, MD

Provider ID: N/A

 113 WATERWORKS WAY
STE 225
IRVINE, CA 92618
Effective as of 01-OCT-23


ALI, RAED, MD†

Provider ID: N/A

 113 WATERWORKS WAY
STE 240
IRVINE, CA 92618
Effective as of 01-JAN-23


AMINIAN, ARASH, MD†

Provider ID: N/A

 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-FEB-23


AMINIAN, ARASH, MD†

Provider ID: N/A

 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-MAR-21


AMINIAN, ARASH, MD†

Provider ID: N/A

 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-SEP-23


AMINIAN, ARASH, MD†

Provider ID: N/A

 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-NOV-21


AMINIAN, ARASH, MD†

Provider ID: N/A

 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-NOV-21

AMINIAN, ARASH, MD†

Provider ID: N/A

 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-NOV-21

AMINIAN, ARASH, MD†

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

☞ 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-DEC-21

DEBOTTIS, DANIEL, MD

Provider ID: N/A

☞ 16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618
Effective as of 01-OCT-23

DEBOTTIS, DANIEL, MD

Provider ID: N/A

☞ 16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618
Effective as of 01-OCT-23

DUNPHY, TAYLOR, MD†

Provider ID: N/A

☞ 16300 SAND CANYON AVE
STE 400
IRVINE, CA 92618
Effective as of 01-JAN-21

GITTINGS, DANIEL, MD†

Provider ID: N/A

☞ 16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618
Effective as of 01-FEB-22

GITTINGS, DANIEL, MD†

Provider ID: N/A

☞ 16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618
Effective as of 01-FEB-22

GITTINGS, DANIEL, MD†

Provider ID: N/A

☞ 16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618

Effective as of 01-NOV-21

GITTINGS, DANIEL, MD†

Provider ID: N/A

☞ 16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618

Effective as of 01-NOV-21

GORDON, MICHAEL, MD

Provider ID: N/A

☞ 16300 SAND CANYON AVE
STE 400
IRVINE, CA 92618

Effective as of 01-JAN-21

GRAHAM, SCOTT, MD

Provider ID: N/A

☞ 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-SEP-23

HAGHVERDIAN, BRANDON, MD

Provider ID: N/A

☞ 16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618

Effective as of 01-DEC-23

HAGHVERDIAN, BRANDON, MD

Provider ID: N/A

☞ 16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618

Effective as of 01-DEC-23

HUNTER, MICHAEL, MD

Provider ID: N/A

☞ 16300 SAND CANYON AVE
STE 400
IRVINE, CA 92618

Effective as of 01-OCT-22

HUNTER, MICHAEL, MD

Provider ID: N/A

☞ 16300 SAND CANYON AVE
STE 400
IRVINE, CA 92618

Effective as of 01-MAR-24

JOHNSON, BRYCE, MD†

Provider ID: N/A

☞ 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-SEP-23

JOHNSON, BRYCE, MD†

Provider ID: N/A

☞ 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-MAR-21

JOHNSON, BRYCE, MD†

Provider ID: N/A

☞ 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-JUN-24

JOHNSON, BRYCE, MD†

Provider ID: N/A

☞ 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-FEB-21

JOHNSON, BRYCE, MD†

Provider ID: N/A

☞ 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-DEC-21

KADAKIA, NIMISH, MD†


Provider ID: N/A

☞ 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-DEC-21


KADAKIA, NIMISH, MD†

Provider ID: N/A


C1. Lista de proveedores de la red Médico de atención especializada

 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-FEB-21


KADAKIA, NIMISH, MD†
Provider ID: N/A

 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-FEB-21


KADAKIA, NIMISH, MD†
Provider ID: N/A

 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-FEB-17


KADAKIA, NIMISH, MD†
Provider ID: N/A

 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-FEB-17


KADAKIA, NIMISH, MD†
Provider ID: N/A

 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-MAR-21


KADAKIA, NIMISH, MD†
Provider ID: N/A

 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-JUL-23

KADAKIA, NIMISH, MD†
Provider ID: N/A

 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-JUL-23

KADAKIA, NIMISH, MD†
Provider ID: N/A

 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-SEP-23

KASSAM, HAFIZ, MD†

Provider ID: N/A

 16300 SAND CANYON AVE
STE 400
IRVINE, CA 92618

Effective as of 01-FEB-22

KIM, ABRAHAM, MD†

Provider ID: N/A

 22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-SEP-23

KIM, ABRAHAM, MD†

Provider ID: N/A

 22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-OCT-23

KIM, ABRAHAM, MD†


Provider ID: N/A

 22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-JAN-23

KIM, ABRAHAM, MD†

Provider ID: N/A

 22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-JAN-24

KIM, ABRAHAM, MD†


Provider ID: N/A

 22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-JAN-24

KIM, ABRAHAM, MD†


Provider ID: N/A

 22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-JAN-23


KIM, ABRAHAM, MD†

Provider ID: N/A

 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-JAN-24


KIM, ABRAHAM, MD†

Provider ID: N/A

 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-JAN-24


LEE, RICHARD, MD

Provider ID: N/A

 16300 SAND CANYON AVE
STE 400
IRVINE, CA 92618
Effective as of 01-JAN-21


LIN, DARIUS, MD†

Provider ID: N/A

 22 ODYSSEY STE 270B
IRVINE, CA 92618
Effective as of 01-JUN-17


MOLHO, DAVID, MD

Provider ID: N/A

 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-JUN-24


MOLHO, DAVID, MD

Provider ID: N/A

 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-DEC-23

MOLHO, DAVID, MD

Provider ID: N/A

 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-DEC-23

MOLHO, DAVID, MD

Provider ID: N/A


 22 ODYSSEY STE 205

C1. Lista de proveedores de la red Médico de atención especializada

IRVINE, CA 92618
Effective as of 01-DEC-23


MOLHO, DAVID, MD

Provider ID: N/A

 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-DEC-23


MONTGOMERY, ROBERT, MD

Provider ID: N/A

 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-SEP-23


MOSKOW, LONNIE, MD

Provider ID: N/A

 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-SEP-23


NIETO, MICHAEL, MD

Provider ID: N/A

 16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618
Effective as of 01-JUN-21


NIETO, MICHAEL, MD

Provider ID: N/A

 16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618
Effective as of 01-JUN-21

NINH, CHRISTOPHER, MD†

Provider ID: N/A

 113 WATERWORKS WAY
STE 240
IRVINE, CA 92618
Effective as of 01-JAN-23

NINH, CHRISTOPHER, MD†


Provider ID: N/A

 113 WATERWORKS WAY

STE 240
IRVINE, CA 92618
Effective as of 01-MAY-21


NINH, CHRISTOPHER, MD†

Provider ID: N/A

 113 WATERWORKS WAY
STE 240
IRVINE, CA 92618
Effective as of 01-OCT-23


PARVARESH, KEVIN, MD†

Provider ID: N/A

 16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618
Effective as of 01-DEC-20


PARVARESH, KEVIN, MD†

Provider ID: N/A

 16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618
Effective as of 01-DEC-20


PATEL, AMAR, MD†

Provider ID: N/A

 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-SEP-23


PATEL, AMAR, MD†

Provider ID: N/A

 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-DEC-21


PYRKO, PETER, MD

Provider ID: N/A

 22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-OCT-23


SCUDDAY, TRAVIS, MD†

Provider ID: N/A

 16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618
Effective as of 01-SEP-18


SCUDDAY, TRAVIS, MD†

Provider ID: N/A

 16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618
Effective as of 01-SEP-18


SCUDDAY, TRAVIS, MD†

Provider ID: N/A

 16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618
Effective as of 01-JAN-21


TING, JAMES, MD†

Provider ID: N/A

 16300 SAND CANYON AVE
STE 400
IRVINE, CA 92618
Effective as of 01-JAN-21


VENEZIANO, CHRISTOPHER, MD

Provider ID: N/A

 22 ODYSSEY STE 210
IRVINE, CA 92618
Effective as of 01-SEP-23

WANG, WILLIAM, MD†

Provider ID: N/A

 16300 SAND CANYON AVE
STE 400
IRVINE, CA 92618
Effective as of 01-AUG-22

WANG, WILLIAM, MD†

Provider ID: N/A

 16300 SAND CANYON AVE
STE 400
IRVINE, CA 92618

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-AUG-22

WHITE, JON, MD†

Provider ID: N/A

☐ 16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618

Effective as of 01-AUG-18

WHITE, JON, MD†

Provider ID: N/A

☐ 16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618

Effective as of 01-DEC-12

WHITE, JON, MD†

Provider ID: N/A

☐ 16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618

Effective as of 01-FEB-03

WONG, JEFFREY, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-SEP-23

WONG, JEFFREY, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-JAN-20

WONG, JEFFREY, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-FEB-20

WONG, JEFFREY, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-FEB-20

YOUDERIAN, ARI, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-JAN-23

YOUDERIAN, ARI, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-JAN-23

YOUDERIAN, ARI, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-OCT-23

YOUDERIAN, ARI, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-SEP-23

YOUDERIAN, ARI, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-SEP-23

YOUDERIAN, ARI, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-SEP-23

YOUDERIAN, ARI, MD†

Provider ID: N/A

☐ 22 ODYSSEY STE 205
IRVINE, CA 92618

Effective as of 01-DEC-21

ZHANG, JOANNE, MD

Provider ID: N/A

☐ 16300 SAND CANYON AVE
STE 400
IRVINE, CA 92618

Effective as of 01-NOV-22

ZHANG, JOANNE, MD

Provider ID: N/A

☐ 16300 SAND CANYON AVE
STE 400
IRVINE, CA 92618

Effective as of 01-NOV-22

SURGERY THORACIC

KANAAN, SAMER, MD†

Provider ID: N/A

☐ 4 HUGHES STE 100
IRVINE, CA 92618

Effective as of 01-APR-22

KANAAN, SAMER, MD†

Provider ID: N/A

☐ 4 HUGHES STE 100
IRVINE, CA 92618

Effective as of 01-APR-22

KANAAN, SAMER, MD†

Provider ID: N/A

☐ 16105 SAND CANYON AVE
IRVINE, CA 92618

Effective as of 01-APR-19

KANAAN, SAMER, MD†

Provider ID: N/A

☐ 4 HUGHES STE 100
IRVINE, CA 92618

Effective as of 01-APR-22

KANAAN, SAMER, MD†

Provider ID: N/A

☐ 4 HUGHES STE 100
IRVINE, CA 92618

Effective as of 01-APR-22

C1. Lista de proveedores de la red Médico de atención especializada

KANAAN, SAMER, MD†

Provider ID: N/A

☐ 4 HUGHES STE 100
IRVINE, CA 92618
Effective as of 01-APR-22

KANAAN, SAMER, MD†

Provider ID: N/A

☐ 4 HUGHES STE 100
IRVINE, CA 92618
Effective as of 01-DEC-23

UROLOGY

BUI, DON, MD†

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-DEC-23

BUI, DON, MD†

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JUN-18

BUI, DON, MD†

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JUN-18

BUI, DON, MD†

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JUN-24

BUI, DON, MD†

Provider ID: N/A

☐ 16305 SAND CANYON AVE

STE 200
IRVINE, CA 92618
Effective as of 01-JUN-18

BUI, DON, MD†

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JUN-18

BUI, DON, MD†

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618*
Effective as of 01-OCT-22

BUI, DON, MD†

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-OCT-23

BUI, DON, MD†

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JAN-23

ELKHOURY, FUAD, MD

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JAN-23

ELKHOURY, FUAD, MD

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-OCT-23

ELKHOURY, FUAD, MD

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-FEB-23

ELKHOURY, FUAD, MD

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-FEB-23

ELKHOURY, FUAD, MD

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-FEB-23

ELKHOURY, FUAD, MD

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-FEB-23

GRUENENFELDER, JENNIFER, MD

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JAN-21

HO, TAMMY, MD†

Provider ID: N/A

☐ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JAN-21

HO, TAMMY, MD†


**C1. Lista de proveedores de la red
Médico de atención especializada**

<p>Provider ID: N/A  16305 SAND CANYON AVE STE 200 IRVINE, CA 92618 Effective as of 01-FEB-22</p>	<p>IRVINE, CA 92618 Effective as of 01-AUG-19</p>	<p>KIM, MOSES, MD† Provider ID: N/A  16305 SAND CANYON AVE STE 200 IRVINE, CA 92618 Effective as of 01-OCT-23</p>
<p>HO, TAMMY, MD† Provider ID: N/A  16305 SAND CANYON AVE STE 200 IRVINE, CA 92618 Effective as of 01-DEC-20</p>	<p>HO, TAMMY, MD† Provider ID: N/A  16305 SAND CANYON AVE STE 200 IRVINE, CA 92618 Effective as of 01-OCT-23</p>	<p>KIM, MOSES, MD† Provider ID: N/A  16305 SAND CANYON AVE STE 200 IRVINE, CA 92618 Effective as of 01-SEP-18</p>
<p>HO, TAMMY, MD† Provider ID: N/A  16305 SAND CANYON AVE STE 200 IRVINE, CA 92618 Effective as of 01-AUG-19</p>	<p>HO, TAMMY, MD† Provider ID: N/A  16305 SAND CANYON AVE STE 200 IRVINE, CA 92618 Effective as of 01-MAY-19</p>	<p>KIM, MOSES, MD† Provider ID: N/A  16305 SAND CANYON AVE STE 200 IRVINE, CA 92618 Effective as of 01-SEP-18</p>
<p>HO, TAMMY, MD† Provider ID: N/A  16305 SAND CANYON AVE STE 200 IRVINE, CA 92618 Effective as of 01-AUG-19</p>	<p>HO, TAMMY, MD† Provider ID: N/A  16305 SAND CANYON AVE STE 200 IRVINE, CA 92618 Effective as of 01-JUN-19</p>	<p>KIM, MOSES, MD† Provider ID: N/A  16305 SAND CANYON AVE STE 200 IRVINE, CA 92618 Effective as of 01-DEC-23</p>
<p>HO, TAMMY, MD† Provider ID: N/A  16305 SAND CANYON AVE STE 200 IRVINE, CA 92618 Effective as of 01-AUG-19</p>	<p>HO, TAMMY, MD† Provider ID: N/A  16305 SAND CANYON AVE STE 200 IRVINE, CA 92618 Effective as of 01-JUN-19</p>	<p>KIM, MOSES, MD† Provider ID: N/A  16305 SAND CANYON AVE STE 200 IRVINE, CA 92618 Effective as of 01-JAN-21</p>
<p>HO, TAMMY, MD† Provider ID: N/A  16305 SAND CANYON AVE STE 200 IRVINE, CA 92618 Effective as of 01-AUG-19</p>	<p>KIM, MOSES, MD† Provider ID: N/A  16305 SAND CANYON AVE STE 200 IRVINE, CA 92618 Effective as of 01-JUN-18</p>	<p>MEAGLIA, JAMES, MD† Provider ID: N/A  16305 SAND CANYON AVE STE 200 IRVINE, CA 92618 Effective as of 01-JAN-21</p>
<p>HO, TAMMY, MD† Provider ID: N/A  16305 SAND CANYON AVE STE 200</p>	<p>KIM, MOSES, MD† Provider ID: N/A  16305 SAND CANYON AVE STE 200 IRVINE, CA 92618 Effective as of 01-JAN-23</p>	<p>MEAGLIA, JAMES, MD† Provider ID: N/A  16305 SAND CANYON AVE</p>


**C1. Lista de proveedores de la red
Médico de atención especializada**

STE 200
IRVINE, CA 92618
Effective as of 01-DEC-23


MEAGLIA, JAMES, MD†

Provider ID: N/A
 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-DEC-19


MEAGLIA, JAMES, MD†

Provider ID: N/A
 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-DEC-19


MEAGLIA, JAMES, MD†

Provider ID: N/A
 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-OCT-23


MEAGLIA, JAMES, MD†

Provider ID: N/A
 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JAN-23


MEAGLIA, JAMES, MD†

Provider ID: N/A
 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JUN-18


MEAGLIA, JAMES, MD†

Provider ID: N/A
 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JUN-18


MEAGLIA, JAMES, MD†

Provider ID: N/A
 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JUN-24


MEAGLIA, JAMES, MD†

Provider ID: N/A
 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JUN-18


NAKAMURA, LEAH, MD†

Provider ID: N/A
 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JUN-24


NAKAMURA, LEAH, MD†

Provider ID: N/A
 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JUN-18

NAKAMURA, LEAH, MD†


Provider ID: N/A
 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JAN-23

NAKAMURA, LEAH, MD†


Provider ID: N/A
 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-OCT-23

NAKAMURA, LEAH, MD†


Provider ID: N/A

 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-APR-21


NAKAMURA, LEAH, MD†

Provider ID: N/A
 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JAN-21

SHOURESHI, POONE, MD

Provider ID: N/A
 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-AUG-23


SHOURESHI, POONE, MD

Provider ID: N/A
 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-AUG-23

SHOURESHI, POONE, MD

Provider ID: N/A
 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-AUG-23

SHOURESHI, POONE, MD

Provider ID: N/A
 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-AUG-23

SHOURESHI, POONE, MD

Provider ID: N/A
 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618

C1. Lista de proveedores de la red
Médico de atención especializada

Effective as of 01-AUG-23

SINGH, KARAN, MD†

Provider ID: N/A

16305 SAND CANYON AVE
 STE 200
 IRVINE, CA 92618

Effective as of 01-DEC-19

SINGH, KARAN, MD†

Provider ID: N/A

16305 SAND CANYON AVE
 STE 200
 IRVINE, CA 92618

Effective as of 01-DEC-19

SINGH, KARAN, MD†

Provider ID: N/A

16305 SAND CANYON AVE
 STE 200
 IRVINE, CA 92618

Effective as of 01-JAN-21

SINGH, KARAN, MD†

Provider ID: N/A

16305 SAND CANYON AVE
 STE 200
 IRVINE, CA 92618

Effective as of 01-OCT-23

SINGH, KARAN, MD†

Provider ID: N/A

16305 SAND CANYON AVE
 STE 200
 IRVINE, CA 92618

Effective as of 01-JAN-23

SINGH, KARAN, MD†

Provider ID: N/A

16305 SAND CANYON AVE
 STE 200
 IRVINE, CA 92618

Effective as of 01-JUN-18

SINGH, KARAN, MD†

Provider ID: N/A

16305 SAND CANYON AVE
 STE 200
 IRVINE, CA 92618

Effective as of 01-JUN-18

SINGH, KARAN, MD†

Provider ID: N/A

16305 SAND CANYON AVE
 STE 200
 IRVINE, CA 92618

Effective as of 01-JUN-24

SINGH, KARAN, MD†

Provider ID: N/A

16305 SAND CANYON AVE
 STE 200
 IRVINE, CA 92618

Effective as of 01-JUN-18

SPITZ, AARON, MD†

Provider ID: N/A

16305 SAND CANYON AVE
 STE 200
 IRVINE, CA 92618*

Effective as of 01-JUN-24

SPITZ, AARON, MD†

Provider ID: N/A

16305 SAND CANYON AVE
 STE 200
 IRVINE, CA 92618

Effective as of 01-JUN-18

SPITZ, AARON, MD†

Provider ID: N/A

16305 SAND CANYON AVE
 STE 200
 IRVINE, CA 92618

Effective as of 01-JUN-18

SPITZ, AARON, MD†

Provider ID: N/A

16305 SAND CANYON AVE
 STE 200

IRVINE, CA 92618

Effective as of 01-JAN-23

SPITZ, AARON, MD†

Provider ID: N/A

16305 SAND CANYON AVE
 STE 200
 IRVINE, CA 92618

Effective as of 01-OCT-18

SPITZ, AARON, MD†

Provider ID: N/A

16305 SAND CANYON AVE
 STE 200
 IRVINE, CA 92618

Effective as of 01-OCT-23

SPITZ, AARON, MD†

Provider ID: N/A

16305 SAND CANYON AVE
 STE 200
 IRVINE, CA 92618

Effective as of 01-JAN-21

SPITZ, AARON, MD†

Provider ID: N/A

16305 SAND CANYON AVE
 STE 200
 IRVINE, CA 92618

Effective as of 01-FEB-23

SPITZ, AARON, MD†

Provider ID: N/A

16305 SAND CANYON AVE
 STE 200
 IRVINE, CA 92618

Effective as of 01-DEC-19

SPITZ, AARON, MD†

Provider ID: N/A

16305 SAND CANYON AVE
 STE 200
 IRVINE, CA 92618

Effective as of 01-DEC-19

C1. Lista de proveedores de la red Médico de atención especializada

SPITZ, AARON, MD†

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-APR-21

SU, DANIEL, MD†

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-SEP-18

SU, DANIEL, MD†

Provider ID: N/A

☞ 16305 SAND CANYON AVE
IRVINE, CA 92618
Effective as of 01-SEP-18

SU, DANIEL, MD†

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JAN-21

SU, DANIEL, MD†

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-DEC-19

SU, DANIEL, MD†

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-OCT-23

SU, DANIEL, MD†

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 200

IRVINE, CA 92618
Effective as of 01-JAN-23

TAKESITA, KEN, MD†

Provider ID: N/A

☞ 15775 LAGUNA CANYON
RD STE 200
IRVINE, CA 92618
Effective as of 01-OCT-15

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-SEP-18

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-SEP-18

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JAN-21

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-MAY-21

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-OCT-23

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JUN-18

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JUN-18

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JUN-18

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

☞ 16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JAN-23

TORREY, ROBERT, MD

Provider ID: N/A

☞ 16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-JUL-24

TORREY, ROBERT, MD

Provider ID: N/A

☞ 16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-JUL-24

ZHAO, HANSON, MD

Provider ID: N/A

☞ 16105 SAND CANYON AVE

C1. Lista de proveedores de la red Médico de atención especializada

STE 260
IRVINE, CA 92618
Effective as of 01-NOV-22

ZHAO, HANSON, MD

Provider ID: N/A

16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-NOV-22

ALLERGY IMMUNOLOGY

MODENA, BRIAN, MD†

Provider ID: N/A

9850 GENESEE AVE STE
710
LA JOLLA, CA 92037
Teleservice
Effective as of 01-MAY-22

MODENA, BRIAN, MD†

Provider ID: N/A

9850 GENESEE AVE STE
710
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JUN-22

SHARMA, KUSUM, MD

Provider ID: N/A

9850 GENESEE AVE STE
710
LA JOLLA, CA 92037
Effective as of 01-JUN-22

SHARMA, KUSUM, MD

Provider ID: N/A

9850 GENESEE AVE STE
710
LA JOLLA, CA 92037
Effective as of 01-JAN-23

SHARMA, KUSUM, MD

Provider ID: N/A

9834 GENESEE AVE STE
400
LA JOLLA, CA 92037
Effective as of 01-JUL-21

ANESTHESIOLOGY

BECERRA SONGOLO, TOSHA, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

CHAN, CHI-BEW, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-24

FILIPOVIC, MAYA, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

FUNDINGSLAND, BRENT, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUL-21

NARLA, VINOD, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-23

NGO, DONALD, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-23

PARDO, PATRICIA, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-24

ROY, KEVIN, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

SAHA, DEVJANI, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-24

SUYDAM, STEVEN, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-21

TULLY, JEFFREY, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-21

TZENG, ERIC, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-21

VAUGHN, DOUGLAS, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

WANG, MICHELLE, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-NOV-21

ANESTHESIOLOGY CRITICAL CARE MEDICINE

KRAUSE, MARTIN, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JUL-21

ANESTHESIOLOGY PAIN MANAGEMENT

MADHAV, SANDIP, MD†

Provider ID: N/A

9850 GENESEE AVE STE
530
LA JOLLA, CA 92037

Teleservice

Effective as of 01-APR-21

MADHAV, SANDIP, MD†

Provider ID: N/A

9850 GENESEE AVE STE
530
LA JOLLA, CA 92037

Teleservice

Effective as of 01-MAR-21

AUDIOLOGIST

BAXTER, STEPHANIE, AuD

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

Effective as of 01-MAY-23

BAXTER, STEPHANIE, AuD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-MAY-23

BAXTER, STEPHANIE, AuD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-MAY-23

BAXTER, STEPHANIE, AuD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-MAY-23

HARRIS, GENEVIEVE, AuD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-MAY-23

KING, JOHN, AuD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-MAY-23

RUBY, CHARLES, AuD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-MAY-23

SPRIGGS, MEGHAN, AuD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-MAY-23

TSANG, JOYCE, AuD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-MAY-23

WIAN, DEBORAH, AuD

Provider ID: N/A

9350 CAMPUS POINT DR

LA JOLLA, CA 92037

Effective as of 01-MAY-23

WILLIAMS, ALICIA, AuD†

Provider ID: N/A

9350 CAMPUS POINT DR
STE LLA

LA JOLLA, CA 92037

Effective as of 01-JUL-21

ZETTNER, ERIKA, AuD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-MAY-23

CARDIAC ELECTROPHYSIOLOGY

COHEN, DAVID, MD†

Provider ID: N/A

9850 GENESEE AVE STE
940

LA JOLLA, CA 92037

Effective as of 01-SEP-21

COHEN, DAVID, MD†

Provider ID: N/A

9850 GENESEE AVE STE
940

LA JOLLA, CA 92037

Effective as of 01-MAY-20

HAMZEI, ALI, MD†

Provider ID: N/A

9850 GENESEE AVE STE
780

LA JOLLA, CA 92037

Effective as of 01-JAN-21

MENDENHALL, GEORGE, MD†

Provider ID: N/A

9850 GENESEE AVE STE
940

LA JOLLA, CA 92037

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-JAN-23

MENDENHALL, GEORGE, MD†

Provider ID: N/A

9850 GENESEE AVE STE
940

LA JOLLA, CA 92037

Effective as of 01-JUL-18

PATEL, JIGAR, DO†

Provider ID: N/A

9850 GENESEE AVE STE
810

LA JOLLA, CA 92037

Effective as of 01-JAN-22

WHITWAM, WAYNE, MD†

Provider ID: N/A

9850 GENESEE AVE STE
780

LA JOLLA, CA 92037

Effective as of 01-JAN-21

CARDIOVASCULAR DISEASE

AIZIN, VITALI, MD†

Provider ID: N/A

9834 GENESEE AVE STE 101
LA JOLLA, CA 92037

Effective as of 01-FEB-21

AIZIN, VITALI, MD†

Provider ID: N/A

9834 GENESEE AVE STE 101
LA JOLLA, CA 92037

Effective as of 01-JAN-23

AVALOS, ROY, MD†

Provider ID: N/A

9850 GENESEE AVE STE
780

LA JOLLA, CA 92037

Effective as of 01-JAN-21

BERMAN, BRETT, MD†

Provider ID: N/A

9834 GENESEE AVE STE 101
LA JOLLA, CA 92037

Effective as of 01-FEB-21

CARAZO, MATTHEW, MD†

Provider ID: N/A

9434 MEDICAL CENTER DR
FL 1

LA JOLLA, CA 92037

Effective as of 01-NOV-21

CHARLAT, MARTIN, MD†

Provider ID: N/A

9850 GENESEE AVE STE
780

LA JOLLA, CA 92037

Effective as of 01-JAN-21

COHEN, DAVID, MD†

Provider ID: N/A

9850 GENESEE AVE STE
940

LA JOLLA, CA 92037

Effective as of 01-JAN-21

COSTELLO, DENNIS, MD†

Provider ID: N/A

9850 GENESEE AVE STE
430

LA JOLLA, CA 92037

Effective as of 01-JAN-21

COSTELLO, DENNIS, MD†

Provider ID: N/A

9850 GENESEE AVE STE
430

LA JOLLA, CA 92037

Effective as of 01-JUL-20

DAMANI, SAMIR, MD†

Provider ID: N/A

9850 GENESEE AVE STE
650

LA JOLLA, CA 92037

Effective as of 01-JUN-22

DURAN, EDWARD, MD

Provider ID: N/A

9434 MEDICAL CENTER DR
LA JOLLA, CA 92037

Effective as of 01-DEC-23

HONG, ERIC, MD†

Provider ID: N/A

9850 GENESEE AVE STE
780

LA JOLLA, CA 92037

Effective as of 01-JAN-21

KARIMIAN, AMIR, MD

Provider ID: N/A

9434 MEDICAL CENTER DR
LA JOLLA, CA 92037

Effective as of 01-DEC-23

KEEN, WILLIAM, MD†

Provider ID: N/A

9434 MEDICAL CENTER DR
LA JOLLA, CA 92037

Effective as of 01-AUG-22

KULHANEK, JAN, MD

Provider ID: N/A

9850 GENESEE AVE STE
780

LA JOLLA, CA 92037

Effective as of 01-JUL-23

KUMAR, KRIS, DO

Provider ID: N/A

9434 MEDICAL CENTER DR
LA JOLLA, CA 92037

Effective as of 01-DEC-23

MENDENHALL, GEORGE, MD†

Provider ID: N/A

9850 GENESEE AVE STE
940

C1. Lista de proveedores de la red Médico de atención especializada

LA JOLLA, CA 92037
Effective as of 01-JAN-21

PATEL, JIGAR, DO†

Provider ID: N/A

9850 GENESEE AVE STE
810
LA JOLLA, CA 92037
Effective as of 01-MAR-24

PATEL, JIGAR, DO

Provider ID: N/A

9850 GENESEE AVE
LA JOLLA, CA 92037
Effective as of 01-AUG-24

RAPEPORT, KEVIN, MD†

Provider ID: N/A

9850 GENESEE AVE STE
940B
LA JOLLA, CA 92037
Effective as of 01-MAR-16

RUSSO, ROBERT, MD†

Provider ID: N/A

9850 GENESEE AVE STE
350
LA JOLLA, CA 92037
Effective as of 01-JAN-21

SAB, SHIV, MD†

Provider ID: N/A

9850 GENESEE AVE STE
780
LA JOLLA, CA 92037
Effective as of 01-DEC-22

SHAPIRO, HILARY, MD

Provider ID: N/A

9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-JUL-23

SHEREV, DIMITRI, MD

Provider ID: N/A

4225 EXECUTIVE SQ STE
450
LA JOLLA, CA 92037
Effective as of 01-SEP-23

CERTIFIED ACUPUNCTURIST

ARELLANO, JACQUELINE, LAC

Provider ID: N/A

8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
Effective as of 01-FEB-24

ARELLANO, JACQUELINE, LAC

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-FEB-24

ARELLANO, JACQUELINE, LAC

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-FEB-24

JULIAN, FIDES, LAC

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-FEB-24

JULIAN, FIDES, LAC

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-FEB-24

JULIAN, FIDES, LAC

Provider ID: N/A

8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
Effective as of 01-FEB-24

MURRAY, STEVEN, LAC

Provider ID: N/A

8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
Effective as of 01-FEB-24

MURRAY, STEVEN, LAC

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-FEB-24

MURRAY, STEVEN, LAC

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-FEB-24

TANG-RITCHIE, LENG, LAC

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-FEB-24

TANG-RITCHIE, LENG, LAC

Provider ID: N/A

8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
Effective as of 01-FEB-24

TANG-RITCHIE, LENG, LAC

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-FEB-24

CERTIFIED NURSE PRACTITIONER

ASHMAN, ELLEN, NP†

Provider ID: N/A

9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

ATILLO, RONALD MAR, NP†

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

BELL, ANDREA, NP†

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Teleservice
Effective as of 01-AUG-22

BIRD, JEREMY, NP

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-23

BIRD, JEREMY, NP

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-23

BISCHER, MARGARET, NP

Provider ID: N/A

7855 IVANHOE AVE STE 110
LA JOLLA, CA 92037
Effective as of 01-MAR-24

BURNEY, BRAEANNE, NP†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

CAMAQUIN, MIA, NP

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

CAMAQUIN, MIA, NP

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

CONNER, PAMELA, NP

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

CONNER, PAMELA, NP

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

CONNOR, CAROLINE, NP†

Provider ID: N/A

8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037
Effective as of 01-JUN-21

CZYPULL, MONICA, NP

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Teleservice
Effective as of 01-SEP-21

CZYPULL, MONICA, NP

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Teleservice
Effective as of 01-AUG-21

DE DIOS, SARAH JANE, NP

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUL-23

DRISCOLL, KARRIE, NP†

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-DEC-21

EVANS, ELISABETH, NP

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Teleservice
Effective as of 01-APR-24

GIOVANNETTI, ERIN, NP†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JAN-21

GOMEZ, LESLIE, NP

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

GOMEZ, LESLIE, NP

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

GOMEZ, LESLIE, NP

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

GOMEZ, LESLIE, NP

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

C1. Lista de proveedores de la red Médico de atención especializada

GOSHEN, KIRSTEN, NP†

Provider ID: N/A

9850 GENESEE AVE STE
570
LA JOLLA, CA 92037
Effective as of 01-SEP-22

GOSHEN, KIRSTEN, NP†

Provider ID: N/A

9850 GENESEE AVE STE
570
LA JOLLA, CA 92037
Effective as of 01-JAN-21

HADINGER, JANE, NP

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C129
LA JOLLA, CA 92037

Teleservice

Effective as of 01-DEC-23

HALPERN, DAVID, NP†

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Effective as of 01-JAN-21

HANNA, LINDSAY, NP†

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-OCT-21

HAYS, SHEENA, NPF

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JUN-24

HEURING, JULIE, NP†

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Effective as of 01-DEC-21

HOEFKE, ANGELA, NPF

Provider ID: N/A

9850 GENESEE AVE STE
770
LA JOLLA, CA 92037
Effective as of 01-SEP-24

JENKINS, ERIN, NP

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

JENKINS, ERIN, NP

Provider ID: N/A

9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

JONES, CHRISTA, NP†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JAN-21

JONES, LAILA, NP

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Effective as of 01-JUN-23

JORJADZE, KETEVAN, NP

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037

Teleservice

Effective as of 01-AUG-22

KHUAT, LIEN, NP†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

KORMANIK, PATRICIA, NP†

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-JUL-21

LEE, MINDY, NP

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

LEE, MINDY, NP

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

LEE, MINDY, NP

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

LEE, MINDY, NP

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

LOWE, ASHLEY, NP

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037

Teleservice

**C1. Lista de proveedores de la red
Médico de atención especializada**

Effective as of 01-MAY-24

LOWE, ASHLEY, NP

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JUL-23

MATTERA, BETH, NPF

Provider ID: N/A

9898 GENESEE AVE FL 4
LA JOLLA, CA 92037

Effective as of 01-MAY-16

MATTHESS, JANETTE, NP†

Provider ID: N/A

9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-FEB-22

MATTHESS, JANETTE, NP†

Provider ID: N/A

8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037

Effective as of 01-FEB-22

MCCALLION, DANIELLE, NP†

Provider ID: N/A

4225 EXECUTIVE SQ STE
450
LA JOLLA, CA 92037

Effective as of 01-OCT-21

MCCALLION, DANIELLE, NP†

Provider ID: N/A

4225 EXECUTIVE SQ STE
450
LA JOLLA, CA 92037

Effective as of 01-SEP-22

MCCLAIN, MEGAN, NP†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-AUG-22

MCCLAIN, MEGAN, NP†

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-AUG-22

MCPHERSON, SAMANTHA, NP

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037

Teleservice

Effective as of 01-AUG-21

MICHAEL, NICOLE, NP†

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037

Effective as of 01-MAY-21

MICK, SHARON, NP

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

Effective as of 01-MAY-23

MICK, SHARON, NP

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-MAY-23

MICK, SHARON, NP

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-MAY-23

MICK, SHARON, NP

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-MAY-23

MOONEY, PATRICIA, NP†

Provider ID: N/A

9850 GENESEE AVE STE
560
LA JOLLA, CA 92037

Teleservice

Effective as of 01-MAY-21

MOONEY, PATRICIA, NP†

Provider ID: N/A

9850 GENESEE AVE STE
560
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JAN-24

MORENO, MANUEL, NP†

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037

Teleservice

Effective as of 01-AUG-22

MULVEY, CAOILFHIONN, NP†

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

Effective as of 01-AUG-22

MWAURA, WAIRIMU, NP†

Provider ID: N/A

9850 GENESEE AVE STE
560
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JAN-24

MWAURA, WAIRIMU, NP†

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

9850 GENESEE AVE STE
560
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JUN-21

PETREK, MEAGAN, NP†

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JAN-21

PITECK, CAITLIN, NPF

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JUN-24

RENFROE, ILANA, NP

Provider ID: N/A

7855 IVANHOE AVE STE 110
LA JOLLA, CA 92037

Teleservice

Effective as of 01-DEC-21

ROLPH, KELLIE, NP

Provider ID: N/A

9888 GENESEE AVE
LA JOLLA, CA 92037
Effective as of 01-AUG-24

ROSSI, CATHERINE, NP†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

SALINAS, NIECEL, NP†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

SETIAWAN, EUGENIE, NPF†

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037

Teleservice

Effective as of 01-DEC-21

SILVESTRI, NICOLE, NP

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037

Effective as of 01-MAY-21

SOLOMON, AMANDA, NP

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Effective as of 01-JUN-23

SRILASAK, MICHELE, NP†

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

Effective as of 01-JUL-21

TOMICICH, STEPHANIE, NP†

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JAN-24

TOMICICH, STEPHANIE, NP†

Provider ID: N/A

9850 GENESEE AVE STE
440

LA JOLLA, CA 92037

Teleservice

Effective as of 01-JAN-21

TOMICICH, STEPHANIE, NP†

Provider ID: N/A

9834 GENESEE AVE STE
416
LA JOLLA, CA 92037

Effective as of 01-JAN-21

TRAN, RICHARD, NPF

Provider ID: N/A

9850 GENESEE AVE STE
570
LA JOLLA, CA 92037

Teleservice

Effective as of 01-MAR-24

TRAN, RICHARD, NPF

Provider ID: N/A

9850 GENESEE AVE STE
570
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JUL-23

TRAN, TRAN, NP†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-NOV-21

TRAN, TRAN, NP†

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-NOV-21

TREJO, ANA, NP

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-JUL-24

C1. Lista de proveedores de la red Médico de atención especializada

TREJO, ANA, NP

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUL-24

TREJO, ANA, NP

Provider ID: N/A

9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-JUL-24

TRUJILLO, DALE, NP†

Provider ID: N/A

9350 CAMPUS POINT DR
STE 2B
LA JOLLA, CA 92037
Effective as of 01-APR-21

TUCKER, LANIKA, NP

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUL-24

VIERRA, ERIN, NP†

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Effective as of 01-MAY-21

WEIDNER, ANNE, NP

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Effective as of 01-MAY-21

WILLEY, MARTI, NP†

Provider ID: N/A

9850 GENESEE AVE STE
560
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JAN-24

WILLEY, MARTI, NP†

Provider ID: N/A

9850 GENESEE AVE STE
560
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JUN-21

YEO, ALEXANDRIA, NP

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

ZUNIGA, VANIA, NP†

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Effective as of 01-MAY-21

CERTIFIED REGISTERED NURSE ANESTHETIST

CALABRIA, MEGAN, CRNA

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

CANTRELL, SARAH, CRNA

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-23

COLE, JASON, CRNA†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUL-21

DOLLAND, STEVEN, CRNA†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUL-21

DULAY, JOTI, CRNA

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

ESTABROOK, LARA, CRNA

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-JUL-23

EVANS, CATHERINE, CRNA

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-23

FIEDLER, DEREK, CRNA

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

GONZALEZ, LISA, CRNA

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

GRIFFIN, SETH, CRNA

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

JOHNSTON, RACHEL, CRNA

Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-23

LAZARUS, ELIZABETH, CRNA
Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-JUL-23

**POLIKOWSKI, SAMANTHA,
CRNA†**

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

POLLOM, JESSICA, CRNA†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUL-21

RAMIREZ, NICOLE, CRNA†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

ROADMAN, KEENE, CRNA

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

SACKS, BRENT, CRNA†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-APR-21

SNODGRASS, JULIE, CRNA†

Provider ID: N/A

9300 CAMPUS POINT DR

LA JOLLA, CA 92037
Effective as of 01-JUL-21

SOTO, GILBERTO, CRNA†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-FEB-22

**CERTIFIED REGISTERED
NURSE MIDWIFE**

CHOI, NATHALIE, CRNM

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

CORRY, ANDREA, CRNM

Provider ID: N/A

8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

**ELY-KONOSKE, RACHEL,
CRNM**

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-23

**ELY-KONOSKE, RACHEL,
CRNM**

Provider ID: N/A

8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
Effective as of 01-DEC-23

NATHAN, CARLY, CRNM

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-23

CHIROPRACTOR

BERKOFF, GREGORY, DC

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C129
LA JOLLA, CA 92037
Effective as of 01-MAY-21

CLINICAL

NEUROPSYCHOLOGIST

ALASANTRO, LORI, PhD†

Provider ID: N/A

9850 GENESEE AVE STE
470
LA JOLLA, CA 92037
Effective as of 01-FEB-18

KAUP, ALLISON, PhD†

Provider ID: N/A

9850 GENESEE AVE STE
530
LA JOLLA, CA 92037
Teleservice
Effective as of 01-MAR-21

DERMATOLOGY

BUSCH, HEIDI, MD

Provider ID: N/A

9850 GENESEE AVE STE
410
LA JOLLA, CA 92037
Effective as of 01-JUL-24

CHANG, TIMOTHY, MD†

Provider ID: N/A

9850 GENESEE AVE STE
850
LA JOLLA, CA 92037
Teleservice
Effective as of 01-OCT-21

GONZALES, DARRELL, MD

CI. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

9850 GENESEE AVE STE
850
LA JOLLA, CA 92037

Teleservice

Effective as of 01-OCT-21

NASH-GOELITZ, ALYSSA, MD†

Provider ID: N/A

9850 GENESEE AVE STE
850
LA JOLLA, CA 92037

Teleservice

Effective as of 01-OCT-21

SIDDIQUI, FARYAL, MD

Provider ID: N/A

7720 FAY AVE
LA JOLLA, CA 92037

Effective as of 01-MAY-22

EMERGENCY MEDICINE

BLACK, NICHOLAS, MD†

Provider ID: N/A

8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037

Effective as of 01-SEP-21

CHEN, ALICE, MD†

Provider ID: N/A

8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037

Effective as of 01-NOV-21

CHEN, ALICE, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-NOV-21

GALUST, HENRIK, MD

Provider ID: N/A

8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

HARDIN, JEREMY, MD†

Provider ID: N/A

8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

HERNANDEZ, CRISTINA, MD†

Provider ID: N/A

8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037
Effective as of 01-MAY-21

HOGUE, BRENNIA, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

HOGUE, BRENNIA, MD

Provider ID: N/A

8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

KUTZ, CRAIG, MD†

Provider ID: N/A

8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037
Effective as of 01-AUG-21

KUTZ, CRAIG, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-21

LIOTTA, BENJAMIN, MD†

Provider ID: N/A

8910 VILLA LA JOLLA DR

STE 100
LA JOLLA, CA 92037
Effective as of 01-AUG-21

PARK, JAY, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-21

PARK, JAY, MD†

Provider ID: N/A

8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037
Effective as of 01-NOV-21

SELTZER, JUSTIN, MD†

Provider ID: N/A

8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037
Effective as of 01-AUG-21

SMITH, CASEY, MD

Provider ID: N/A

8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

SUPAT, BENJAMIN, MD

Provider ID: N/A

8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

YU, ELAINE, DO

Provider ID: N/A

8910 VILLA LA JOLLA DR
STE A
LA JOLLA, CA 92037
Effective as of 01-JUN-23

YU, ELAINE, DO

Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

ENDOCRINOLOGY **METABOLISM DIABETES**

IYENGAR, RAVI, MD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

IYENGAR, RAVI, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

MBA, MBAUZOMA, MD

Provider ID: N/A

9850 GENESEE AVE STE
470
LA JOLLA, CA 92037
Effective as of 01-DEC-22

NAGELBERG, JODI, MD†

Provider ID: N/A

8939 VILLA LA JOLLA DR
LA JOLLA, CA 92037
Effective as of 01-NOV-21

PETTUS, JEREMY, MD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JAN-24

SCHNEIDER, DARIUS, MD

Provider ID: N/A

9850 GENESEE AVE STE
470
LA JOLLA, CA 92037
Teleservice
Effective as of 01-OCT-21

SCHNEIDER, DARIUS, MD

Provider ID: N/A

9850 GENESEE AVE STE
470
LA JOLLA, CA 92037
Teleservice

Effective as of 01-JAN-23

SHAH, NANDI, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JAN-24

SHAH, NANDI, MD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JAN-24

FAMILY PRACTICE

BOYD, JAMES, MD†

Provider ID: N/A

9850 GENESEE AVE STE
900
LA JOLLA, CA 92037*
Effective as of 01-JAN-21

JOLICOEUR, MEGAN, DO

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

GASTROENTEROLOGY

BORTNIKER, ETHAN, MD

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-JUN-23

GOLDKLANG, ROBERT, MD†

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-APR-23

GOLDKLANG, ROBERT, MD†

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-SEP-22

HASAN, AWS, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

HASAN, AWS, MD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

KLAPHEKE, ROBERT, MD†

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-21

LAJOIE, ADRIANNE, MD†

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-SEP-22

MAYER, ANDREW, MD

Provider ID: N/A

9850 GENESEE AVE STE
770
LA JOLLA, CA 92037
Effective as of 01-AUG-24

C1. Lista de proveedores de la red Médico de atención especializada

MAYER, ANDREW, MD†

Provider ID: N/A

📄 9850 GENESEE AVE STE
820
LA JOLLA, CA 92037*
Effective as of 01-NOV-14

MAYER, ANDREW, MD†

Provider ID: N/A

📄 9850 GENESEE AVE STE
820
LA JOLLA, CA 92037
Effective as of 01-JAN-21

MAYER, ANDREW, MD

Provider ID: N/A

📄 9850 GENESEE AVE STE
770
LA JOLLA, CA 92037
Effective as of 01-JUL-24

PAREDEZ, EDWARD, MD†

Provider ID: N/A

📄 9850 GENESEE AVE STE
820
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JAN-21

PAREDEZ, EDWARD, MD

Provider ID: N/A

📄 9850 GENESEE AVE STE
770
LA JOLLA, CA 92037
Effective as of 01-SEP-24

PAREDEZ, EDWARD, MD

Provider ID: N/A

📄 9850 GENESEE AVE STE
770
LA JOLLA, CA 92037
Effective as of 01-AUG-24

PAREDEZ, EDWARD, MD†

Provider ID: N/A

📄 9850 GENESEE AVE STE
820
LA JOLLA, CA 92037
Teleservice
Effective as of 01-NOV-14

SHAH, SHAILJA, MD†

Provider ID: N/A

📄 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-21

SHAH, SHAILJA, MD†

Provider ID: N/A

📄 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-21

SYAL, GAURAV, MD

Provider ID: N/A

📄 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

SYAL, GAURAV, MD

Provider ID: N/A

📄 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

YOUSSEF, FADY, MD

Provider ID: N/A

📄 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

YOUSSEF, FADY, MD

Provider ID: N/A

📄 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

GENETICS MEDICAL

JONES, MARILYN, MD†

Provider ID: N/A

📄 9434 MEDICAL CENTER DR
FL 1
LA JOLLA, CA 92037
Effective as of 01-JUN-21

GYNECOLOGIC ONCOLOGY

ESKANDER, RAMEZ, MD†

Provider ID: N/A

📄 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-JUL-21

GYNECOLOGY

MARSHALL, CATHARINE, MD

Provider ID: N/A

📄 7301 GIRARD AVE STE 300
LA JOLLA, CA 92037
Effective as of 01-NOV-18

HEMATOLOGY / ONCOLOGY

BANERJEE, PUSHPENDU, MD†

Provider ID: N/A

📄 9850 GENESEE AVE STE
560
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JAN-21

BANERJEE, PUSHPENDU, MD†

Provider ID: N/A

📄 9850 GENESEE AVE STE
560
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JAN-21

C1. Lista de proveedores de la red Médico de atención especializada

CHEN, YU-WEI, MD

Provider ID: N/A

📄 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-23

CHEN, YU-WEI, MD

Provider ID: N/A

📄 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-DEC-23

SINCLAIR, JAMES, MD†

Provider ID: N/A

📄 9850 GENESEE AVE STE
560
LA JOLLA, CA 92037
Effective as of 01-JAN-21

SINCLAIR, JAMES, MD†

Provider ID: N/A

📄 9850 GENESEE AVE STE
560
LA JOLLA, CA 92037
Effective as of 01-JAN-21

SINCLAIR, JAMES, MD†

Provider ID: N/A

📄 9850 GENESEE AVE STE
560
LA JOLLA, CA 92037
Effective as of 01-JUN-18

SULLIVAN, JESSICA, DO

Provider ID: N/A

📄 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-SEP-23

VENKATESWARAN, APARAJIT, MD

Provider ID: N/A

📄 9850 GENESEE AVE STE
560

LA JOLLA, CA 92037*
Effective as of 01-OCT-24

WALLACH, SABINA, MD†

Provider ID: N/A

📄 9850 GENESEE AVE STE
400
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JAN-24

WALLACH, SABINA, MD†

Provider ID: N/A

📄 9850 GENESEE AVE STE
400
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JAN-21

HOSPICE AND PALLIATIVE MEDICINE

RUBENSIK, TAMARA, MD†

Provider ID: N/A

📄 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-FEB-21

HOSPITALIST MD/DO

BADALYAN, SEDA, MD†

Provider ID: N/A

📄 9888 GENESEE AVE
LA JOLLA, CA 92037*
Effective as of 01-AUG-21

COFFLER, ELIANE, MD

Provider ID: N/A

📄 9888 GENESEE AVE
LA JOLLA, CA 92037
Effective as of 01-MAR-23

DJEKIC, KRISTINA, DO†

Provider ID: N/A

📄 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-NOV-21

DOUGLAS, JASON, MD

Provider ID: N/A

📄 9888 GENESEE AVE
LA JOLLA, CA 92037*
Effective as of 01-JAN-23

FIRESTEIN, CATHERINE, MD†

Provider ID: N/A

📄 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JAN-21

HAMMOND, CHARLES, MD†

Provider ID: N/A

📄 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-APR-21

PAPP, STEPHAN, MD

Provider ID: N/A

📄 9888 GENESEE AVE
LA JOLLA, CA 92037*
Effective as of 01-NOV-22

SCHUETZ, HESTON, MD

Provider ID: N/A

📄 9888 GENESEE AVE
LA JOLLA, CA 92037*
Effective as of 01-APR-24

SHINDO, YURI, MD†

Provider ID: N/A

📄 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-21

TONG, ALEXANDER, MD

Provider ID: N/A

📄 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUL-23

C1. Lista de proveedores de la red Médico de atención especializada

WILLIAMS, BRANDON, MD†

Provider ID: N/A

9888 GENESEE AVE
LA JOLLA, CA 92037*
Effective as of 01-SEP-21

YANG, BENJAMIN, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

YASSIN, HAZEM, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-23

INFECTIOUS DISEASE

BARTHEL, ROBERT, MD†

Provider ID: N/A

9850 GENESEE AVE STE
900
LA JOLLA, CA 92037*
Effective as of 01-JAN-21

KUPPALLI, KRUTIKA, MD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-23

KUPPALLI, KRUTIKA, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-23

MILLER, H, MD

Provider ID: N/A

9834 GENESEE AVE STE
310
LA JOLLA, CA 92037*

Effective as of 01-FEB-21

RAMIREZSANCHEZ, CLAUDIA, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUL-23

TANG, MICHAEL, MD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

INTERNAL MEDICINE

BONAGIRI, PRANAY, DO

Provider ID: N/A

9850 GENESEE AVE
LA JOLLA, CA 92037
Effective as of 01-JUL-24

BORTZ, DAVID, MD†

Provider ID: N/A

9850 GENESEE AVE STE
570
LA JOLLA, CA 92037*
Teleservice
Effective as of 01-OCT-22

BRAZEL, DANIELLE, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JAN-24

CROWLEY, DOUGLAS, MD†

Provider ID: N/A

9850 GENESEE AVE STE
900
LA JOLLA, CA 92037*
Effective as of 01-JAN-21

DASHI, ARBEN, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

GADIYARAM, VARUNA, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

GAN, TERENCE, MD†

Provider ID: N/A

9850 GENESEE AVE STE
900
LA JOLLA, CA 92037*
Effective as of 01-JAN-21

JEBAIN, JEBAIN, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-24

KARNIK, KUSHAL, MD

Provider ID: N/A

9888 GENESEE AVE
LA JOLLA, CA 92037
Effective as of 01-JUN-24

KATSNELSON, MARCELLA, DO

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

LAM, PAMELA, DO†

Provider ID: N/A

9850 GENESEE AVE STE
900
LA JOLLA, CA 92037*
Effective as of 01-JAN-21

LAM, PAMELA, DO†

Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

9888 GENESEE AVE
LA JOLLA, CA 92037*
Effective as of 01-JAN-21

LEVIN, MARINA, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-24

LEWIS, GREG, MD†

Provider ID: N/A

9888 GENESEE AVE
LA JOLLA, CA 92037*
Effective as of 01-JAN-21

LEWIS, GREG, MD†

Provider ID: N/A

9850 GENESEE AVE STE
900
LA JOLLA, CA 92037*
Effective as of 01-JAN-21

LIU, ANDREW, MD

Provider ID: N/A

9834 GENESEE AVE STE
312
LA JOLLA, CA 92037
Effective as of 01-SEP-23

LIU, ANDREW, MD

Provider ID: N/A

4225 EXECUTIVE SQ STE
450
LA JOLLA, CA 92037
Effective as of 01-SEP-23

LUGO, GUSTAVO, MD†

Provider ID: N/A

9850 GENESEE AVE STE
900
LA JOLLA, CA 92037*
Effective as of 01-JAN-21

MARTINEZ, ARMANDO, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

MCCUTCHEON, CLAIRE, MD†

Provider ID: N/A

9888 GENESEE AVE
LA JOLLA, CA 92037*
Effective as of 01-DEC-22

MIRZA, BASHAR, MD

Provider ID: N/A

9888 GENESEE AVE
LA JOLLA, CA 92037*
Effective as of 01-MAR-24

MOOLANI, UJJALA, MD

Provider ID: N/A

4225 EXECUTIVE SQ STE
450
LA JOLLA, CA 92037
Effective as of 01-MAY-23

MOOLANI, UJJALA, MD

Provider ID: N/A

9834 GENESEE AVE STE
312
LA JOLLA, CA 92037
Effective as of 01-MAY-23

NOKES, BRANDON, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-21

RADWAN, MOHAMED, MD†

Provider ID: N/A

9850 GENESEE AVE STE
370
LA JOLLA, CA 92037
Effective as of 01-JAN-21

RAMOS, JEFFREY, MD†

Provider ID: N/A

9850 GENESEE AVE STE
900
LA JOLLA, CA 92037*
Effective as of 01-JAN-21

RAMOS, JEFFREY, MD†

Provider ID: N/A

9888 GENESEE AVE
LA JOLLA, CA 92037*
Effective as of 01-JAN-21

STEVENS, KENNETH, MD†

Provider ID: N/A

9850 GENESEE AVE STE
900
LA JOLLA, CA 92037*
Effective as of 01-JAN-21

STEVENS, KENNETH, MD†

Provider ID: N/A

9888 GENESEE AVE
LA JOLLA, CA 92037*
Effective as of 01-JAN-21

TOPPEN, WILLIAM, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

TOROSIAN, KARO, DO†

Provider ID: N/A

9834 GENESEE AVE STE
312
LA JOLLA, CA 92037
Effective as of 01-SEP-22

TRAN, PHI, DO†

Provider ID: N/A

9888 GENESEE AVE
LA JOLLA, CA 92037
Effective as of 01-JAN-21

TRAN, PHI, DO†

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

9850 GENESEE AVE STE
900

LA JOLLA, CA 92037*

Effective as of 01-JAN-21

TRIVEDI, NAYANA, MD†

Provider ID: N/A

9850 GENESEE AVE STE
900

LA JOLLA, CA 92037

Effective as of 01-JAN-21

TRIVEDI, MEHUL, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JAN-24

YANG, JENNY, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-AUG-21

INTERNAL MEDICINE

CRITICAL CARE MEDICINE

BOROK, ZEA, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-SEP-21

JAFFE, GILAD, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-SEP-23

JONES, DANIEL, MD†

Provider ID: N/A

9850 GENESEE AVE STE
780

LA JOLLA, CA 92037

Effective as of 01-JAN-21

SULLIVAN, LAUREN, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-SEP-23

INTERVENTIONAL CARDIOLOGY

AIZIN, VITALI, MD†

Provider ID: N/A

9834 GENESEE AVE STE 101
LA JOLLA, CA 92037

Effective as of 01-SEP-15

AL KHIAMI, BELAL, MD†

Provider ID: N/A

9434 MEDICAL CENTER DR
FL 1

LA JOLLA, CA 92037

Effective as of 01-JAN-21

CRUZ RODRIGUEZ, JOSE, MD

Provider ID: N/A

9434 MEDICAL CENTER DR
LA JOLLA, CA 92037

Effective as of 01-JUL-23

DAMANI, SAMIR, MD†

Provider ID: N/A

9850 GENESEE AVE STE
650

LA JOLLA, CA 92037

Effective as of 01-NOV-23

GOVEA, ALAYN, MD

Provider ID: N/A

9434 MEDICAL CENTER DR
LA JOLLA, CA 92037

Effective as of 01-JUL-23

RAPEPORT, KEVIN, MD†

Provider ID: N/A

9850 GENESEE AVE STE
940B

LA JOLLA, CA 92037

Effective as of 01-JAN-21

WHITWAM, WAYNE, MD†

Provider ID: N/A

9850 GENESEE AVE STE
780

LA JOLLA, CA 92037

Effective as of 01-NOV-20

LICENSED CLINICAL

SOCIAL WORKER

ELLEGE, LINDSAY, LCSW

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE 101

LA JOLLA, CA 92037

Effective as of 01-JUL-23

ESTEN, JOHN, LCSW

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

Effective as of 01-AUG-24

WISHNEK, HANNAH, LCSW†

Provider ID: N/A

8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037

Effective as of 01-AUG-22

MARRIAGE FAMILY THERAPIST

POZUN, CARA, MFT

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

Effective as of 01-DEC-23

**C1. Lista de proveedores de la red
Médico de atención especializada**

***MATERNAL AND FETAL
MEDICINE***

EMERUWA, UKACHI, MD

Provider ID: N/A

📄 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

MEDICAL ONCOLOGY

BANERJEE, PUSHPENDU, MD†

Provider ID: N/A

📄 9850 GENESEE AVE STE
560
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JUN-18

FLORES, EDNA, MD†

Provider ID: N/A

📄 9850 GENESEE AVE STE
560
LA JOLLA, CA 92037
Effective as of 01-JAN-21

FLORES, EDNA, MD†

Provider ID: N/A

📄 9850 GENESEE AVE STE
560
LA JOLLA, CA 92037
Effective as of 01-JUN-18

NEPHROLOGY

AL-DAHMAN, ZAID, MD

Provider ID: N/A

📄 4225 EXECUTIVE SQ STE
450
LA JOLLA, CA 92037
Effective as of 01-MAY-23

CRUZ WHITLEY, JESSICA, MD

Provider ID: N/A

📄 4225 EXECUTIVE SQ STE
450
LA JOLLA, CA 92037
Effective as of 01-MAY-23

DAVIS, JASON, MD

Provider ID: N/A

📄 4225 EXECUTIVE SQ STE
450
LA JOLLA, CA 92037
Effective as of 01-JUN-23

LAKHERA, YOGITA, MD†

Provider ID: N/A

📄 9834 GENESEE AVE STE
312
LA JOLLA, CA 92037
Teleservice
Effective as of 01-MAR-17

LAKHERA, YOGITA, MD†

Provider ID: N/A

📄 9834 GENESEE AVE STE
312
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JUL-22

LAKHERA, YOGITA, MD†

Provider ID: N/A

📄 9834 GENESEE AVE STE
312
LA JOLLA, CA 92037
Teleservice
Effective as of 01-MAR-22

LAKHERA, YOGITA, MD†

Provider ID: N/A

📄 9834 GENESEE AVE STE
312
LA JOLLA, CA 92037
Teleservice
Effective as of 01-AUG-24

LAKHERA, YOGITA, MD†

Provider ID: N/A

📄 9834 GENESEE AVE STE
312
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JAN-21

NAMAZY, DAVID, MD

Provider ID: N/A

📄 4225 EXECUTIVE SQ STE
450
LA JOLLA, CA 92037
Effective as of 01-JUN-23

STEER, DYLAN, MD†

Provider ID: N/A

📄 9834 GENESEE AVE STE
312
LA JOLLA, CA 92037
Effective as of 01-SEP-15

STEER, DYLAN, MD†

Provider ID: N/A

📄 9834 GENESEE AVE STE
312
LA JOLLA, CA 92037
Effective as of 01-JUL-22

STEER, DYLAN, MD†

Provider ID: N/A

📄 9834 GENESEE AVE STE
312
LA JOLLA, CA 92037
Effective as of 01-JAN-21

STEER, DYLAN, MD†

Provider ID: N/A

📄 9834 GENESEE AVE STE
312
LA JOLLA, CA 92037
Effective as of 01-FEB-05

STEER, DYLAN, MD†

Provider ID: N/A

📄 9834 GENESEE AVE STE

C1. Lista de proveedores de la red Médico de atención especializada

312
LA JOLLA, CA 92037
Effective as of 01-JAN-21

TOROSIAN, KARO, DO†

Provider ID: N/A
📍 9834 GENESEE AVE STE
312
LA JOLLA, CA 92037
Effective as of 01-JAN-21

TOROSIAN, KARO, DO†

Provider ID: N/A
📍 9834 GENESEE AVE STE
312
LA JOLLA, CA 92037
Effective as of 01-DEC-17

TOROSIAN, KARO, DO†

Provider ID: N/A
📍 9834 GENESEE AVE STE
312
LA JOLLA, CA 92037
Effective as of 01-JUL-22

TOROSIAN, KARO, DO†

Provider ID: N/A
📍 9834 GENESEE AVE STE
312
LA JOLLA, CA 92037
Effective as of 01-SEP-20

ZHONG, YAN, MD†

Provider ID: N/A
📍 4225 EXECUTIVE SQ STE
450
LA JOLLA, CA 92037
Effective as of 01-MAR-22

NEUROLOGY

ANSARI, HOSSEIN, MD†

Provider ID: N/A
📍 4180 LA JOLLA VILLAGE
DR STE 240

LA JOLLA, CA 92037
Effective as of 01-MAY-22

CHOUDRY, BILAL, MD†

Provider ID: N/A
📍 9850 GENESEE AVE STE
470
LA JOLLA, CA 92037
Effective as of 01-FEB-16

CHOUDRY, BILAL, MD†

Provider ID: N/A
📍 9850 GENESEE AVE STE
470
LA JOLLA, CA 92037
Effective as of 01-FEB-16

DROKER, BRIAN, MD

Provider ID: N/A
📍 9850 GENESEE AVE STE
530
LA JOLLA, CA 92037
Teleservice
Effective as of 01-APR-24

DROKER, BRIAN, MD

Provider ID: N/A
📍 9850 GENESEE AVE STE
530
LA JOLLA, CA 92037
Teleservice
Effective as of 01-SEP-24

FRISHBERG, BENJAMIN, MD†

Provider ID: N/A
📍 9850 GENESEE AVE STE
470
LA JOLLA, CA 92037
Effective as of 01-FEB-16

GUPTA, VISHAL, DO

Provider ID: N/A
📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-23

HAAS, RICHARD, MD†

Provider ID: N/A
📍 9350 CAMPUS POINT DR
STE LLB
LA JOLLA, CA 92037
Effective as of 01-OCT-21

HAMILTON, ROSS, MD

Provider ID: N/A
📍 9850 GENESEE AVE STE
530
LA JOLLA, CA 92037*
Effective as of 01-OCT-24

KARANJIA, NAVAZ, MD†

Provider ID: N/A
📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-FEB-22

KOCHARIAN, NAIRA, MD†

Provider ID: N/A
📍 9850 GENESEE AVE STE
340
LA JOLLA, CA 92037
Effective as of 01-JAN-21

LUHAR, RIYA, DO

Provider ID: N/A
📍 9850 GENESEE AVE STE
530
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JUN-24

LUHAR, RIYA, DO

Provider ID: N/A
📍 9850 GENESEE AVE STE
530
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JAN-23

NIELSEN, AMY, DO†

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

9850 GENESEE AVE STE
530
LA JOLLA, CA 92037

Teleservice

Effective as of 01-FEB-21

NIELSEN, AMY, DO†

Provider ID: N/A

9850 GENESEE AVE STE
530
LA JOLLA, CA 92037

Teleservice

Effective as of 01-FEB-21

NIELSEN, AMY, DO†

Provider ID: N/A

9850 GENESEE AVE STE
530
LA JOLLA, CA 92037

Teleservice

Effective as of 01-FEB-21

OH, IRENE, MD†

Provider ID: N/A

9850 GENESEE AVE STE
470
LA JOLLA, CA 92037

Effective as of 01-FEB-16

PADUGA, REMIA, MD†

Provider ID: N/A

9850 GENESEE AVE STE
530
LA JOLLA, CA 92037

Effective as of 01-MAR-21

QAYOUMI, WALI, MD†

Provider ID: N/A

9350 CAMPUS POINT DR
STE LLB
LA JOLLA, CA 92037

Effective as of 01-OCT-21

QAYOUMI, WALI, MD†

Provider ID: N/A

9500 GILMAN DR STE 2069
LA JOLLA, CA 92093
Effective as of 01-OCT-21

SADOFF, MARK, MD†

Provider ID: N/A

9850 GENESEE AVE STE
470
LA JOLLA, CA 92037

Effective as of 01-FEB-16

SADOFF, MARK, MD†

Provider ID: N/A

9850 GENESEE AVE STE
530
LA JOLLA, CA 92037

Effective as of 01-FEB-21

SCHIM, JACK, MD†

Provider ID: N/A

9850 GENESEE AVE STE
470
LA JOLLA, CA 92037

Effective as of 01-FEB-16

SCHULTE, JESSICA, MD†

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

Effective as of 01-SEP-21

WANG, CHUNYANG, MD†

Provider ID: N/A

9850 GENESEE AVE STE
530
LA JOLLA, CA 92037

Effective as of 01-SEP-22

WANG, CHUNYANG, MD†

Provider ID: N/A

9850 GENESEE AVE STE
470
LA JOLLA, CA 92037

Effective as of 01-FEB-16

WANG, ANCHI, MD†

Provider ID: N/A

9850 GENESEE AVE STE
470
LA JOLLA, CA 92037

Effective as of 01-FEB-16

WANG, CHUNYANG, MD†

Provider ID: N/A

9850 GENESEE AVE STE
470
LA JOLLA, CA 92037

Effective as of 01-FEB-16

WIEGAND, SARAH, DO†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-21

NUCLEAR MEDICINE

CHOI, ESTHER, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

GAMIE, SHERIEF, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-24

KIPPER, MICHAEL, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

SHARIF TABRIZI, AHMAD, MD

Provider ID: N/A

9300 CAMPUS POINT DR

C1. Lista de proveedores de la red Médico de atención especializada

LA JOLLA, CA 92037
Effective as of 01-JUL-23

OBSTETRICS / GYNECOLOGY

BINDER, PRATIBHA, MD†

Provider ID: N/A
8910 VILLA LA JOLLA DR
LA JOLLA, CA 92093
Effective as of 01-JUL-21

BONDRE, IOANA, MD†

Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-OCT-21

CARDENAS, MICHAEL, MD†

Provider ID: N/A
8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037
Effective as of 01-NOV-21

CARDENAS, MICHAEL, MD†

Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-NOV-21

DELCORE, LAURA, MD†

Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

DELCORE, LAURA, MD†

Provider ID: N/A
8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

DRIEBE, AMY, MD†

Provider ID: N/A
8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

DRIEBE, AMY, MD†

Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

HARVEY, SCOTT, MD†

Provider ID: N/A
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-21

HARVEY, SCOTT, MD†

Provider ID: N/A
9444 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-MAY-21

HILL, KAITLYN, MD

Provider ID: N/A
9850 GENESEE AVE STE
820
LA JOLLA, CA 92037
Effective as of 01-JAN-24

KURTULUS, MEL, MD

Provider ID: N/A
9850 GENESEE AVE STE
820
LA JOLLA, CA 92037
Effective as of 01-JAN-24

MACKAY, GILLIAN, MD

Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-23

MACKAY, GILLIAN, MD

Provider ID: N/A

8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037
Effective as of 01-DEC-23

MELLENDEZ, ARIANA, MD

Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

MEURICE, MARIELLE

ERENDIRA LUCILLE, MD†
Provider ID: N/A
8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037
Effective as of 01-SEP-21

PICKETT, CHARLOTTE, MD

Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUL-23

PICKETT, CHARLOTTE, MD

Provider ID: N/A
8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
Effective as of 01-JUL-23

SPRING-ROBINSON,

CHANDRA, DO†
Provider ID: N/A
9850 GENESEE AVE STE
770
LA JOLLA, CA 92037
Effective as of 01-JAN-23

SPRING-ROBINSON,

CHANDRA, DO†
Provider ID: N/A
9850 GENESEE AVE STE
770
LA JOLLA, CA 92037

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-JAN-21

THOMSON, SAMANTHA, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-OCT-21

THOMSON, SAMANTHA, MD†

Provider ID: N/A

8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037

Effective as of 01-OCT-21

OCCUPATIONAL THERAPIST

MUNCADA, CAESAR, OT†

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-APR-22

OPHTHALMOLOGY

ARNETT, JUSTIN, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-SEP-23

ARNETT, JUSTIN, MD

Provider ID: N/A

9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-SEP-23

ARNETT, JUSTIN, MD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-SEP-23

ARYA, MALVIKA, MD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-SEP-23

ARYA, MALVIKA, MD

Provider ID: N/A

9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-SEP-23

ARYA, MALVIKA, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-SEP-23

BINDER, NICHOLAS, MD†

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037

Effective as of 01-SEP-22

BINDER, NICHOLAS, MD†

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037

Effective as of 01-NOV-21

BINDER, NICHOLAS, MD†

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037

Effective as of 01-NOV-23

BINDER, NICHOLAS, MD†

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037

Effective as of 01-DEC-23

BOKOSKY, JOHN, MD

Provider ID: N/A

9834 GENESEE AVE STE
200
LA JOLLA, CA 92037

Effective as of 01-SEP-24

BOLO, KYLE, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-SEP-23

BOLO, KYLE, MD

Provider ID: N/A

9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-SEP-23

BOLO, KYLE, MD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-SEP-23

CHIU, STEPHAN, MD†

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037

Effective as of 01-MAY-22

CHIU, STEPHAN, MD†

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037

Effective as of 01-JUN-23

CHOPLIN, NEIL, MD†

Provider ID: N/A

9834 GENESEE AVE STE
428
LA JOLLA, CA 92037

Effective as of 01-JUL-21

C1. Lista de proveedores de la red Médico de atención especializada

CHOPLIN, NEIL, MD†

Provider ID: N/A

9834 GENESEE AVE STE
428

LA JOLLA, CA 92037

Effective as of 01-AUG-23

CULOTTA, ANTHONY, MD

Provider ID: N/A

9850 GENESEE AVE STE
310

LA JOLLA, CA 92037

Effective as of 01-SEP-24

CULOTTA, ANTHONY, MD

Provider ID: N/A

9850 GENESEE AVE STE
310

LA JOLLA, CA 92037

Effective as of 01-FEB-24

ESLANI, MEDI, MD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-SEP-23

ESLANI, MEDI, MD

Provider ID: N/A

9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-SEP-23

ESLANI, MEDI, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-SEP-23

FISH, STEVEN, MD†

Provider ID: N/A

9850 GENESEE AVE STE
310

LA JOLLA, CA 92037

Effective as of 01-NOV-22

FISH, STEVEN, MD†

Provider ID: N/A

9850 GENESEE AVE STE
310

LA JOLLA, CA 92037

Effective as of 01-APR-23

FISH, STEVEN, MD†

Provider ID: N/A

9850 GENESEE AVE STE
310

LA JOLLA, CA 92037

Effective as of 01-APR-23

FISH, STEVEN, MD†

Provider ID: N/A

9850 GENESEE AVE STE
310

LA JOLLA, CA 92037

Effective as of 01-APR-23

GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A

9850 GENESEE AVE STE
310

LA JOLLA, CA 92037

Effective as of 01-JAN-21

GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A

9850 GENESEE AVE STE
310

LA JOLLA, CA 92037

Effective as of 01-SEP-22

HENNEIN, LAUREN, MD

Provider ID: N/A

9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-SEP-23

HUANG, ALEX, MD†

Provider ID: N/A

9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-DEC-21

HUDSON, HENRY, MD†

Provider ID: N/A

9850 GENESEE AVE STE
310

LA JOLLA, CA 92037

Effective as of 01-APR-22

HUDSON, HENRY, MD†

Provider ID: N/A

9850 GENESEE AVE STE
310

LA JOLLA, CA 92037

Effective as of 01-APR-23

HUDSON, HENRY, MD†

Provider ID: N/A

9850 GENESEE AVE STE
310

LA JOLLA, CA 92037

Effective as of 01-MAY-21

HUDSON, HENRY, MD†

Provider ID: N/A

9850 GENESEE AVE STE
310

LA JOLLA, CA 92037

Effective as of 01-SEP-22

LANG, PAUL, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-SEP-23

LANG, PAUL, MD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-SEP-23

LANG, PAUL, MD

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-SEP-23

MCGRAW, JOSEPH, MD†

Provider ID: N/A

9834 GENESEE AVE STE
428
LA JOLLA, CA 92037
Effective as of 01-NOV-21

MCGRAW, JOSEPH, MD†

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-SEP-22

MIDTLING, STEPHANIE, MD

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-JUL-24

MORRISON-REYES, JOSHUA, MD

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-FEB-24

MORTON, ASA, MD

Provider ID: N/A

9834 GENESEE AVE STE
428
LA JOLLA, CA 92037
Effective as of 01-AUG-23

MORTON, ASA, MD

Provider ID: N/A

9834 GENESEE AVE STE
428

LA JOLLA, CA 92037
Effective as of 01-JUL-23

PERRY, ARTHUR, MD

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-JAN-21

PERRY, ARTHUR, MD

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-FEB-07

PERRY, ARTHUR, MD

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-JAN-21

PERRY, ARTHUR, MD

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-OCT-95

PRATT, STEVEN, MD†

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-JAN-21

PRATT, STEVEN, MD†

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-JAN-21

PRATT, STEVEN, MD†

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-OCT-12

PUIG LLANO, MANUEL, MD

Provider ID: N/A

9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-JUL-23

ROESKE, RICHMOND, MD

Provider ID: N/A

9834 GENESEE AVE STE
200
LA JOLLA, CA 92037
Effective as of 01-MAR-24

SAMUEL, MICHAEL, MD†

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-SEP-22

SATTERFIELD, KELLIE, MD

Provider ID: N/A

9834 GENESEE AVE STE
200
LA JOLLA, CA 92037
Effective as of 01-MAR-24

SATTERFIELD, KELLIE, MD

Provider ID: N/A

9834 GENESEE AVE STE
200
LA JOLLA, CA 92037
Effective as of 01-DEC-23

SCHONBACH, ETIENNE, MD†

Provider ID: N/A

9415 CAMPUS POINT DR
LA JOLLA, CA 92093

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-SEP-21

SHEILS, CATHERINE, MD

Provider ID: N/A

📍 9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-JUN-23

SHEILS, CATHERINE, MD

Provider ID: N/A

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JUN-23

SHEILS, CATHERINE, MD

Provider ID: N/A

📍 9834 GENESEE AVE STE
200
LA JOLLA, CA 92037

Effective as of 01-JAN-24

SHOJI, MARISSA, MD

Provider ID: N/A

📍 9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-SEP-23

SHOJI, MARISSA, MD

Provider ID: N/A

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-SEP-23

SHOJI, MARISSA, MD

Provider ID: N/A

📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-SEP-23

SONG, DELU, MD†

Provider ID: N/A

📍 9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-SEP-21

SUK, KEVIN, MD

Provider ID: N/A

📍 9850 GENESEE AVE STE
310
LA JOLLA, CA 92037

Effective as of 01-FEB-24

TOPILOW, NICOLE, MD†

Provider ID: N/A

📍 9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-SEP-21

WESTEREN, ALAN, MD

Provider ID: N/A

📍 6529 LA JOLLA BLVD
LA JOLLA, CA 92037

Effective as of 01-JAN-23

ZHAO, TAILUN, MD

Provider ID: N/A

📍 9850 GENESEE AVE STE
310
LA JOLLA, CA 92037

Effective as of 01-JUL-23

ZHAO, TAILUN, MD

Provider ID: N/A

📍 9850 GENESEE AVE STE
310
LA JOLLA, CA 92037

Effective as of 01-JAN-24

ZHAO, TAILUN, MD

Provider ID: N/A

📍 9850 GENESEE AVE STE
310
LA JOLLA, CA 92037

Effective as of 01-SEP-24

ZHAO, TAILUN, MD

Provider ID: N/A

📍 9850 GENESEE AVE STE
310
LA JOLLA, CA 92037

Effective as of 01-NOV-23

OPTOMETRIST

HOO, PAMELA, OD†

Provider ID: N/A

📍 9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-SEP-22

JOMOC, CAITLIN, OD

Provider ID: N/A

📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JUL-23

JOMOC, CAITLIN, OD

Provider ID: N/A

📍 9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-JUL-23

JULAZADEH, SARA, OD

Provider ID: N/A

📍 9834 GENESEE AVE STE
200
LA JOLLA, CA 92037

Effective as of 01-SEP-24

JULAZADEH, SARA, OD

Provider ID: N/A

📍 9834 GENESEE AVE STE
428
LA JOLLA, CA 92037

Effective as of 01-SEP-23

KHIEU, TINA, OD

Provider ID: N/A

📍 9850 GENESEE AVE STE
310
LA JOLLA, CA 92037

Effective as of 01-NOV-23

KHIEU, TINA, OD

Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-DEC-23

KHIEU, TINA, OD

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-MAR-24

KIM, PHILIP, OD†

Provider ID: N/A

9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAR-22

MARR, RYAN, OD

Provider ID: N/A

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
Effective as of 01-JUL-24

MCCLEAN, ESMERALDA, OD†

Provider ID: N/A

9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-SEP-22

TAUNTON, PHILIP, OD†

Provider ID: N/A

9834 GENESEE AVE STE
428
LA JOLLA, CA 92037
Effective as of 01-SEP-21

TAUNTON, PHILIP, OD†

Provider ID: N/A

9834 GENESEE AVE STE
428
LA JOLLA, CA 92037
Effective as of 01-SEP-23

YU, CAROL, OD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

YU, CAROL, OD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

OTOLARYNGOLOGY

BAREISS, ANNA, MD

Provider ID: N/A

4150 REGENTS PARK ROW
STE 345
LA JOLLA, CA 92037

Teleservice

Effective as of 01-MAY-23

BAREISS, ANNA, MD

Provider ID: N/A

4150 REGENTS PARK ROW
STE 345
LA JOLLA, CA 92037

Teleservice

Effective as of 01-DEC-23

BRUMUND, KEVIN, MD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

BRUMUND, KEVIN, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

BRUMUND, KEVIN, MD

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

CALIFANO, JOSEPH, MD

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

CALIFANO, JOSEPH, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

CALIFANO, JOSEPH, MD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

CALIFANO, JOSEPH, MD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

CHANG, ANGELA, MD†

Provider ID: N/A

9834 GENESEE AVE STE 112
LA JOLLA, CA 92037
Effective as of 01-JAN-21

CHANG, ANGELA, MD†

Provider ID: N/A

9834 GENESEE AVE STE 112
LA JOLLA, CA 92037
Effective as of 01-JAN-23

CHANG, ANGELA, MD†

Provider ID: N/A

9834 GENESEE AVE STE 112

C1. Lista de proveedores de la red Médico de atención especializada

LA JOLLA, CA 92037
Effective as of 01-JUL-20

CHANG, ANGELA, MD†

Provider ID: N/A

9384 GENESEE AVE STE 112
LA JOLLA, CA 92037
Effective as of 01-OCT-21

COFFEY, CHARLES, MD

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

COFFEY, CHARLES, MD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

COFFEY, CHARLES, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

COFFEY, CHARLES, MD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

DECONDE, ADAM, MD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

DECONDE, ADAM, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

DECONDE, ADAM, MD†

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

DECONDE, ADAM, MD†

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

FRIEDMAN, RICK, MD

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

FRIEDMAN, RICK, MD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

FRIEDMAN, RICK, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

FRIEDMAN, RICK, MD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

GILANI, SAPIDEH, MD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

GILANI, SAPIDEH, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

GILANI, SAPIDEH, MD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

GILANI, SAPIDEH, MD

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

GREENE, JACQUELINE, MD

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

GREENE, JACQUELINE, MD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

GREENE, JACQUELINE, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
STE LLA
LA JOLLA, CA 92037
Effective as of 01-MAY-23

GREENE, JACQUELINE, MD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

C1. Lista de proveedores de la red Médico de atención especializada

GUO, THERESA, MD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

GUO, THERESA, MD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

GUO, THERESA, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

GUO, THERESA, MD†

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

HARRIS, JEFFREY, MD

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

HARRIS, JEFFREY, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

HARRIS, JEFFREY, MD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

HARRIS, JEFFREY, MD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

HOM, DAVID, MD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

HOM, DAVID, MD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

HOM, DAVID, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

HOM, DAVID, MD

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

HUGHES, CHARLOTTE, MD

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

HUGHES, CHARLOTTE, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

HUGHES, CHARLOTTE, MD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

HUGHES, CHARLOTTE, MD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

HUSSEMAN, JACOB, MD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-23

JANSEN, CORNELIUS, MD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

JANSEN, CORNELIUS, MD†

Provider ID: N/A

9350 CAMPUS POINT DR
STE LLA
LA JOLLA, CA 92037
Effective as of 01-MAY-23

JANSEN, CORNELIUS, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

JANSEN, CORNELIUS, MD

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

KARI, ELINA, MD

Provider ID: N/A

3855 HEALTH SCIENCES

C1. Lista de proveedores de la red Médico de atención especializada

DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

KARI, ELINA, MD

Provider ID: N/A
📄 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

KARI, ELINA, MD†

Provider ID: N/A
📄 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

KARI, ELINA, MD

Provider ID: N/A
📄 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

MAGIT, ANTHONY, MD

Provider ID: N/A
📄 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

MAGIT, ANTHONY, MD

Provider ID: N/A
📄 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

MAGIT, ANTHONY, MD

Provider ID: N/A
📄 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

MAGIT, ANTHONY, MD

Provider ID: N/A
📄 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

Effective as of 01-MAY-23

MATSUOKA, AKIHIRO, MD

Provider ID: N/A
📄 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

MATSUOKA, AKIHIRO, MD

Provider ID: N/A
📄 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

MATSUOKA, AKIHIRO, MD

Provider ID: N/A
📄 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

MATSUOKA, AKIHIRO, MD

Provider ID: N/A
📄 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

NGUYEN, QUYEN, MD

Provider ID: N/A
📄 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

NGUYEN, QUYEN, MD†

Provider ID: N/A
📄 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

NGUYEN, QUYEN, MD

Provider ID: N/A
📄 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

NGUYEN, QUYEN, MD

Provider ID: N/A
📄 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

REUTHER, MARSHA, MD†

Provider ID: N/A
📄 4150 REGENTS PARK ROW
STE 345
LA JOLLA, CA 92037
Effective as of 01-AUG-23

REUTHER, MARSHA, MD†

Provider ID: N/A
📄 4150 REGENTS PARK ROW
STE 345
LA JOLLA, CA 92037
Effective as of 01-JAN-21

SCHALCH LEPE, PAUL, MD

Provider ID: N/A
📄 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

SCHALCH LEPE, PAUL, MD

Provider ID: N/A
📄 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

SCHALCH LEPE, PAUL, MD

Provider ID: N/A
📄 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

SCHALCH LEPE, PAUL, MD†

Provider ID: N/A
📄 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

C1. Lista de proveedores de la red Médico de atención especializada

**VAHABZADEH-HAGH,
ANDREW, MD**

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

**VAHABZADEH-HAGH,
ANDREW, MD**

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

**VAHABZADEH-HAGH,
ANDREW, MD†**

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

**VAHABZADEH-HAGH,
ANDREW, MD**

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

WATSON, DEBORAH, MD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

WATSON, DEBORAH, MD

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

WATSON, DEBORAH, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

WATSON, DEBORAH, MD†

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

WEISSBROD, PHILIP, MD†

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

WEISSBROD, PHILIP, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

WEISSBROD, PHILIP, MD†

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

WEISSBROD, PHILIP, MD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

WOO, LINDA, MD†

Provider ID: N/A

9834 GENESEE AVE STE 101
LA JOLLA, CA 92037
Effective as of 01-JUL-22

WOO, LINDA, MD†

Provider ID: N/A

9834 GENESEE AVE STE 101
LA JOLLA, CA 92037

Effective as of 01-JAN-21

YAN, CAROL, MD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

YAN, CAROL, MD†

Provider ID: N/A

9350 CAMPUS POINT DR
STE LLA
LA JOLLA, CA 92037
Effective as of 01-MAY-23

YAN, CAROL, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

YAN, CAROL, MD

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

PATHOLOGY ANATOMIC CLINICAL

LIN, GRACE, MD†

Provider ID: N/A

9444 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-FEB-22

PEDIATRIC PULMONOLOGY

ANBAR, RAN, MD

Provider ID: N/A

3252 HOLIDAY CT STE 113
LA JOLLA, CA 92037

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-NOV-18

PEDIATRIC RADIOLOGY

DWEK, JERRY, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JAN-22

EVORA, DARRYL, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JAN-22

KONING, JEFFREY, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JAN-22

PUGMIRE, BRIAN, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-OCT-21

PEDIATRICS

GROBMAN, LILLIAN, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-DEC-21

KOOROS, KOOROSH, MD†

Provider ID: N/A

4150 REGENTS PARK ROW
STE 345
LA JOLLA, CA 92037

Effective as of 01-FEB-22

PHYSICAL MEDICINE / REHABILITATION

MADHAV, SANDIP, MD†

Provider ID: N/A

9850 GENESEE AVE STE
530

LA JOLLA, CA 92037

Teleservice

Effective as of 01-JAN-24

PHYSICIANS ASSISTANT

ABDELWAHHAB, EANAS, PA

Provider ID: N/A

9850 GENESEE AVE STE
320

LA JOLLA, CA 92037

Effective as of 01-JUN-23

ABRAHAMSEN, KELSEY, PA

Provider ID: N/A

9850 GENESEE AVE STE
320

LA JOLLA, CA 92037

Effective as of 01-JAN-21

AHN, JORDAN, PA

Provider ID: N/A

7855 IVANHOE AVE STE 110
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JUN-24

ALBRIGHT, KELSEY, PA†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-SEP-21

ALLERS, JENNA, PA

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-AUG-23

ARMEEN, GARY, PA†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-DEC-23

BAKER, LINDZEE, PA

Provider ID: N/A

9850 GENESEE AVE STE
320

LA JOLLA, CA 92037

Teleservice

Effective as of 01-NOV-22

BECKER, JANTIMA, PA

Provider ID: N/A

9850 GENESEE AVE STE
320

LA JOLLA, CA 92037

Effective as of 01-DEC-21

CANDARE, VANESSA, PA

Provider ID: N/A

9850 GENESEE AVE STE
320

LA JOLLA, CA 92037

Effective as of 01-FEB-21

CASO, STEPHEN, PA

Provider ID: N/A

9850 GENESEE AVE STE
320

LA JOLLA, CA 92037

Effective as of 01-JAN-21

DOUGHERTY, CLARA, PA†

Provider ID: N/A

9850 GENESEE AVE STE
400

LA JOLLA, CA 92037

Effective as of 01-JAN-21

FELLION, LAUREN, PA

Provider ID: N/A

9850 GENESEE AVE STE
320

C1. Lista de proveedores de la red Médico de atención especializada

LA JOLLA, CA 92037
Teleservice
Effective as of 01-MAY-23

FLORENCE, BRYNA, PA†

Provider ID: N/A
📄 9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Teleservice
Effective as of 01-AUG-21

FREY, LAUREN, PA

Provider ID: N/A
📄 9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Teleservice
Effective as of 01-OCT-22

HANSEN, CHRISTINA, PA

Provider ID: N/A
📄 9850 GENESEE AVE STE
210
LA JOLLA, CA 92037
Teleservice
Effective as of 01-OCT-23

HIGGINS, JOSHUA, PA†

Provider ID: N/A
📄 9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-JAN-22

HIGGINS, JOSHUA, PA†

Provider ID: N/A
📄 8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037
Effective as of 01-JAN-22

HUNTER, JACOB, PA†

Provider ID: N/A
📄 8910 VILLA LA JOLLA DR

STE 100
LA JOLLA, CA 92037
Effective as of 01-MAY-21

HUNTER, JACOB, PA†

Provider ID: N/A
📄 9350 CAMPUS POINT DR
STE LLA
LA JOLLA, CA 92037
Effective as of 01-FEB-22

HUNTER, JACOB, PA

Provider ID: N/A
📄 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

HUNTER, JACOB, PA

Provider ID: N/A
📄 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

HUNTER, JACOB, PA

Provider ID: N/A
📄 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

KARPEN, SARAH, PA

Provider ID: N/A
📄 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-SEP-24

KARPEN, SARAH, PA

Provider ID: N/A
📄 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-24

LEE, JENNIFER, PA

Provider ID: N/A
📄 9300 CAMPUS POINT DR

LA JOLLA, CA 92037
Effective as of 01-SEP-24

LEE, JENNIFER, PA

Provider ID: N/A
📄 9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-SEP-24

LIU, SHARON, PA

Provider ID: N/A
📄 9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JUN-24

MALLES, CHRISTINA, PA

Provider ID: N/A
📄 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-24

MARTIN, HALEY, PA

Provider ID: N/A
📄 9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-MAR-24

MARTIN, HALEY, PA

Provider ID: N/A
📄 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAR-24

MARTIN, HALEY, PA

Provider ID: N/A
📄 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAR-24

MATTIOLI, TAYLOR, PA

Provider ID: N/A
📄 9850 GENESEE AVE STE

C1. Lista de proveedores de la red Médico de atención especializada

320
LA JOLLA, CA 92037
Teleservice
Effective as of 01-AUG-22

MEGALI, NICOLE, PA

Provider ID: N/A
9850 GENESEE AVE STE
530
LA JOLLA, CA 92037
Teleservice
Effective as of 01-APR-24

MOREO, HUNTER, PA

Provider ID: N/A
9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JUL-24

OKADA, MICHELLE, PA†

Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-APR-21

OKADA, MICHELLE, PA†

Provider ID: N/A
3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-APR-21

PAAMONI, ARIELLE, PA

Provider ID: N/A
9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Teleservice
Effective as of 01-AUG-22

PELIO, DARREN, PA†

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-SEP-22

PELIO, DARREN, PA†

Provider ID: N/A
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-SEP-22

PERREAULT, MARK, PA†

Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-21

PERREAULT, MARK, PA†

Provider ID: N/A
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-AUG-21

RAHIM, ARIANNA, PA

Provider ID: N/A
9850 GENESEE AVE STE
530
LA JOLLA, CA 92037
Effective as of 01-OCT-23

ROMO, JORGE, PA

Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-24

SAIKHON, TALIA, PA†

Provider ID: N/A
8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037
Effective as of 01-SEP-22

SAINT, MEAGHAN, PA

Provider ID: N/A

9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Effective as of 01-DEC-21

SAUNDERS, SARA, PA†

Provider ID: N/A
9898 GENESEE AVE FL 4
LA JOLLA, CA 92037
Effective as of 01-MAY-16

SHARAF, KAREEM, PA†

Provider ID: N/A
9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-DEC-21

SHARAF, KAREEM, PA†

Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-21

SHARAF, KAREEM, PA†

Provider ID: N/A
3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-DEC-21

SNOWDEN, KELLY, PA

Provider ID: N/A
7855 IVANHOE AVE STE 110
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JAN-21


SPEH, BRIAN, PA

Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAR-24

SZABO, HAYLIE, PA

Provider ID: N/A

**C1. Lista de proveedores de la red
Médico de atención especializada**

 9850 GENESEE AVE STE
210
LA JOLLA, CA 92037

Teleservice

Effective as of 01-OCT-22

WAHLIN, TAMARA, PA

Provider ID: N/A

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-JUN-23

WAHLIN, TAMARA, PA

Provider ID: N/A

 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

Effective as of 01-JUN-23

WAHLIN, TAMARA, PA

Provider ID: N/A

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JUN-23

WEIR, JACQUELINE, PA†

Provider ID: N/A

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-APR-21

WRITER, NICOLE, PA

Provider ID: N/A


 9850 GENESEE AVE STE
320
LA JOLLA, CA 92037*

Effective as of 01-FEB-21

PODIATRIST

BERENTER, JAY, DPM†

Provider ID: N/A

 9850 GENESEE AVE STE
510
LA JOLLA, CA 92037

Effective as of 01-JAN-21

BERENTER, JAY, DPM†

Provider ID: N/A

 9850 GENESEE AVE STE
510
LA JOLLA, CA 92037

Effective as of 01-OCT-19

BERGER, COLBY, DPM

Provider ID: N/A

 9850 GENESEE AVE STE
510
LA JOLLA, CA 92037

Effective as of 01-APR-23

BERGER, COLBY, DPM

Provider ID: N/A

 9850 GENESEE AVE STE
510
LA JOLLA, CA 92037

Effective as of 01-JUN-23

KREPS, CHRISTOPHER, DPM†


Provider ID: N/A

 9850 GENESEE AVE STE
510
LA JOLLA, CA 92037

Effective as of 01-MAR-22

KREPS, CHRISTOPHER, DPM†

Provider ID: N/A


 9850 GENESEE AVE STE
510
LA JOLLA, CA 92037

Effective as of 01-SEP-21

**PREVENTATIVE MEDICINE
GENERAL**

STERN, ANNA, MD

Provider ID: N/A

 9850 GENESEE AVE STE
320
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JAN-21

PSYCHIATRY

BRAR, SIMERJEET, MD†

Provider ID: N/A

 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Effective as of 01-AUG-21

BRAR, SIMERJEET, MD†

Provider ID: N/A

 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Effective as of 01-AUG-21

FINN, DAPHNA, MD†

Provider ID: N/A

 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Effective as of 01-SEP-21

FINN, DAPHNA, MD†

Provider ID: N/A

 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Effective as of 01-SEP-21

JOSHI, YASH, MD

Provider ID: N/A

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JAN-24

JOSHI, YASH, MD

Provider ID: N/A

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JAN-24

C1. Lista de proveedores de la red Médico de atención especializada

KARANJIA, NAVAZ, MD†

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-FEB-22

KARANJIA, NAVAZ, MD†

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-FEB-22

KARIPPOT, ANOOP, MD†

Provider ID: N/A

9850 GENESEE AVE STE
710
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JUN-22

KARIPPOT, ANOOP, MD†

Provider ID: N/A

9850 GENESEE AVE STE
710
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JUN-22

LEDBETTER, ALEX, DO

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
Effective as of 01-JAN-24

LEDBETTER, ALEX, DO

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
Effective as of 01-JAN-24

LI, XIA, MD†

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
Effective as of 01-AUG-21

LI, XIA, MD†

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
Effective as of 01-AUG-21

LIU, FRED, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-NOV-21

LIU, FRED, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-NOV-21

MOORE, SHAVON, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-NOV-21

MOORE, SHAVON, MD†

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
Effective as of 01-NOV-21

MOORE, SHAVON, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-NOV-21

MOORE, SHAVON, MD†

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
Effective as of 01-NOV-21

NICHOLS, ALPHONSO, MD

Provider ID: N/A

9850 GENESEE AVE STE
710
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JUL-22

NICHOLS, ALPHONSO, MD

Provider ID: N/A

9850 GENESEE AVE STE
710
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JUL-22

QAYOUMI, WALI, MD†

Provider ID: N/A

9350 CAMPUS POINT DR
STE LLB
LA JOLLA, CA 92037
Effective as of 01-OCT-21

QAYOUMI, WALI, MD†

Provider ID: N/A

9500 GILMAN DR STE 2069
LA JOLLA, CA 92093
Effective as of 01-OCT-21

QAYOUMI, WALI, MD†

Provider ID: N/A

9350 CAMPUS POINT DR
STE LLB
LA JOLLA, CA 92037
Effective as of 01-OCT-21

QAYOUMI, WALI, MD†

Provider ID: N/A

9500 GILMAN DR STE 2069
LA JOLLA, CA 92093

**C1. Lista de proveedores de la red
Médico de atención especializada**

Effective as of 01-OCT-21

**REGO KEARNEY, JENNIFER,
MD†**

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C217
LA JOLLA, CA 92037

Effective as of 01-OCT-23

**REGO KEARNEY, JENNIFER,
MD†**

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C217
LA JOLLA, CA 92037

Effective as of 01-OCT-23

**REGO KEARNEY, JENNIFER,
MD†**

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C217
LA JOLLA, CA 92037

Effective as of 01-OCT-23

**REGO KEARNEY, JENNIFER,
MD†**

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C217
LA JOLLA, CA 92037

Effective as of 01-OCT-23

**SCHNEEBERGER, ANDRES,
MD†**

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Effective as of 01-AUG-22

**SCHNEEBERGER, ANDRES,
MD†**

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Effective as of 01-AUG-22

TARVER, LESLIE, MD†

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Effective as of 01-AUG-22

TARVER, LESLIE, MD†

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Effective as of 01-AUG-22

PSYCHIATRY CHILD

KARIPPOT, ANOOP, MD†

Provider ID: N/A

9850 GENESEE AVE STE
710
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JAN-23

KARIPPOT, ANOOP, MD†

Provider ID: N/A

9850 GENESEE AVE STE
710
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JUN-22

KARIPPOT, ANOOP, MD†

Provider ID: N/A

9834 GENESEE AVE STE
400
LA JOLLA, CA 92037

Effective as of 01-JUL-21

KARIPPOT, ANOOP, MD†

Provider ID: N/A

9834 GENESEE AVE STE
400
LA JOLLA, CA 92037

Effective as of 01-JUL-21

KARIPPOT, ANOOP, MD†

Provider ID: N/A

9834 GENESEE AVE STE
400
LA JOLLA, CA 92037

Effective as of 01-JUL-21

KARIPPOT, ANOOP, MD†

Provider ID: N/A

9834 GENESEE AVE STE
400
LA JOLLA, CA 92037

Effective as of 01-JUL-21

KARIPPOT, ANOOP, MD†

Provider ID: N/A

9850 GENESEE AVE STE
710
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JUN-22

KARIPPOT, ANOOP, MD†

Provider ID: N/A

9850 GENESEE AVE STE
710
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JAN-23

NICHOLS, ALPHONSO, MD

Provider ID: N/A

9850 GENESEE AVE STE
710
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JUL-22

C1. Lista de proveedores de la red Médico de atención especializada

NICHOLS, ALPHONSO, MD

Provider ID: N/A

☒ 9850 GENESEE AVE STE
710
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JUL-22

REGO KEARNEY, JENNIFER, MD†

Provider ID: N/A

☒ 8950 VILLA LA JOLLA DR
STE C217
LA JOLLA, CA 92037

Effective as of 01-OCT-23

REGO KEARNEY, JENNIFER, MD†

Provider ID: N/A

☒ 8950 VILLA LA JOLLA DR
STE C217
LA JOLLA, CA 92037

Effective as of 01-OCT-23

REGO KEARNEY, JENNIFER, MD†

Provider ID: N/A

☒ 8950 VILLA LA JOLLA DR
STE C217
LA JOLLA, CA 92037

Effective as of 01-OCT-23

REGO KEARNEY, JENNIFER, MD†

Provider ID: N/A

☒ 8950 VILLA LA JOLLA DR
STE C217
LA JOLLA, CA 92037

Effective as of 01-OCT-23

PSYCHIATRY SLEEP MEDICINE

KARIPPOT, ANOOP, MD†

Provider ID: N/A

☒ 9850 GENESEE AVE STE
710
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JAN-23

PSYCHOLOGIST

BAILIS, JESSICA, PSYD

Provider ID: N/A

☒ 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Effective as of 01-JUN-23

BAILIS, JESSICA, PSYD

Provider ID: N/A

☒ 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Effective as of 01-JUN-23

BOUTELLE, KERRI, PhD

Provider ID: N/A

☒ 3344 N TORREY PINES CT
LA JOLLA, CA 92037

Effective as of 01-DEC-23

BOUTELLE, KERRI, PhD

Provider ID: N/A

☒ 3344 N TORREY PINES CT
LA JOLLA, CA 92037

Effective as of 01-DEC-23

CRANDAL, BRENT, PhD†

Provider ID: N/A

☒ 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Effective as of 01-AUG-22

CRANDAL, BRENT, PhD†

Provider ID: N/A

☒ 8950 VILLA LA JOLLA DR

STE C101

LA JOLLA, CA 92037

Effective as of 01-AUG-22

CUSACK, ANNE, PSYD

Provider ID: N/A

☒ 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Effective as of 01-DEC-23

CUSACK, ANNE, PSYD

Provider ID: N/A

☒ 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Effective as of 01-DEC-23

EICHEN, DAWN, PhD

Provider ID: N/A

☒ 3344 N TORREY PINES CT
LA JOLLA, CA 92037

Effective as of 01-DEC-23

EICHEN, DAWN, PhD

Provider ID: N/A

☒ 3344 N TORREY PINES CT
LA JOLLA, CA 92037

Effective as of 01-DEC-23

KAUP, ALLISON, PhD†

Provider ID: N/A

☒ 9850 GENESEE AVE STE
530
LA JOLLA, CA 92037

Teleservice

Effective as of 01-NOV-23

KAUP, ALLISON, PhD†

Provider ID: N/A

☒ 9850 GENESEE AVE STE
530
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JAN-24

CI. Lista de proveedores de la red Médico de atención especializada

KAUP, ALLISON, PhD†

Provider ID: N/A

9850 GENESEE AVE STE
530
LA JOLLA, CA 92037

Teleservice

Effective as of 01-NOV-23

KAUP, ALLISON, PhD†

Provider ID: N/A

9850 GENESEE AVE STE
530
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JAN-24

MINASSIAN, ARPI, PhD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-NOV-21

MINASSIAN, ARPI, PhD†

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-NOV-21

MINASSIAN, ARPI, PhD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-NOV-21

MINASSIAN, ARPI, PhD†

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-NOV-21

PARK, JESSIE, PSYD†

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

Effective as of 01-DEC-21

PARK, JESSIE, PSYD†

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

Effective as of 01-DEC-21

PELHAM, WILLIAM, PSYD

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

Effective as of 01-JUL-24

PELHAM, WILLIAM, PSYD

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

Effective as of 01-JUL-24

REED, KRISTIE, PhD†

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C212

LA JOLLA, CA 92037

Effective as of 01-AUG-22

REED, KRISTIE, PhD

Provider ID: N/A

3344 N TORREY PINES CT
LA JOLLA, CA 92037

Effective as of 01-DEC-23

REED, KRISTIE, PhD†

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C212

LA JOLLA, CA 92037

Effective as of 01-AUG-22

REED, KRISTIE, PhD

Provider ID: N/A

3344 N TORREY PINES CT
LA JOLLA, CA 92037

Effective as of 01-DEC-23

TARLE, STEPHANIE, PhD

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

Effective as of 01-DEC-23

TARLE, STEPHANIE, PhD

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

Effective as of 01-DEC-23

THOMAS, KELSEY, PSYD

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE 101

LA JOLLA, CA 92037

Effective as of 01-SEP-24

THOMAS, KELSEY, PSYD

Provider ID: N/A

8950 VILLA LA JOLLA DR
STE 101

LA JOLLA, CA 92037

Effective as of 01-SEP-24

PUBLIC HEALTH

PREVENTATIVE MEDICINE

PERLMAN, MONICA, MD

Provider ID: N/A

9850 GENESEE AVE STE
320

LA JOLLA, CA 92037

Effective as of 01-NOV-20

PULMONARY DISEASES

C1. Lista de proveedores de la red Médico de atención especializada

BAILEY, JACOB, MD

Provider ID: N/A

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

CORATE, LALAINE, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
780
LA JOLLA, CA 92037
Effective as of 01-JAN-21

CORATE, LALAINE, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
370
LA JOLLA, CA 92037
Effective as of 01-JUL-20

CORATE, LALAINE, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
370
LA JOLLA, CA 92037
Effective as of 01-JAN-21

FE, ALEXANDER, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
370
LA JOLLA, CA 92037
Effective as of 01-SEP-21

FE, ALEXANDER, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
370
LA JOLLA, CA 92037
Effective as of 01-FEB-23

FRICKS, CARL, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
370

LA JOLLA, CA 92037
Effective as of 01-JUL-20

FRICKS, CARL, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
370
LA JOLLA, CA 92037
Effective as of 01-JAN-21

GLICKMAN, SAMUEL, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
370
LA JOLLA, CA 92037
Effective as of 01-JAN-21

JONES, DANIEL, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
370
LA JOLLA, CA 92037
Effective as of 01-JUL-20

MCCAUL, DAVID, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
370
LA JOLLA, CA 92037
Effective as of 01-JUL-20

MCCAUL, DAVID, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
370
LA JOLLA, CA 92037
Effective as of 01-JAN-21

MCGUIRE, WILLIAM, MD

Provider ID: N/A

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

MUNOZ PINEDA, JORGE, MD

Provider ID: N/A

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-23

PEARCE, ALEX, MD

Provider ID: N/A

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

RADWAN, MOHAMED, MD†

Provider ID: N/A

📍 9850 GENESEE AVE STE
370
LA JOLLA, CA 92037
Effective as of 01-JUL-20

WILTCHIK, ERIN, MD

Provider ID: N/A

📍 9850 GENESEE AVE STE
370
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JUN-24

WILTCHIK, ERIN, MD

Provider ID: N/A

📍 9850 GENESEE AVE STE
370
LA JOLLA, CA 92037
Teleservice
Effective as of 01-AUG-24

RADIATION ONCOLOGY

BEAR, JONATHAN, MD

Provider ID: N/A

📍 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-APR-23

BRUGGEMAN, ANDREW, MD†

Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-JAN-24

HATTANGADI-GLUTH, JONA, MD†

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-JAN-24

HORN, ADAM, MD

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-APR-23

MACEWAN, IAIN, MD†

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-JAN-21

TRINGALE, KATHRYN, MD

Provider ID: N/A

3960 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-DEC-23

TRINGALE, KATHRYN, MD

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-DEC-23

TYE, KAREN, MD

Provider ID: N/A

3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093
Effective as of 01-JUN-23

YORK, JOHN, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-23

RADIOLOGY DIAGNOSTIC

AGANOVIC, LEJLA, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

AMMIRATI, GIUSEPPE, MD†

Provider ID: N/A

9834 GENESEE AVE STE 411
LA JOLLA, CA 92037
Effective as of 01-JAN-21

BOLAR, DIVYA, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

BOSWELL, GILBERT, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

BRANCH, CODY, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-21

BROUHA, SHARON, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037

Effective as of 01-APR-23

BUI, KEVIN, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUL-21

CARSWELL, AIMEE, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-23

CHANG, JENNIFER, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

CHENG, KAREN, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

CHENG, KAREN, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-21

CHO, AARON, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

CHUNG, CHRISTINE, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

DORROS, STEPHEN, MD

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

EAJAZI, ALIREZA, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-21

EGHTEDARI, MOHAMMAD, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

FARID, NIKDOKHT, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

FAZELI, SOUDABEH, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUL-23

FEDERHART, JAY, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-24

FLISZAR, EVELYNE, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

FOWLER, KATHRYN, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037

Effective as of 01-APR-23

GENTILI, AMILCARE, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

HAHN, LEWIS, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

HAHN, MICHAEL, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

HANDWERKER, JASON, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

HAWLEY, DANIEL, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

HOROWITZ, MICHAEL, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

HSIAO, ALBERT, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

HUANG, BRADY, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

JACOBS, KATHLEEN, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

JACOBSON, JON, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

JAFFRAY, PAUL, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

KAROW, DAVID, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

KAROW, DAVID, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

KARUNAMUNI, JENNIFER, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

KIM, ERIC, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

C1. Lista de proveedores de la red
Médico de atención especializada

Effective as of 01-AUG-21

KLIGERMAN, SETH, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
 LA JOLLA, CA 92037

Effective as of 01-APR-23

KONDILI, DHIMITER, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
 LA JOLLA, CA 92037

Effective as of 01-AUG-21

LEE, ROLAND, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
 LA JOLLA, CA 92037

Effective as of 01-APR-23

LIM, VIVIAN, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
 LA JOLLA, CA 92037

Effective as of 01-APR-23

MAREK BYKOWSKI, JULIE, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
 LA JOLLA, CA 92037

Effective as of 01-APR-23

MARKS, ROBERT, MD

Provider ID: N/A

9300 CAMPUS POINT DR
 LA JOLLA, CA 92037

Effective as of 01-JUN-23

MCDONALD, MARIN, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
 LA JOLLA, CA 92037

Effective as of 01-APR-23

MCDONALD, MARIN, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
 LA JOLLA, CA 92037

Effective as of 01-FEB-22

MCMAMEE, CAIRINE, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
 LA JOLLA, CA 92037

Effective as of 01-APR-23

MCMAMEE, CAIRINE, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
 LA JOLLA, CA 92037

Effective as of 01-NOV-21

MURPHY, PAUL, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
 LA JOLLA, CA 92037

Effective as of 01-APR-23

NORBASH, ALEXANDER, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
 LA JOLLA, CA 92037

Effective as of 01-APR-23

OBOYLE, MARY, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
 LA JOLLA, CA 92037

Effective as of 01-APR-23

OBOYLE, MARY, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
 LA JOLLA, CA 92037

Effective as of 01-FEB-22

OJEDA-FOURNIER, HAYDEE, MD

Provider ID: N/A

9452 MEDICAL CENTER DR

LA JOLLA, CA 92037

Effective as of 01-APR-23

PATHRIA, MINI, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
 LA JOLLA, CA 92037

Effective as of 01-APR-23

RAKOW-PENNER, REBECCA, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
 LA JOLLA, CA 92037

Effective as of 01-APR-23

RESNICK, DONALD, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
 LA JOLLA, CA 92037

Effective as of 01-APR-23

RITCHIE, DAVID, MD

Provider ID: N/A

9300 CAMPUS POINT DR
 LA JOLLA, CA 92037

Effective as of 01-JUN-23

SADAT, SAYED, DO

Provider ID: N/A

9300 CAMPUS POINT DR
 LA JOLLA, CA 92037

Effective as of 01-JUN-23

SAMPATH, SRIHARI, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
 LA JOLLA, CA 92037

Effective as of 01-APR-23

SAMPATH, SRINATH, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
 LA JOLLA, CA 92037

Effective as of 01-APR-23

**C1. Lista de proveedores de la red
Médico de atención especializada**

SANTILLAN, CYNTHIA, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037

Effective as of 01-APR-23

SEARLEMAN, ADAM, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JUN-23

SLATER, JERRY, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-AUG-21

SMITAMAN, EDWARD, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037

Effective as of 01-APR-23

SPENGLER, NATHAN, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-DEC-23

STEINBERGER, AMANDA, DO

Provider ID: N/A

9850 GENESEE AVE STE
410
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JAN-24

STEINBERGER, AMANDA, DO

Provider ID: N/A

9850 GENESEE AVE STE
410
LA JOLLA, CA 92037

Teleservice

Effective as of 01-OCT-23

STEPENOSKY, JAMES, DO

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-AUG-24

TAMAYO-MURILLO,

DORATHY, MD

Provider ID: N/A

9452 MEDICAL CENTER DR
LA JOLLA, CA 92037

Effective as of 01-APR-23

UNSDORFER, KYLE, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JUN-23

VAHDAT, NOUSHIN, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JUL-23

YORK, VINCENT, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-AUG-21

ZAPALA, MATTHEW, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JUL-24

**REGISTERED DIETITIAN /
NUTRITIONIST**

CARLSON, STACY, RD

Provider ID: N/A

3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

Effective as of 01-AUG-24

SALCEDO, ALEXANDRA, RD

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JAN-24

**REGISTERED PHYSICAL
THERAPIST**

FERRER, MIRON, PT

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JAN-24

GILLILAND, TYLER, PT

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-JAN-24

HOUSELY, ALEXIS, PT

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JUN-23

SHARP, SIMPSON, PT

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JAN-24

TROYER, CORY, PT

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JAN-24

RHEUMATOLOGY

C1. Lista de proveedores de la red Médico de atención especializada

KIM, JANET, MD

Provider ID: N/A

9850 GENESEE AVE STE
420
LA JOLLA, CA 92037
Effective as of 01-FEB-17

KIM, JANET, MD

Provider ID: N/A

9850 GENESEE AVE STE
420
LA JOLLA, CA 92037
Effective as of 01-SEP-18

PATEL, PUJA, DO

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-24

SPEECH PATHOLOGIST

BLUMENFELD, LIZA, SP

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

LINNEMEYER-RISSER, KRISTEN, SP

Provider ID: N/A

9350 CAMPUS POINT DR
STE LLD
LA JOLLA, CA 92037
Effective as of 01-MAY-23

LINNEMEYER-RISSER, KRISTEN, SP

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

NEESE, SUSAN, SP

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JAN-24

SCHIEDERMAYER, BENJAMIN, SP†

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-APR-22

SCHIEDERMAYER, BENJAMIN, SP†

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-APR-22

THOMPSON, DANIELLE, SP

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-JAN-24

SURGERY COLON SURGERY

BEIERMEISTER, KEITH, MD†

Provider ID: N/A

9834 GENESEE AVE STE
201
LA JOLLA, CA 92037
Effective as of 01-AUG-13

BEIERMEISTER, KEITH, MD†

Provider ID: N/A

9834 GENESEE AVE STE
201
LA JOLLA, CA 92037
Effective as of 01-JAN-21

LOPEZ, NICOLE, MD†

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-DEC-21

PARRY, LISA, MD†

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-APR-21

RAMAMOORTHY, SONIA, MD†

Provider ID: N/A

9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-21

SCHULTZEL, MATTHEW, DO†

Provider ID: N/A

4150 REGENTS PARK ROW
STE 345
LA JOLLA, CA 92037
Effective as of 01-JAN-21

WORSEY, MICHAEL, MD†

Provider ID: N/A

9834 GENESEE AVE STE
201
LA JOLLA, CA 92037
Effective as of 01-JAN-21

WORSEY, MICHAEL, MD†

Provider ID: N/A

9834 GENESEE AVE STE
201
LA JOLLA, CA 92037
Effective as of 01-AUG-12

SURGERY CRITICAL CARE

ADAMS, LAURA, MD†

CI. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-21

VENTRO, GEORGE, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-21

SURGERY GENERAL

ARMANI, AVA, MD†

Provider ID: N/A

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
Effective as of 01-JUL-21

BHOYRUL, SUNIL, MD†

Provider ID: N/A

9850 GENESEE AVE STE
570
LA JOLLA, CA 92037
Effective as of 01-JAN-21

BHOYRUL, SUNIL, MD†

Provider ID: N/A

9850 GENESEE AVE STE
570
LA JOLLA, CA 92037
Effective as of 01-SEP-22

BORTZ, PASCAL, MD†

Provider ID: N/A

9850 GENESEE AVE STE
570
LA JOLLA, CA 92037
Effective as of 01-SEP-22

BORTZ, PASCAL, MD†

Provider ID: N/A

9850 GENESEE AVE STE
570

LA JOLLA, CA 92037
Effective as of 01-JAN-21

BORTZ, PASCAL, MD†

Provider ID: N/A

9850 GENESEE AVE STE
570
LA JOLLA, CA 92037
Effective as of 01-AUG-23

BURGESS, DANIEL, DO†

Provider ID: N/A

4150 REGENTS PARK ROW
STE 345
LA JOLLA, CA 92037
Teleservice
Effective as of 01-OCT-23

BURGESS, DANIEL, DO†

Provider ID: N/A

4150 REGENTS PARK ROW
STE 345
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JUN-21

HORGAN, SANTIAGO, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-21

MORELL, MICHAEL, MD

Provider ID: N/A

9850 GENESEE AVE STE
570
LA JOLLA, CA 92037
Effective as of 01-DEC-23

MORELL, MICHAEL, MD

Provider ID: N/A

9850 GENESEE AVE STE
570
LA JOLLA, CA 92037
Effective as of 01-MAR-24

MORELL, MICHAEL, MD

Provider ID: N/A

9850 GENESEE AVE STE
570
LA JOLLA, CA 92037
Effective as of 01-MAR-24

OLSON, CHERYL, MD†

Provider ID: N/A

9850 GENESEE AVE STE
660
LA JOLLA, CA 92037*
Effective as of 01-OCT-24

OLSON, CHERYL, MD†

Provider ID: N/A

9850 GENESEE AVE STE
660
LA JOLLA, CA 92037
Effective as of 01-FEB-23

OLSON, CHERYL, MD†

Provider ID: N/A

9850 GENESEE AVE STE
660
LA JOLLA, CA 92037
Effective as of 01-APR-17

SCHULTZEL, MATTHEW, DO†

Provider ID: N/A

4150 REGENTS PARK ROW
STE 345
LA JOLLA, CA 92037
Effective as of 01-JUL-20

SHAPER, EMANUEL, MD

Provider ID: N/A

9850 GENESEE AVE STE
570
LA JOLLA, CA 92037
Effective as of 01-MAY-23

SHAPER, EMANUEL, MD

Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

9850 GENESEE AVE STE
570
LA JOLLA, CA 92037
Effective as of 01-FEB-24

SHERMAN, MARK, MD

Provider ID: N/A

9850 GENESEE AVE STE
660
LA JOLLA, CA 92037*
Effective as of 01-OCT-24

SHERMAN, MARK, MD

Provider ID: N/A

9850 GENESEE AVE STE
660
LA JOLLA, CA 92037
Effective as of 01-FEB-23

ZUBER, SAMUEL, MD

Provider ID: N/A

9850 GENESEE AVE STE
660
LA JOLLA, CA 92037*
Effective as of 01-OCT-24

SURGERY GENERAL VASCULAR

BUNKE, NISHA, MD†

Provider ID: N/A

9850 GENESEE AVE STE
410
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JAN-21

LUCAS, SARAH, MD

Provider ID: N/A

9850 GENESEE AVE STE
410
LA JOLLA, CA 92037
Effective as of 01-JAN-21

SURGERY HAND

BROWN, RICHARD, MD†

Provider ID: N/A

9850 GENESEE AVE STE
210
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JAN-21

DOWNING, KRISTOPHER, MD†

Provider ID: N/A

9834 GENESEE AVE STE
228
LA JOLLA, CA 92037

Effective as of 01-MAY-18

SURGERY HAND ORTHOPEDIC

STEPHENSON, SAMUEL, MD†

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-OCT-21

STEPHENSON, SAMUEL, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-OCT-21

SURGERY NEUROLOGICAL

HATEFI, DUSTIN, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-24

MURTHY, NIKHIL, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-JUL-23

MURTHY, NIKHIL, MD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-JUL-23

OSTRUP, RICHARD, MD†

Provider ID: N/A

9850 GENESEE AVE STE
770
LA JOLLA, CA 92037
Effective as of 01-JAN-13

YOO, FRANK, MD

Provider ID: N/A

4150 REGENTS PARK ROW
STE 325
LA JOLLA, CA 92037
Effective as of 01-JUN-24

SURGERY ORTHOPEDIC

ANDRY, JAMES, MD

Provider ID: N/A

9834 GENESEE AVE STE
228
LA JOLLA, CA 92037*
Effective as of 01-MAR-24

ANDRY, JAMES, MD

Provider ID: N/A

9834 GENESEE AVE STE
228
LA JOLLA, CA 92037
Effective as of 01-MAR-24

BLAIS, MICAH, MD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-JUL-23

BUKATA, SUSAN, MD†

**C1. Lista de proveedores de la red
Médico de atención especializada**

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAR-21

CHOI, JIHOON, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-21

CHOI, JIHOON, MD†

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-SEP-21

DOWNING, KRISTOPHER, MD†

Provider ID: N/A

9834 GENESEE AVE STE
228
LA JOLLA, CA 92037*
Effective as of 01-MAR-24

DOWNING, KRISTOPHER, MD†

Provider ID: N/A

9834 GENESEE AVE STE
228
LA JOLLA, CA 92037
Effective as of 01-MAR-24

GOEB, YANNICK, MD†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-21

GOEB, YANNICK, MD†

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-SEP-21

HACKLEY, DAVID, MD†

Provider ID: N/A

9850 GENESEE AVE STE
210
LA JOLLA, CA 92037
Effective as of 01-JAN-21

KANE, NORMAN, MD

Provider ID: N/A

9834 GENESEE AVE STE
228
LA JOLLA, CA 92037
Teleservice
Effective as of 01-APR-24

KUSNEZOV, NICHOLAS, MD

Provider ID: N/A

9834 GENESEE AVE STE
228
LA JOLLA, CA 92037
Teleservice
Effective as of 01-APR-24

MARSHALL, STUART, MD

Provider ID: N/A

7301 GIRARD AVE STE 300
LA JOLLA, CA 92037
Effective as of 01-NOV-18

MCKNIGHT, BRADEN, MD

Provider ID: N/A

9834 GENESEE AVE STE
228
LA JOLLA, CA 92037
Teleservice
Effective as of 01-APR-24

MOHLENBROCK, WILLIAM, MD

Provider ID: N/A

9850 GENESEE AVE STE
210
LA JOLLA, CA 92037
Effective as of 01-JAN-21

PALLIA, CHRISTOPHER, MD

Provider ID: N/A

9834 GENESEE AVE STE

228

LA JOLLA, CA 92037
Teleservice
Effective as of 01-APR-24

PALLIA, CHRISTOPHER, MD

Provider ID: N/A

9834 GENESEE AVE STE
228
LA JOLLA, CA 92037*
Teleservice
Effective as of 01-MAR-24

SIROTA, MICHAEL, MD

Provider ID: N/A

9834 GENESEE AVE STE
228
LA JOLLA, CA 92037
Effective as of 01-AUG-24

SWENSON, FRANK, MD†

Provider ID: N/A

9850 GENESEE AVE STE
210
LA JOLLA, CA 92037
Effective as of 01-JAN-21

THUNDER, RICHARD, MD†

Provider ID: N/A

9850 GENESEE AVE STE
210
LA JOLLA, CA 92037
Effective as of 01-JAN-21

WHEATLEY, BENJAMIN, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

SURGERY PLASTIC

GOSMAN, AMANDA, MD†

Provider ID: N/A

9300 CAMPUS POINT DR

C1. Lista de proveedores de la red Médico de atención especializada

LA JOLLA, CA 92037
Effective as of 01-NOV-21

MOFID, MEHRDAD, MD†

Provider ID: N/A

4150 REGENTS PARK ROW
STE 300

LA JOLLA, CA 92037*
Effective as of 01-JUL-22

MOFID, MEHRDAD, MD†

Provider ID: N/A

4150 REGENTS PARK ROW
STE 300

LA JOLLA, CA 92037
Effective as of 01-JAN-21

MOFID, MEHRDAD, MD†

Provider ID: N/A

4150 REGENTS PARK ROW
STE 300

LA JOLLA, CA 92037
Effective as of 01-SEP-15

MOFID, MEHRDAD, MD†

Provider ID: N/A

4150 REGENTS PARK ROW
STE 300

LA JOLLA, CA 92037
Effective as of 01-JUL-21

MOFID, MEHRDAD, MD†

Provider ID: N/A

4150 REGENTS PARK ROW
STE 300

LA JOLLA, CA 92037
Effective as of 01-MAR-16

UMANSKY, JEFFREY, MD†

Provider ID: N/A

4150 REGENTS PARK ROW
STE 260

LA JOLLA, CA 92037*
Effective as of 01-JAN-14

SURGERY THORACIC

BARADARIAN, SAM, MD†

Provider ID: N/A

9898 GENESEE AVE
LA JOLLA, CA 92037

Effective as of 01-NOV-17

BARADARIAN, SAM, MD

Provider ID: N/A

9898 GENESEE AVE FL 3
LA JOLLA, CA 92037

Effective as of 01-JAN-24

HUDSON, JESSICA, MD

Provider ID: N/A

9434 MEDICAL CENTER DR
LA JOLLA, CA 92037

Effective as of 01-DEC-23

HUDSON, JESSICA, MD

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-DEC-23

HUDSON, JESSICA, MD

Provider ID: N/A

3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093
Effective as of 01-DEC-23

MOASIS, GHASSAN, MD†

Provider ID: N/A

9898 GENESEE AVE
LA JOLLA, CA 92037

Effective as of 01-MAY-17

TYNER, JOHN, MD†

Provider ID: N/A

10666 N TORREY PINES RD
STE 209

LA JOLLA, CA 92037
Effective as of 01-SEP-20

TYNER, JOHN, MD†

Provider ID: N/A

9850 GENESEE AVE STE
560

LA JOLLA, CA 92037
Effective as of 01-SEP-15

WANG, WILLIAM, MD†

Provider ID: N/A

9850 GENESEE AVE STE
560

LA JOLLA, CA 92037
Effective as of 01-SEP-15

ZANDER, ASHLEY, DO†

Provider ID: N/A

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Effective as of 01-AUG-22

ZANDER, ASHLEY, DO†

Provider ID: N/A

3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093
Effective as of 01-AUG-22

ZANDER, ASHLEY, DO†

Provider ID: N/A

9434 MEDICAL CENTER DR
LA JOLLA, CA 92037

Effective as of 01-AUG-22

SURGICAL ONCOLOGY

MEHTSUN, WINTA, MD†

Provider ID: N/A

3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093
Effective as of 01-JAN-22

UROLOGY

ANGER, JENNIFER, MD†

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-OCT-21

BAGRODIA, ADITYA, MD†

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-DEC-21

BASTUBA, MARTIN, MD†

Provider ID: N/A

9850 GENESEE AVE STE
630
LA JOLLA, CA 92037
Effective as of 01-JAN-21

COHEN, EDWARD, MD†

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-JAN-21

COHEN, EDWARD, MD†

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-JAN-21

COHEN, EDWARD, MD†

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-JUL-22

COHEN, EDWARD, MD†

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-OCT-12

COHEN, EDWARD, MD†

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-SEP-21

DATO, PAUL, MD

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-JAN-24

DICKS, BRIAN, MD

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-FEB-24

JUMA, SAAD, MD

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-JAN-24

KATZ, JONATHAN, MD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-JUN-23

KEILLER, DANNY, MD

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-FEB-24

NAITOH, JOHN, MD†

Provider ID: N/A

9850 GENESEE AVE STE

440

LA JOLLA, CA 92037
Effective as of 01-JAN-21

NAITOH, JOHN, MD†

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-JAN-21

NAITOH, JOHN, MD†

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-JUL-22

NAITOH, JOHN, MD†

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-NOV-98

NAITOH, JOHN, MD†

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-NOV-21

NAITOH, JOHN, MD†

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-SEP-22

NEUSTEIN, PAUL, MD

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037
Effective as of 01-JAN-24

C1. Lista de proveedores de la red Médico de atención especializada

NGUYEN, HUNG, MD†

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JAN-21

NGUYEN, HUNG, MD†

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037

Teleservice

Effective as of 01-JAN-21

NGUYEN, HUNG, MD†

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037

Teleservice

Effective as of 01-SEP-19

NGUYEN, HUNG, MD†

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037

Teleservice

Effective as of 01-SEP-21

PE, MARK-RALLY, MD

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037

Effective as of 01-FEB-24

ROBERTS, JAMES, MD

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037

Effective as of 01-JAN-24

SALEM, CAROL, MD

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037

Effective as of 01-FEB-24

SHEETZ, TYLER, MD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-SEP-23

SIMON, SCOTT, MD

Provider ID: N/A

9834 GENESEE AVE STE
224
LA JOLLA, CA 92037

Effective as of 01-JUN-23

VAPNEK, EVAN, MD

Provider ID: N/A

9850 GENESEE AVE STE
440
LA JOLLA, CA 92037

Effective as of 01-JAN-24

WANG, LUKE, MD

Provider ID: N/A

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Effective as of 01-JUN-23

ANESTHESIOLOGY

CHIEN, SHELBY, MD†

Provider ID: N/A

5360 JACKSON DR STE 100
LA MESA, CA 91942

Effective as of 01-JAN-21

VERDOLIN, MICHAEL, MD

Provider ID: N/A

7051 ALVARADO RD STE 101
LA MESA, CA 91942

Effective as of 01-JAN-23

VERDOLIN, MICHAEL, MD

Provider ID: N/A

7051 ALVARADO RD STE 101
LA MESA, CA 91942

Effective as of 01-JAN-21

VERDOLIN, MICHAEL, MD

Provider ID: N/A

7051 ALVARADO RD STE 101
LA MESA, CA 91942

Effective as of 01-FEB-16

ANESTHESIOLOGY PAIN MANAGEMENT

BROWNLOW, ROY, MD

Provider ID: N/A

5360 JACKSON DR STE 100
LA MESA, CA 91942

Effective as of 01-APR-24

COHEN, ZACHARY, MD

Provider ID: N/A

5360 JACKSON DR STE 100
LA MESA, CA 91942

Effective as of 01-FEB-24

LEE, INSUN, MD†

Provider ID: N/A

5360 JACKSON DR STE 100
LA MESA, CA 91942

Teleservice

Effective as of 01-APR-24

VERDOLIN, MICHAEL, MD

Provider ID: N/A

7051 ALVARADO RD STE 101
LA MESA, CA 91942

Effective as of 01-MAR-22

AUDIOLOGIST

C1. Lista de proveedores de la red Médico de atención especializada

SHASKY, GARY, AuD†

Provider ID: N/A

📍 5565 GROSSMONT
CENTER DR STE 153
LA MESA, CA 91942
Effective as of 01-JAN-21

SHASKY, GARY, AuD

Provider ID: N/A

📍 5565 GROSSMONT
CENTER DR STE 463
LA MESA, CA 91942
Effective as of 01-FEB-24

CARDIAC ELECTROPHYSIOLOGY

DAWOOD, FARAH, MD†

Provider ID: N/A

📍 8851 CENTER DR STE 304
LA MESA, CA 91942
Effective as of 01-DEC-20

CARDIOVASCULAR DISEASE

AZIMI, NASSIR, MD†

Provider ID: N/A

📍 5565 GROSSMONT
CENTER DR STE 3 STE 444
LA MESA, CA 91942
Effective as of 01-JAN-21

AZIMI, NASSIR, MD

Provider ID: N/A

📍 8911 LA MESA BLVD STE 101
LA MESA, CA 91942
Effective as of 01-JUN-24

BELOTT, PETER, MD†

Provider ID: N/A

📍 8851 CENTER DR STE 305
LA MESA, CA 91942
Effective as of 01-APR-17

DAWOOD, FARAH, MD†

Provider ID: N/A

📍 8851 CENTER DR STE 304
LA MESA, CA 91942
Effective as of 01-AUG-21

FERNANDEZ, GENARO, MD†

Provider ID: N/A

📍 8851 CENTER DR STE 304
LA MESA, CA 91942
Effective as of 01-AUG-21

KIM, JAMES, MD

Provider ID: N/A

📍 5358 JACKSON DR STE 1
LA MESA, CA 91942
Teleservice
Effective as of 01-AUG-23

KIM, JAMES, MD

Provider ID: N/A

📍 5358 JACKSON DR STE 1
LA MESA, CA 91942
Teleservice
Effective as of 01-JUN-23

KOTHA, PURUSHOTHAM, MD†

Provider ID: N/A

📍 8860 CENTER DR STE 400
LA MESA, CA 91942
Effective as of 01-JAN-21

MEHRANPOUR, PAYAM, MD†

Provider ID: N/A

📍 8851 CENTER DR STE 405
LA MESA, CA 91942
Teleservice
Effective as of 01-JAN-21

SHEREV, DIMITRI, MD

Provider ID: N/A

📍 8851 CENTER DR STE 304
LA MESA, CA 91942
Effective as of 01-APR-23

CERTIFIED NURSE PRACTITIONER

DWYER, ERIN, NP

Provider ID: N/A

📍 8851 CENTER DR STE 501
LA MESA, CA 91942
Effective as of 01-JAN-24

MCCALLION, DANIELLE, NP

Provider ID: N/A

📍 8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-AUG-23

MCCALLION, DANIELLE, NP

Provider ID: N/A

📍 8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-AUG-23

TOMICICH, STEPHANIE, NP

Provider ID: N/A

📍 8851 CENTER DR STE 501
LA MESA, CA 91942
Effective as of 01-JAN-24

HEARING AID DEALER / SUPPLIER

ANDERSON, ELAINE, MA†

Provider ID: N/A

📍 5565 GROSSMONT
CENTER DR
LA MESA, CA 91942
Effective as of 01-SEP-22

HEMATOLOGY / ONCOLOGY

BATRA, REEMA, MD†

Provider ID: N/A

📍 5555 GROSSMONT

CI. Lista de proveedores de la red Médico de atención especializada

CENTER DR
LA MESA, CA 91942*
Effective as of 01-JAN-14

BATRA, REEMA, MD†

Provider ID: N/A
☒ 5555 GROSSMONT
CENTER DR
LA MESA, CA 91942
Effective as of 01-JAN-21

BODKIN, DAVID, MD†

Provider ID: N/A
☒ 5555 GROSSMONT
CENTER DR
LA MESA, CA 91942
Effective as of 01-JAN-21

MEDIC, IGOR, MD†

Provider ID: N/A
☒ 5555 GROSSMONT
CENTER DR
LA MESA, CA 91942
Effective as of 01-JAN-21

MEDIC, IGOR, MD†

Provider ID: N/A
☒ 5555 GROSSMONT
CENTER DR
LA MESA, CA 91942*
Effective as of 01-FEB-18

ZU, KAI, MD†

Provider ID: N/A
☒ 5555 GROSSMONT
CENTER DR
LA MESA, CA 91942*
Teleservice
Effective as of 01-JAN-14

ZU, KAI, MD†

Provider ID: N/A
☒ 5555 GROSSMONT
CENTER DR
LA MESA, CA 91942

Teleservice
Effective as of 01-JAN-21

INFECTIOUS DISEASE

HADDAD, FADI, MD

Provider ID: N/A
☒ 8860 CENTER DR STE 320
LA MESA, CA 91942
Effective as of 01-JUN-23

INTERNAL MEDICINE

FADDA, GEORGE, MD†

Provider ID: N/A
☒ 8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-NOV-23

FARAVARDEH, ARMAN, MD†

Provider ID: N/A
☒ 8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-SEP-14

FERNANDEZ, GENARO, MD†

Provider ID: N/A
☒ 8851 CENTER DR STE 304
LA MESA, CA 91942
Effective as of 01-SEP-22

KOTHA, ROSHAN, MD†

Provider ID: N/A
☒ 8860 CENTER DR STE 400
LA MESA, CA 91942
Effective as of 01-SEP-15

LEININGER, DANIEL, DO†

Provider ID: N/A
☒ 8851 CENTER DR STE 505
LA MESA, CA 91942
Teleservice
Effective as of 01-NOV-22

LIU, ANDREW, MD

Provider ID: N/A
☒ 8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-SEP-23

MOOLANI, UJJALA, MD

Provider ID: N/A
☒ 8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-MAY-23

POKALA, SATHYA, MD†

Provider ID: N/A
☒ 8860 CENTER DR STE 240
LA MESA, CA 91942
Effective as of 01-JAN-14

REDDY, REDDIWANDLA, MD†

Provider ID: N/A
☒ 5565 GROSSMONT
CENTER DR STE 202
LA MESA, CA 91942
Teleservice
Effective as of 01-JAN-21

INTERVENTIONAL CARDIOLOGY

FERNANDEZ, GENARO, MD†

Provider ID: N/A
☒ 8851 CENTER DR STE 304
LA MESA, CA 91942
Effective as of 01-DEC-20

MEHRANPOUR, PAYAM, MD†

Provider ID: N/A
☒ 8851 CENTER DR STE 405
LA MESA, CA 91942
Teleservice
Effective as of 01-JAN-19

NAGHI, JESSE, MD†

Provider ID: N/A
☒ 8851 CENTER DR STE 304

C1. Lista de proveedores de la red Médico de atención especializada

LA MESA, CA 91942
Effective as of 01-JUL-22

NAGHI, JESSE, MD†

Provider ID: N/A

8851 CENTER DR STE 304
LA MESA, CA 91942
Effective as of 01-JAN-24

NGUYEN, BRYANT, MD†

Provider ID: N/A

8851 CENTER DR STE 304
LA MESA, CA 91942
Effective as of 01-JAN-21

REDDY, REDDIWANDLA, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 202
LA MESA, CA 91942

Teleservice

Effective as of 01-SEP-22

TAGHIZADEH, BEHZAD, MD†

Provider ID: N/A

8851 CENTER DR STE 405
LA MESA, CA 91942
Effective as of 01-SEP-22

TAGHIZADEH, BEHZAD, MD†

Provider ID: N/A

8851 CENTER DR STE 405
LA MESA, CA 91942
Effective as of 01-SEP-22

YELLEN, LAURENCE, MD†

Provider ID: N/A

8851 CENTER DR STE 405
LA MESA, CA 91942
Effective as of 01-SEP-22

NEPHROLOGY

AL-DAHMAN, ZAID, MD

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-MAY-23

DO, LUAN, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-JUL-22

DO, LUAN, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-SEP-20

DO, LUAN, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-JAN-21

DO, LUAN, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-JAN-21

DO, LUAN, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-JAN-14

FADDA, GEORGE, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-JAN-21

FADDA, GEORGE, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-AUG-16

FADDA, GEORGE, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-AUG-16

FADDA, GEORGE, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-JUL-22

FARAVARDEH, ARMAN, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-AUG-14

LEININGER, DANIEL, DO†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942
Teleservice

Effective as of 01-AUG-22

LEININGER, DANIEL, DO†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942
Teleservice

Effective as of 01-SEP-22

LEININGER, DANIEL, DO†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942
Teleservice

Effective as of 01-OCT-22

LEININGER, DANIEL, DO†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942
Teleservice

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-SEP-22

MILLER, LUCY, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942

Effective as of 01-SEP-20

MILLER, LUCY, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942

Effective as of 01-JUL-22

MILLER, LUCY, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942

Effective as of 01-APR-15

MILLER, LUCY, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942

Effective as of 01-JAN-21

MILLER, LUCY, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942

Effective as of 01-JAN-21

SAEED, ODAY, MD

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942

Effective as of 01-MAY-24

SAEED, ODAY, MD

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942

Effective as of 01-MAR-24

THOMPSON, JOHN, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942

Effective as of 01-MAY-15

THOMPSON, JOHN, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942

Effective as of 01-JUL-22

THOMPSON, JOHN, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942

Effective as of 01-JAN-21

THOMPSON, JOHN, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942

Effective as of 01-JAN-21

THOMPSON, JOHN, MD†

Provider ID: N/A

8851 CENTER DR STE 505
LA MESA, CA 91942

Effective as of 01-JAN-21

NEUROLOGY

MOHAMMAD, AHMADSHAH, MD†

Provider ID: N/A

8851 CENTER DR STE 307
LA MESA, CA 91942*

Effective as of 01-JAN-21

MOHAMMAD, AHMADSHAH, MD†

Provider ID: N/A

8851 CENTER DR STE 307
LA MESA, CA 91942

Effective as of 01-SEP-22

MOHAMMAD, AHMADSHAH, MD†

Provider ID: N/A

8851 CENTER DR STE 307
LA MESA, CA 91942

Effective as of 01-JAN-14

MOHAMMAD, AHMADSHAH, MD†

Provider ID: N/A

8851 CENTER DR STE 307
LA MESA, CA 91942

Effective as of 01-JAN-21

MOHAMMAD, AHMADSHAH, MD†

Provider ID: N/A

8851 CENTER DR STE 307
LA MESA, CA 91942

Effective as of 01-JAN-21

OBSTETRICS / GYNECOLOGY

PAPA, RHETT, DO†

Provider ID: N/A

8851 CENTER DR STE 210
LA MESA, CA 91942

Effective as of 01-APR-21

OCCUPATIONAL THERAPIST

BERNALES-MENDEZ, DEZARINA, OT

Provider ID: N/A

4700 SPRING ST STE 180
LA MESA, CA 91942

Effective as of 01-NOV-23

BERNALES-MENDEZ, DEZARINA, OT

Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

8388 PARKWAY DR
LA MESA, CA 91942
Effective as of 01-JAN-23

BERNALES-MENDEZ, DEZARINA, OT

Provider ID: N/A

8388 PARKWAY DR
LA MESA, CA 91942
Effective as of 01-AUG-23

PORTER, EILEEN, OT

Provider ID: N/A

8388 PARKWAY DR
LA MESA, CA 91942
Effective as of 01-AUG-23

PORTER, EILEEN, OT

Provider ID: N/A

8388 PARKWAY DR
LA MESA, CA 91942
Effective as of 01-JAN-22

PORTER, EILEEN, OT

Provider ID: N/A

4700 SPRING ST STE 180
LA MESA, CA 91942
Effective as of 01-NOV-23

SHIH, LYNN, OT

Provider ID: N/A

4700 SPRING ST STE 180
LA MESA, CA 91942
Effective as of 01-DEC-23

SHIH, LYNN, OT

Provider ID: N/A

8388 PARKWAY DR
LA MESA, CA 91942
Effective as of 01-DEC-23

OPHTHALMOLOGY

BARNARD, LUKE, MD

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942
Effective as of 01-SEP-24

BINDER, NICHOLAS, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 3 BLDG 2
LA MESA, CA 91942
Effective as of 01-APR-22

BINDER, NICHOLAS, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-DEC-23

BINDER, NICHOLAS, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-SEP-22

BINDER, NICHOLAS, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 3 BLDG 2
LA MESA, CA 91942
Effective as of 01-NOV-23

BINDER, NICHOLAS, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 3 BLDG 2
LA MESA, CA 91942
Effective as of 01-SEP-22

BINDER, NICHOLAS, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942

Effective as of 01-MAR-22

CARRABY, ARNETT, MD†

Provider ID: N/A

8851 CENTER DR STE 406
LA MESA, CA 91942
Effective as of 01-SEP-22

CARRABY, ARNETT, MD†

Provider ID: N/A

8851 CENTER DR STE 406
LA MESA, CA 91942
Effective as of 01-JUL-22

CHIU, STEPHAN, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942
Effective as of 01-FEB-23

CHIU, STEPHAN, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942
Effective as of 01-JUN-23

CHIU, STEPHAN, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942
Effective as of 01-MAY-22

COCKERHAM, KIMBERLY, MD

Provider ID: N/A

5525 GROSSMONT
CENTER DR STE 602
LA MESA, CA 91942
Effective as of 01-MAY-24

DELENGOCKY, TAYSON, DO†


Provider ID: N/A

8851 CENTER DR STE 406


**C1. Lista de proveedores de la red
Médico de atención especializada**

LA MESA, CA 91942
Effective as of 01-SEP-22


DELENGOCKY, TAYSON, DO†

Provider ID: N/A
 8851 CENTER DR STE 406
LA MESA, CA 91942
Effective as of 01-JUL-22


FISH, STEVEN, MD

Provider ID: N/A
 7339 EL CAJON BLVD STE
J-K
LA MESA, CA 91942
Effective as of 01-APR-23


GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A
 7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-APR-23


GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A
 7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-MAR-22


GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A
 5565 GROSSMONT
CENTER DR STE 3 BLDG 2
LA MESA, CA 91942
Effective as of 01-SEP-22


GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A
 5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942
Effective as of 01-JUN-23


GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A
 5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942
Effective as of 01-JAN-21


GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A
 5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942
Effective as of 01-SEP-22


GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A
 7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-SEP-22


HAIGHT, BRUCE, MD†

Provider ID: N/A
 7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-SEP-22

HAIGHT, BRUCE, MD†


Provider ID: N/A
 5565 GROSSMONT
CENTER DR BLDG 3 STE
551
LA MESA, CA 91942
Effective as of 01-SEP-22

HAIGHT, BRUCE, MD†


Provider ID: N/A
 5565 GROSSMONT
CENTER DR BLDG 3 STE
551
LA MESA, CA 91942
Effective as of 01-JAN-22

HAIGHT, BRUCE, MD†


Provider ID: N/A

 5565 GROSSMONT
CENTER DR BLDG 3 STE
551
LA MESA, CA 91942
Effective as of 01-JAN-21


HAIGHT, BRUCE, MD†

Provider ID: N/A
 5565 GROSSMONT
CENTER DR STE 2-3
LA MESA, CA 91942
Effective as of 01-SEP-22


HAIGHT, BRUCE, MD†

Provider ID: N/A
 7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-MAR-22


HSU, CHRISTOPHER, MD†

Provider ID: N/A
 7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-MAR-22


HSU, CHRISTOPHER, MD†

Provider ID: N/A
 7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942
Effective as of 01-APR-22

HSU, CHRISTOPHER, MD†

Provider ID: N/A
 5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942
Effective as of 01-MAY-22


HUDSON, HENRY, MD†

Provider ID: N/A
 5565 GROSSMONT
CENTER DR STE 551


**C1. Lista de proveedores de la red
Médico de atención especializada**

LA MESA, CA 91942
Effective as of 01-MAY-21


HUDSON, HENRY, MD†

Provider ID: N/A
 5565 GROSSMONT
 CENTER DR STE 551
 LA MESA, CA 91942
 Effective as of 01-MAY-24


HUDSON, HENRY, MD†

Provider ID: N/A
 5565 GROSSMONT
 CENTER DR STE 551
 LA MESA, CA 91942
 Effective as of 01-SEP-22


HUDSON, HENRY, MD†

Provider ID: N/A
 5565 GROSSMONT
 CENTER DR STE 551
 LA MESA, CA 91942
 Effective as of 01-APR-23


HUDSON, HENRY, MD†

Provider ID: N/A
 5565 GROSSMONT
 CENTER DR STE 551
 LA MESA, CA 91942
 Effective as of 01-MAR-23


HUDSON, HENRY, MD†

Provider ID: N/A
 7339 EL CAJON BLVD STE J
 AND K
 LA MESA, CA 91942
 Effective as of 01-APR-23


HUDSON, HENRY, MD†

Provider ID: N/A
 7339 EL CAJON BLVD STE J
 AND K
 LA MESA, CA 91942
 Effective as of 01-MAR-22

HUDSON, HENRY, MD†

Provider ID: N/A
 7339 EL CAJON BLVD STE J
 AND K
 LA MESA, CA 91942
 Effective as of 01-MAR-23


KATZMAN, BARRY, MD†

Provider ID: N/A
 7339 EL CAJON BLVD STE J
 AND K
 LA MESA, CA 91942
 Effective as of 01-MAR-22


KATZMAN, BARRY, MD†

Provider ID: N/A
 7339 EL CAJON BLVD STE J
 AND K
 LA MESA, CA 91942
 Effective as of 01-APR-22


MANI, MAJID, MD†

Provider ID: N/A
 8851 CENTER DR STE 406
 LA MESA, CA 91942
 Effective as of 01-JUL-22

MANI, MAJID, MD†

Provider ID: N/A
 8851 CENTER DR STE 406
 LA MESA, CA 91942
 Effective as of 01-SEP-22

MCGRAW, JOSEPH, MD†


Provider ID: N/A
 5565 GROSSMONT
 CENTER DR STE 551
 LA MESA, CA 91942
 Effective as of 01-SEP-22

MCGRAW, JOSEPH, MD†


Provider ID: N/A
 7339 EL CAJON BLVD STE J
 AND K
 LA MESA, CA 91942

Effective as of 01-SEP-22


MCGRAW, JOSEPH, MD†

Provider ID: N/A
 5565 GROSSMONT
 CENTER DR BLDG 2 STE 3
 LA MESA, CA 91942
 Effective as of 01-JAN-22


MCGRAW, JOSEPH, MD†

Provider ID: N/A
 7339 EL CAJON BLVD STE J
 AND K
 LA MESA, CA 91942
 Effective as of 01-APR-23


MCGRAW, JOSEPH, MD†

Provider ID: N/A
 7339 EL CAJON BLVD STE J
 AND K
 LA MESA, CA 91942
 Effective as of 01-MAR-22

**MORRISON-REYES, JOSHUA,
MD†**

Provider ID: N/A
 5565 GROSSMONT
 CENTER DR STE 551 BLDG
 3
 LA MESA, CA 91942
 Effective as of 01-MAR-23

**MORRISON-REYES, JOSHUA,
MD†**

Provider ID: N/A
 5565 GROSSMONT
 CENTER DR BLDG 2 STE 3
 LA MESA, CA 91942
 Effective as of 01-APR-22


**MORRISON-REYES, JOSHUA,
MD**

Provider ID: N/A
 7339 EL CAJON BLVD STE J
 AND K


**C1. Lista de proveedores de la red
Médico de atención especializada**

LA MESA, CA 91942
Effective as of 01-FEB-24


MORRISON-REYES, JOSHUA, MD†

Provider ID: N/A
 5565 GROSSMONT
 CENTER DR STE 551 BLDG
 3
 LA MESA, CA 91942
 Effective as of 01-SEP-22


NAJAFI, DAVID, MD

Provider ID: N/A
 8262 UNIVERSITY AVE
 LA MESA, CA 91942
 Effective as of 01-JAN-23


PAPASTERGIOU, GEORGIOS, MD†

Provider ID: N/A
 8851 CENTER DR STE 406
 LA MESA, CA 91942
 Effective as of 01-JAN-21

PAPASTERGIOU, GEORGIOS, MD†

Provider ID: N/A
 8851 CENTER DR STE 406
 LA MESA, CA 91942
 Effective as of 01-AUG-20

PAPASTERGIOU, GEORGIOS, MD†


Provider ID: N/A
 8851 CENTER DR STE 406
 LA MESA, CA 91942
 Effective as of 01-SEP-22

PATEL, GITANE, MD†

Provider ID: N/A
 7339 EL CAJON BLVD STE J
 AND K
 LA MESA, CA 91942

Effective as of 01-DEC-23

PATEL, SARJAN, MD†

Provider ID: N/A
 7339 EL CAJON BLVD STE J
 AND K
 LA MESA, CA 91942
 Effective as of 01-DEC-23


PATEL, GITANE, MD†

Provider ID: N/A
 7339 EL CAJON BLVD STE J
 AND K
 LA MESA, CA 91942
 Effective as of 01-SEP-22


PATEL, SARJAN, MD†

Provider ID: N/A
 7339 EL CAJON BLVD STE J
 AND K
 LA MESA, CA 91942
 Effective as of 01-SEP-22


PATEL, GITANE, MD†

Provider ID: N/A
 7339 EL CAJON BLVD STE J
 AND K
 LA MESA, CA 91942
 Effective as of 01-MAR-22

PATEL, SARJAN, MD†


Provider ID: N/A
 7339 EL CAJON BLVD STE J
 AND K
 LA MESA, CA 91942
 Effective as of 01-MAR-22

PEAIRS, JAMES, MD†


Provider ID: N/A
 8851 CENTER DR STE 406
 LA MESA, CA 91942
 Effective as of 01-SEP-22

PEAIRS, JAMES, MD†


Provider ID: N/A

 8851 CENTER DR STE 406
 LA MESA, CA 91942
 Effective as of 01-AUG-20


PERRY, ARTHUR, MD

Provider ID: N/A
 7339 EL CAJON BLVD STE J
 AND K
 LA MESA, CA 91942
 Effective as of 01-APR-23


PERRY, ARTHUR, MD

Provider ID: N/A
 7339 EL CAJON BLVD STE J
 AND K
 LA MESA, CA 91942
 Effective as of 01-APR-22


PRABHU, SUJATA, MD†

Provider ID: N/A
 7339 EL CAJON BLVD STE J
 AND K
 LA MESA, CA 91942
 Effective as of 01-MAR-22

PRABHU, SUJATA, MD†

Provider ID: N/A
 5565 GROSSMONT
 CENTER DR BLDG 3 STE
 551
 LA MESA, CA 91942
 Effective as of 01-DEC-20

PRABHU, SUJATA, MD†

Provider ID: N/A
 5565 GROSSMONT
 CENTER DR STE 3 BLDG 2
 LA MESA, CA 91942
 Effective as of 01-APR-22

PRABHU, SUJATA, MD†

Provider ID: N/A
 7339 EL CAJON BLVD STE J
 AND K
 LA MESA, CA 91942

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-SEP-22

PRABHU, SUJATA, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942

Effective as of 01-DEC-23

PRATT, STEVEN, MD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942

Effective as of 01-MAR-22

RAJSBAUM, MARTIN, MD†

Provider ID: N/A

8851 CENTER DR STE 406
LA MESA, CA 91942

Effective as of 01-JUL-22

SAMUEL, MICHAEL, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942

Effective as of 01-FEB-21

SAMUEL, MICHAEL, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942

Effective as of 01-MAR-21

SASSANI, PATRICK, MD

Provider ID: N/A

8851 CENTER DR STE 406
LA MESA, CA 91942

Effective as of 01-FEB-24

SCHER, BARRY, MD†

Provider ID: N/A

8851 CENTER DR STE 406

LA MESA, CA 91942

Effective as of 01-SEP-22

SKAF, AYHAM, MD†

Provider ID: N/A

8851 CENTER DR STE 406
LA MESA, CA 91942

Effective as of 01-SEP-22

SKAF, AYHAM, MD†

Provider ID: N/A

8851 CENTER DR STE 406
LA MESA, CA 91942

Effective as of 01-AUG-20

SKAF, AYHAM, MD†

Provider ID: N/A

8851 CENTER DR STE 406
LA MESA, CA 91942

Effective as of 01-JAN-21

ZABANEH, ALEXANDER, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 3
LA MESA, CA 91942

Effective as of 01-JAN-21

OPTOMETRIST

AOTO, KIM, OD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942

Effective as of 01-SEP-22

AOTO, KIM, OD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942

Effective as of 01-MAR-22

DEAN, MOENA, OD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942

Effective as of 01-MAR-22

DEAN, MOENA, OD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942

Effective as of 01-JAN-24

DYER, SHARON, OD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942

Effective as of 01-SEP-22

DYER, SHARON, OD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942

Effective as of 01-SEP-22

DYER, SHARON, OD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942

Effective as of 01-MAR-22

DYER, SHARON, OD†

Provider ID: N/A

7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942

Effective as of 01-SEP-22

HAN, SUL, OD†


Provider ID: N/A

7339 EL CAJON BLVD STE
J/K


**C1. Lista de proveedores de la red
Médico de atención especializada**

LA MESA, CA 91942
Effective as of 01-DEC-22


KHALIL, VADY, OD†

Provider ID: N/A
 7339 EL CAJON BLVD STE J-K
 LA MESA, CA 91942
 Effective as of 01-NOV-22


KHALIL, VADY, OD†

Provider ID: N/A
 7339 EL CAJON BLVD STE J-K
 LA MESA, CA 91942
 Effective as of 01-NOV-22


MARR, RYAN, OD

Provider ID: N/A
 7339 EL CAJON BLVD STE JK
 LA MESA, CA 91942
 Effective as of 01-JUL-24


MARR, RYAN, OD

Provider ID: N/A
 5565 GROSSMONT CENTER DR STE 551
 LA MESA, CA 91942
 Effective as of 01-JUL-24


TONNU, ANH, OD

Provider ID: N/A
 5565 GROSSMONT CENTER DR STE 551
 LA MESA, CA 91942
 Effective as of 01-AUG-24


TONNU, ANH, OD†

Provider ID: N/A
 7339 EL CAJON BLVD STE J AND K
 LA MESA, CA 91942
 Effective as of 01-MAR-22


VINH, JOHN, OD†

Provider ID: N/A
 7339 EL CAJON BLVD STE J AND K
 LA MESA, CA 91942
 Effective as of 01-MAR-22


VINH, JOHN, OD†

Provider ID: N/A
 5565 GROSSMONT CENTER DR STE 551
 LA MESA, CA 91942
 Effective as of 01-SEP-20


VINH, JOHN, OD†

Provider ID: N/A
 5565 GROSSMONT CENTER DR STE 551
 LA MESA, CA 91942
 Effective as of 01-JAN-21


ZVANUT, DONALD, OD

Provider ID: N/A
 5565 GROSSMONT CENTER DR BLDG 3 STE 551
 LA MESA, CA 91942
 Effective as of 01-AUG-24

ZVANUT, DONALD, OD†


Provider ID: N/A
 7339 EL CAJON BLVD STE J AND K
 LA MESA, CA 91942
 Effective as of 01-MAR-22

ZVANUT, DONALD, OD†


Provider ID: N/A
 7339 EL CAJON BLVD STE J AND K
 LA MESA, CA 91942
 Effective as of 01-AUG-22

OTOLARYNGOLOGY


BUSINO, ROWLEY, MD†

Provider ID: N/A
 5565 GROSSMONT CENTER DR BLDG 3 STE 101
 LA MESA, CA 91942
 Effective as of 01-APR-21


BUSINO, ROWLEY, MD†

Provider ID: N/A
 5565 GROSSMONT CENTER DR BLDG 3 STE 101
 LA MESA, CA 91942
 Effective as of 01-JAN-21


BUSINO, ROWLEY, MD†

Provider ID: N/A
 5565 GROSSMONT CENTER DR BLDG 3 STE 101
 LA MESA, CA 91942
 Effective as of 01-DEC-15


BUSINO, ROWLEY, MD†

Provider ID: N/A
 5565 GROSSMONT CENTER DR BLDG 3 STE 101
 LA MESA, CA 91942
 Effective as of 01-JAN-21

BUSINO, ROWLEY, MD†

Provider ID: N/A
 5565 GROSSMONT CENTER DR STE 101
 LA MESA, CA 91942
 Effective as of 01-JAN-21

BUSINO, ROWLEY, MD†

Provider ID: N/A
 5565 GROSSMONT CENTER DR BLDG 3 STE 101
 LA MESA, CA 91942
 Effective as of 01-JUL-22

BUSINO, ROWLEY, MD†

Provider ID: N/A
 5565 GROSSMONT

**C1. Lista de proveedores de la red
Médico de atención especializada**

CENTER DR BLDG 3 STE 101
LA MESA, CA 91942
Effective as of 01-SEP-22

MOLES, JEREMIAH, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942
Effective as of 01-NOV-22

MOLES, JEREMIAH, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942
Effective as of 01-SEP-22

MOLES, JEREMIAH, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942
Effective as of 01-JUL-22

MOLES, JEREMIAH, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942
Effective as of 01-JAN-21

MOLES, JEREMIAH, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942
Effective as of 01-JAN-21

MOLES, JEREMIAH, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942
Effective as of 01-DEC-15

MOLES, JEREMIAH, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942
Effective as of 01-APR-21

MOSHTAGHI, OMID, MD

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942
Teleservice

Effective as of 01-JUL-24

MOSHTAGHI, OMID, MD

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942
Teleservice

Effective as of 01-JUL-24

MOSHTAGHI, OMID, MD

Provider ID: N/A

5565 GROSSMONT
CENTER DR
LA MESA, CA 91942
Effective as of 01-JAN-24

MOSHTAGHI, OMID, MD

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942
Teleservice

Effective as of 01-OCT-23

PATSIAS, ALEXIS, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 101
LA MESA, CA 91942
Effective as of 01-MAY-21

PATSIAS, ALEXIS, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 101
LA MESA, CA 91942
Effective as of 01-JUN-24

PATSIAS, ALEXIS, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 101
LA MESA, CA 91942
Effective as of 01-JUN-20

PATSIAS, ALEXIS, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 101
LA MESA, CA 91942
Effective as of 01-JAN-21

PITZER, GEOFFREY, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942
Teleservice

Effective as of 01-JAN-21

PITZER, GEOFFREY, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942
Teleservice

Effective as of 01-JAN-21

PITZER, GEOFFREY, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942
Teleservice

Effective as of 01-AUG-16

C1. Lista de proveedores de la red Médico de atención especializada

PITZER, GEOFFREY, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Teleservice

Effective as of 01-JAN-21

PITZER, GEOFFREY, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Teleservice

Effective as of 01-NOV-22

PITZER, GEOFFREY, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Teleservice

Effective as of 01-APR-21

SAEZ, NEIL, MD

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 3
LA MESA, CA 91942

Effective as of 01-NOV-23

SAEZ, NEIL, MD

Provider ID: N/A

5565 GROSSMONT
CENTER DR
LA MESA, CA 91942

Effective as of 01-JAN-24

SAEZ, NEIL, MD

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Effective as of 01-JUL-24

SAEZ, NEIL, MD

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Effective as of 01-JUL-24

SAEZ, NEIL, MD

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Effective as of 01-FEB-24

SAID, MENA, MD

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Effective as of 01-JUL-24

SAID, MENA, MD

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 3-154
LA MESA, CA 91942

Effective as of 01-JUL-24

SAID, MENA, MD

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 3-101
LA MESA, CA 91942

Effective as of 01-JUL-24

SCHALCH LEPE, PAUL, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Effective as of 01-JUL-22

SCHALCH LEPE, PAUL, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 3
LA MESA, CA 91942

Effective as of 01-MAY-21

SCHALCH LEPE, PAUL, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 101
LA MESA, CA 91942

Teleservice

Effective as of 01-OCT-22

SCHALCH LEPE, PAUL, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 3
LA MESA, CA 91942

Effective as of 01-JAN-21

SKELTON, SEAN, DO†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Teleservice

Effective as of 01-SEP-22

SKELTON, SEAN, DO†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Teleservice

Effective as of 01-MAY-21

SKELTON, SEAN, DO†

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Teleservice

Effective as of 01-APR-21

PEDIATRICS

C1. Lista de proveedores de la red Médico de atención especializada

SHAHBAZ, MAJID, MD

Provider ID: N/A

8851 CENTER DR STE 408
LA MESA, CA 91942

Teleservice

Effective as of 01-MAR-18

PHYS MED/ REHAB PAIN MEDICINE

KATZEN, SETH, DO

Provider ID: N/A

8851 CENTER DR STE 601
LA MESA, CA 91942

Effective as of 01-MAY-23

PHYSICAL MEDICINE / REHABILITATION

KATZEN, SETH, DO

Provider ID: N/A

8851 CENTER DR STE 601
LA MESA, CA 91942

Effective as of 01-NOV-22

PHYSICIANS ASSISTANT

FERRARA, SAMANTHA, PA

Provider ID: N/A

7339 EL CAJON BLVD STE 1
LA MESA, CA 91942

Teleservice

Effective as of 01-JUL-23

GUTH, CARA, PA

Provider ID: N/A

8851 CENTER DR STE 601
LA MESA, CA 91942

Effective as of 01-JAN-24

HINKLE, CORINNE, PA

Provider ID: N/A

7339 EL CAJON BLVD STE 1

LA MESA, CA 91942

Teleservice

Effective as of 01-MAR-24

KHALEGHI, MANI, PA†

Provider ID: N/A

5360 JACKSON DR STE 100
LA MESA, CA 91942

Effective as of 01-JAN-21

MOORMAN, KRISTA, PA

Provider ID: N/A

7339 EL CAJON BLVD STE 1
LA MESA, CA 91942

Effective as of 01-MAY-22

PYLE, ALEXANDRA, PA

Provider ID: N/A

8851 CENTER DR STE 601
LA MESA, CA 91942

Effective as of 01-JAN-24

SMITH, KRISTIN, PA†

Provider ID: N/A

5555 GROSSMONT
CENTER DR
LA MESA, CA 91942

Effective as of 01-JAN-21

TAYLOR, RYAN, PA

Provider ID: N/A

8851 CENTER DR STE 601
LA MESA, CA 91942

Effective as of 01-JAN-24

WHITE, KYLE, PA

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Effective as of 01-MAY-23

WHITE, KYLE, PA

Provider ID: N/A

5565 GROSSMONT

CENTER DR STE 3

LA MESA, CA 91942

Teleservice

Effective as of 01-MAR-23

WHITE, KYLE, PA

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

Effective as of 01-NOV-23

PODIATRIST

CAINE, SAMUEL, DPM

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE
510
LA MESA, CA 91942

Teleservice

Effective as of 01-APR-24

CAINE, SAMUEL, DPM

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 510
LA MESA, CA 91942

Effective as of 01-JUL-24

CAINE, SAMUEL, DPM

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE
510
LA MESA, CA 91942

Teleservice

Effective as of 01-DEC-23

CAINE, SAMUEL, DPM

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE
510
LA MESA, CA 91942

C1. Lista de proveedores de la red Médico de atención especializada

Teleservice

Effective as of 01-DEC-23

COLLINS, MICHAEL, DPM†

Provider ID: N/A

8851 CENTER DR STE 601
LA MESA, CA 91942

Effective as of 01-AUG-23

COLLINS, MICHAEL, DPM†

Provider ID: N/A

8851 CENTER DR STE 601
LA MESA, CA 91942

Effective as of 01-JAN-21

COX, KEVIN, DPM

Provider ID: N/A

8851 CENTER DR STE 406
LA MESA, CA 91942

Effective as of 01-JUN-24

KRIGER, STEPHEN, DPM†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 510
LA MESA, CA 91942

Teleservice

Effective as of 01-JAN-22

NGUYEN, HAN, DPM

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 510
LA MESA, CA 91942

Effective as of 01-DEC-23

NGUYEN, HAN, DPM

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 510
LA MESA, CA 91942

Effective as of 01-JUN-23

NGUYEN, HAN, DPM

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 510
LA MESA, CA 91942

Effective as of 01-JUL-23

NGUYEN, HAN, DPM

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 510
LA MESA, CA 91942

Effective as of 01-JAN-24

NGUYEN, HAN, DPM

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 510
LA MESA, CA 91942

Effective as of 01-SEP-24

TSAI, GRACE, DPM

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE
510
LA MESA, CA 91942

Effective as of 01-SEP-23

TSAI, GRACE, DPM

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE
510
LA MESA, CA 91942

Effective as of 01-APR-23

TSAI, GRACE, DPM

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE
510
LA MESA, CA 91942

Effective as of 01-FEB-23

TSAI, GRACE, DPM

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 3 STE
510

LA MESA, CA 91942

Effective as of 01-AUG-24

XU, DIXON, DPM†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 510
LA MESA, CA 91942

Effective as of 01-AUG-24

XU, DIXON, DPM†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 510
LA MESA, CA 91942

Effective as of 01-MAR-24

XU, DIXON, DPM†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 510
LA MESA, CA 91942

Effective as of 01-SEP-22

PSYCHIATRY

MILLER, BRIAN, MD

Provider ID: N/A

5555 GROSSMONT
CENTER DR
LA MESA, CA 91942

Effective as of 01-JUL-23

MILLER, BRIAN, MD

Provider ID: N/A

5555 GROSSMONT
CENTER DR
LA MESA, CA 91942

Effective as of 01-JUL-23

PULMONARY DISEASES

AL-NASER, RAED, MD

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

5525 GROSSMONT
CENTER DR STE 609
LA MESA, CA 91942
Effective as of 01-AUG-23

POKALA, SATHYA, MD

Provider ID: N/A
8851 CENTER DR STE 304
LA MESA, CA 91942
Teleservice
Effective as of 01-JUN-24

RADIATION ONCOLOGY

BRUGGEMAN, ANDREW, MD

Provider ID: N/A
5555 GROSSMONT
CENTER DR
LA MESA, CA 91942
Effective as of 01-JAN-24

CARMONA, RUBEN, MD

Provider ID: N/A
5555 GROSSMONT
CENTER DR
LA MESA, CA 91942
Effective as of 01-JAN-24

COLEMAN, LORI, MD†

Provider ID: N/A
5555 GROSSMONT
CENTER DR
LA MESA, CA 91942
Effective as of 01-JAN-21

JABBARI, SIAVASH, MD†

Provider ID: N/A
5555 GROSSMONT
CENTER DR
LA MESA, CA 91942
Effective as of 01-OCT-22

PEJAVAR, SUNANDA, MD†

Provider ID: N/A

5555 GROSSMONT
CENTER DR
LA MESA, CA 91942
Effective as of 01-JAN-21

VOLPP, PAUL, MD†

Provider ID: N/A
5555 GROSSMONT
CENTER DR
LA MESA, CA 91942
Effective as of 01-JAN-21

RADIOLOGY DIAGNOSTIC

MOORE, BRIAN, MD†

Provider ID: N/A
8860 CENTER DR STE 100
LA MESA, CA 91942
Effective as of 01-JAN-21

VENKATESH, VIJAY, MD†

Provider ID: N/A
8860 CENTER DR STE 100
LA MESA, CA 91942
Effective as of 01-SEP-22

REGISTERED PHYSICAL THERAPIST

ALLOS, ALEXANDER, PT

Provider ID: N/A
8388 PARKWAY DR
LA MESA, CA 91942
Effective as of 01-NOV-23

CONCHA URDAY ZAA, JANNY, PT

Provider ID: N/A
5266 BALTIMORE DR
LA MESA, CA 91942
Effective as of 01-JAN-23

NGUYEN, STEVEN, PT

Provider ID: N/A
8388 PARKWAY DR

LA MESA, CA 91942
Effective as of 01-AUG-23

NGUYEN, STEVEN, PT

Provider ID: N/A
8388 PARKWAY DR
LA MESA, CA 91942
Effective as of 01-MAY-22

PAPA, AMY, PT

Provider ID: N/A
8388 PARKWAY DR
LA MESA, CA 91942
Effective as of 01-AUG-23

PAPA, AMY, PT

Provider ID: N/A
8388 PARKWAY DR
LA MESA, CA 91942
Effective as of 01-NOV-21

SAHATDJIAN, EVA, PT

Provider ID: N/A
8388 PARKWAY DR
LA MESA, CA 91942
Effective as of 01-AUG-23

SAHATDJIAN, EVA, PT

Provider ID: N/A
8388 PARKWAY DR
LA MESA, CA 91942
Effective as of 01-DEC-21

THOMAS, KAITLIN, PT

Provider ID: N/A
8388 PARKWAY DR
LA MESA, CA 91942
Effective as of 01-NOV-23

RHEUMATOLOGY

KOTHA, AKTHER, MD†

Provider ID: N/A
8860 CENTER DR STE 400
LA MESA, CA 91942

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-SEP-15

KOTHA, ROSHAN, MD†

Provider ID: N/A

8860 CENTER DR STE 400
LA MESA, CA 91942

Effective as of 01-AUG-20

KOTHA, AKTHER, MD†

Provider ID: N/A

8860 CENTER DR STE 400
LA MESA, CA 91942

Effective as of 01-DEC-23

KOTHA, AKTHER, MD†

Provider ID: N/A

8860 CENTER DR STE 400
LA MESA, CA 91942

Effective as of 01-JAN-21

KOTHA, ROSHAN, MD†

Provider ID: N/A

8860 CENTER DR STE 400
LA MESA, CA 91942

Effective as of 01-JAN-21

SURGERY GENERAL

DICKINSON, PHILLIP, MD†

Provider ID: N/A

8554 LA MESA BLVD
LA MESA, CA 91942

Effective as of 01-JAN-24

DICKINSON, PHILLIP, MD†

Provider ID: N/A

8554 LA MESA BLVD
LA MESA, CA 91942

Effective as of 01-JUL-22

DICKINSON, PHILLIP, MD†

Provider ID: N/A

8554 LA MESA BLVD
LA MESA, CA 91942

Effective as of 01-JAN-14

KHARAZI, ALEXANDRA, MD

Provider ID: N/A

8851 CENTER DR STE 500
LA MESA, CA 91942

Effective as of 01-MAY-23

SURGERY HAND

RICKARDS, ENASS, MD†

Provider ID: N/A

8851 CENTER DR STE 601
LA MESA, CA 91942

Effective as of 01-JAN-21

SURGERY

NEUROLOGICAL

KURESHI, SOHAIB, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 210
LA MESA, CA 91942

Effective as of 01-JAN-21

OSTRUP, RICHARD, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 210
LA MESA, CA 91942

Effective as of 01-JAN-21

OSTRUP, RICHARD, MD†

Provider ID: N/A

5565 GROSSMONT
CENTER DR STE 210
LA MESA, CA 91942

Effective as of 01-MAR-21

ZACHARIAH, MARCUS, MD

Provider ID: N/A

5565 GROSSMONT
CENTER DR BLDG 1 STE 210
LA MESA, CA 91942

Effective as of 01-MAY-23

SURGERY ORTHOPEDIC

HENDERSON, RODNEY, MD

Provider ID: N/A

8851 CENTER DR STE 601
LA MESA, CA 91942

Effective as of 01-JAN-14

KIMBALL, MICHAEL, MD†

Provider ID: N/A

8851 CENTER DR STE 601
LA MESA, CA 91942

Effective as of 01-JAN-21

KIMBALL, MICHAEL, MD†

Provider ID: N/A

8851 CENTER DR STE 601
LA MESA, CA 91942

Effective as of 01-JAN-21

KIMBALL, MICHAEL, MD†

Provider ID: N/A

8851 CENTER DR STE 601
LA MESA, CA 91942

Effective as of 01-JUL-23

KIMBALL, MICHAEL, MD†

Provider ID: N/A

8851 CENTER DR STE 601
LA MESA, CA 91942

Effective as of 01-OCT-21

KIMBALL, MICHAEL, MD†

Provider ID: N/A

8851 CENTER DR STE 601
LA MESA, CA 91942

Effective as of 01-MAR-16

RICKARDS, ENASS, MD†

Provider ID: N/A

8851 CENTER DR STE 601
LA MESA, CA 91942

Effective as of 01-SEP-22

C1. Lista de proveedores de la red Médico de atención especializada

RICKARDS, ENASS, MD†

Provider ID: N/A

☒ 8851 CENTER DR STE 601
LA MESA, CA 91942
Effective as of 01-JUL-23

RICKARDS, ENASS, MD†

Provider ID: N/A

☒ 8851 CENTER DR STE 601
LA MESA, CA 91942
Effective as of 01-APR-23

RICKARDS, ENASS, MD†

Provider ID: N/A

☒ 8851 CENTER DR STE 601
LA MESA, CA 91942
Effective as of 01-JAN-21

TAYYAB, NEIL, MD

Provider ID: N/A

☒ 8851 CENTER DR STE 601
LA MESA, CA 91942
Effective as of 01-AUG-23

SURGERY THORACIC

KOUMJIAN, MICHAEL, MD†

Provider ID: N/A

☒ 5525 GROSSMONT
CENTER DR STE 609
LA MESA, CA 91942
Effective as of 01-JAN-21

KOUMJIAN, MICHAEL, MD†

Provider ID: N/A

☒ 5525 GROSSMONT
CENTER DR STE 609
LA MESA, CA 91942
Effective as of 01-FEB-07

UROLOGY

BUTLER, PHILIP, MD

Provider ID: N/A

☒ 8851 CENTER DR STE 501

LA MESA, CA 91942
Effective as of 01-JAN-24

COHEN, EDWARD, MD

Provider ID: N/A

☒ 8851 CENTER DR STE 501
LA MESA, CA 91942
Effective as of 01-JAN-24

DICKS, BRIAN, MD

Provider ID: N/A

☒ 8851 CENTER DR STE 501
LA MESA, CA 91942
Effective as of 01-JAN-24

JAVIER-DESLOGES, JUAN, MD†

Provider ID: N/A

☒ 8851 CENTER DR STE 501
LA MESA, CA 91942
Teleservice
Effective as of 01-DEC-22

JAVIER-DESLOGES, JUAN, MD†

Provider ID: N/A

☒ 8851 CENTER DR STE 501
LA MESA, CA 91942
Teleservice
Effective as of 01-JUL-23

JAVIER-DESLOGES, JUAN, MD†

Provider ID: N/A

☒ 8851 CENTER DR STE 501
LA MESA, CA 91942
Teleservice
Effective as of 01-JAN-23

JUMA, SAAD, MD

Provider ID: N/A

☒ 8851 CENTER DR STE 501
LA MESA, CA 91942
Effective as of 01-JAN-24

KEARSE, WILFRED, MD†

Provider ID: N/A

☒ 8851 CENTER DR STE 501
LA MESA, CA 91942
Effective as of 01-DEC-21

NEUSTEIN, PAUL, MD

Provider ID: N/A

☒ 8851 CENTER DR STE 501
LA MESA, CA 91942
Effective as of 01-JAN-24

NGUYEN, HUNG, MD

Provider ID: N/A

☒ 8851 CENTER DR STE 501
LA MESA, CA 91942
Effective as of 01-JAN-24

PE, MARK-RALLY, MD

Provider ID: N/A

☒ 8851 CENTER DR STE 501
LA MESA, CA 91942
Effective as of 01-JAN-24

ROBERTS, JAMES, MD

Provider ID: N/A

☒ 8851 CENTER DR STE 501
LA MESA, CA 91942
Effective as of 01-JAN-24

SALEM, CAROL, MD

Provider ID: N/A

☒ 8851 CENTER DR STE 501
LA MESA, CA 91942
Effective as of 01-JAN-24

SALMASI, AMIRALI, MD†

Provider ID: N/A

☒ 8851 CENTER DR STE 501
LA MESA, CA 91942
Effective as of 01-JUL-23

VAPNEK, EVAN, MD

Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

8851 CENTER DR STE 501
LA MESA, CA 91942
Effective as of 01-JAN-24

CARDIAC ELECTROPHYSIOLOGY

MITIKU, TEFERI, MD†
Provider ID: N/A

333 CORPORATE DR STE
102
LADERA RANCH, CA 92694
Effective as of 01-FEB-22

MITIKU, TEFERI, MD†
Provider ID: N/A

333 CORPORATE DR STE
102
LADERA RANCH, CA 92694
Effective as of 01-FEB-22

CARDIOVASCULAR DISEASE

NGUYEN, HUY, MD†
Provider ID: N/A

333 CORPORATE DR STE
102
LADERA RANCH, CA 92694
Effective as of 01-JAN-20

WERTMAN, BRETT, MD
Provider ID: N/A

333 CORPORATE DR STE
102
LADERA RANCH, CA 92694
Effective as of 01-JAN-21

WERTMAN, BRETT, MD
Provider ID: N/A

333 CORPORATE DR STE
102
LADERA RANCH, CA 92694
Effective as of 01-JAN-20

CERTIFIED NURSE PRACTITIONER

PASICOLAN, MARI, NP
Provider ID: N/A

25612 CROWN VALLEY
PKWY
LADERA RANCH, CA 92694
Effective as of 01-DEC-22

PASICOLAN, MARI, NP
Provider ID: N/A

25612 CROWN VALLEY
PKWY
LADERA RANCH, CA 92694
Effective as of 01-DEC-22

PASICOLAN, MARI, NP
Provider ID: N/A

25612 CROWN VALLEY
PKWY
LADERA RANCH, CA 92694
Effective as of 01-DEC-22

DERMATOLOGY

BINGHAM, LUCAS, MD
Provider ID: N/A

600 CORPORATE DR STE
100
LADERA RANCH, CA 92694
Effective as of 01-DEC-18

BINGHAM, LUCAS, MD
Provider ID: N/A

600 CORPORATE DR STE
100
LADERA RANCH, CA 92694
Effective as of 01-DEC-18

BINGHAM, LUCAS, MD
Provider ID: N/A

600 CORPORATE DR STE
100
LADERA RANCH, CA 92694

Effective as of 01-MAY-22

LANDER, JEFFREY, MD†
Provider ID: N/A

600 CORPORATE DR STE
100
LADERA RANCH, CA 92694
Effective as of 01-MAY-20

LANDER, JEFFREY, MD†
Provider ID: N/A

600 CORPORATE DR STE
100
LADERA RANCH, CA 92694
Effective as of 01-MAY-20

LANDER, JEFFREY, MD†
Provider ID: N/A

600 CORPORATE DR STE
100
LADERA RANCH, CA 92694
Effective as of 01-FEB-20

LANDER, JEFFREY, MD†
Provider ID: N/A

600 CORPORATE DR STE
100
LADERA RANCH, CA 92694
Effective as of 01-MAY-20

LANDER, JEFFREY, MD†
Provider ID: N/A

600 CORPORATE DR STE
100
LADERA RANCH, CA 92694
Effective as of 01-OCT-23

PETERSON, SAMUEL, MD†
Provider ID: N/A

600 CORPORATE DR STE
100
LADERA RANCH, CA 92694
Effective as of 01-DEC-21

PETERSON, SAMUEL, MD†

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

600 CORPORATE DR STE
100
LADERA RANCH, CA 92694
Effective as of 01-MAY-22

EMERGENCY MEDICINE

KENNEDY, GREGORY, MD†

Provider ID: N/A

777 CORPORATE DR STE
250
LADERA RANCH, CA 92694
Effective as of 01-MAY-24

TIMBOE, JENNA, MD

Provider ID: N/A

777 CORPORATE DR
LADERA RANCH, CA 92694
Effective as of 01-OCT-23

WAINWRIGHT, MITCHELL, MD

Provider ID: N/A

800 CORPORATE DR STE
100
LADERA RANCH, CA 92694
Effective as of 01-SEP-18

INTERVENTIONAL CARDIOLOGY

NGUYEN, HUY, MD†

Provider ID: N/A

333 CORPORATE DR STE
102
LADERA RANCH, CA 92694
Effective as of 01-JAN-21

NGUYEN, HUY, MD†

Provider ID: N/A

333 CORPORATE DR STE
102
LADERA RANCH, CA 92694
Effective as of 01-DEC-17

NGUYEN, HUY, MD†

Provider ID: N/A

333 CORPORATE DR STE
102
LADERA RANCH, CA 92694
Effective as of 01-DEC-17

WERTMAN, BRETT, MD

Provider ID: N/A

333 CORPORATE DR STE
100
LADERA RANCH, CA 92694
Effective as of 01-DEC-15

WERTMAN, BRETT, MD

Provider ID: N/A

333 CORPORATE DR STE
100
LADERA RANCH, CA 92694
Effective as of 01-JAN-16

NEUROLOGY

PENG, YING, MD†

Provider ID: N/A

333 CORPORATE DR STE
110
LADERA RANCH, CA 92694
Effective as of 01-JUN-22

NEUROLOGY CHILD

PENG, YING, MD†

Provider ID: N/A

333 CORPORATE DR STE
110
LADERA RANCH, CA 92694
Effective as of 01-OCT-19

PENG, YING, MD†

Provider ID: N/A

333 CORPORATE DR STE
110
LADERA RANCH, CA 92694
Effective as of 01-OCT-19

PENG, YING, MD†

Provider ID: N/A

333 CORPORATE DR STE
110
LADERA RANCH, CA 92694
Effective as of 01-DEC-20

PENG, YING, MD†

Provider ID: N/A

333 CORPORATE DR STE
110
LADERA RANCH, CA 92694
Effective as of 01-JUN-24

PENG, YING, MD†

Provider ID: N/A

333 CORPORATE DR STE
110
LADERA RANCH, CA 92694
Effective as of 01-JUL-21

PENG, YING, MD†

Provider ID: N/A

333 CORPORATE DR STE
110
LADERA RANCH, CA 92694
Effective as of 01-JUL-21

OTOLARYNGOLOGY

KAUFMAN, AVRUM, DO

Provider ID: N/A

800 CORPORATE DR STE
290
LADERA RANCH, CA 92694
Effective as of 01-JAN-18

PEDIATRICS

DWINELL, LAUREN, MD

Provider ID: N/A

777 CORPORATE DR STE
250
LADERA RANCH, CA 92694

**C1. Lista de proveedores de la red
Médico de atención especializada**

Effective as of 01-JUL-23

PHYSICIANS ASSISTANT

RUMMEL, LAURA, PA†

Provider ID: N/A

333 CORPORATE DR STE
100
LADERA RANCH, CA 92694

Effective as of 01-DEC-22

RUMMEL, LAURA, PA†

Provider ID: N/A

333 CORPORATE DR STE
100
LADERA RANCH, CA 92694

Effective as of 01-JUN-24

PODIATRIST

RODRIGUEZ, NITZA, DPM†

Provider ID: N/A

333 CORPORATE DR STE
230
LADERA RANCH, CA 92694

Effective as of 01-SEP-19

RODRIGUEZ, NITZA, DPM†

Provider ID: N/A

333 CORPORATE DR STE
230
LADERA RANCH, CA 92694

Effective as of 01-NOV-19

RODRIGUEZ, NITZA, DPM†

Provider ID: N/A

333 CORPORATE DR STE
230
LADERA RANCH, CA 92694

Effective as of 01-NOV-19

SPENCER, ROBERT, DPM†

Provider ID: N/A

333 CORPORATE DR STE
230

LADERA RANCH, CA 92694

Effective as of 01-SEP-19

SPENCER, ROBERT, DPM†

Provider ID: N/A

333 CORPORATE DR STE
230
LADERA RANCH, CA 92694

Effective as of 01-SEP-19

SPENCER, ROBERT, DPM†

Provider ID: N/A

333 CORPORATE DR STE
230
LADERA RANCH, CA 92694

Effective as of 01-MAY-24

SPENCER, ROBERT, DPM†

Provider ID: N/A

333 CORPORATE DR STE
230
LADERA RANCH, CA 92694

Effective as of 01-SEP-19

PSYCHIATRY

BORECKY, ADAM, MD

Provider ID: N/A

333 CORPORATE DR STE
260
LADERA RANCH, CA 92694

Effective as of 01-JAN-24

BORECKY, ADAM, MD

Provider ID: N/A

333 CORPORATE DR STE
260
LADERA RANCH, CA 92694

Effective as of 01-JAN-24

KINBACK, KEVIN, MD

Provider ID: N/A

333 CORPORATE DR STE
260
LADERA RANCH, CA 92694

Effective as of 01-JAN-19

KINBACK, KEVIN, MD

Provider ID: N/A

333 CORPORATE DR STE
260
LADERA RANCH, CA 92694

Effective as of 01-JAN-19

KINBACK, KEVIN, MD

Provider ID: N/A

333 CORPORATE DR STE
260
LADERA RANCH, CA 92694

Effective as of 01-JAN-19

KINBACK, KEVIN, MD

Provider ID: N/A

333 CORPORATE DR STE
260
LADERA RANCH, CA 92694

Effective as of 01-JAN-19

LAW, LINDSEY, MD

Provider ID: N/A

333 CORPORATE DR STE
260
LADERA RANCH, CA 92694

Effective as of 01-DEC-20

LAW, LINDSEY, MD

Provider ID: N/A

333 CORPORATE DR STE
260
LADERA RANCH, CA 92694

Effective as of 01-DEC-20

LAW, LINDSEY, MD

Provider ID: N/A

333 CORPORATE DR STE
260
LADERA RANCH, CA 92694

Effective as of 01-DEC-20

LAW, LINDSEY, MD

CI. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

333 CORPORATE DR STE
260
LADERA RANCH, CA 92694
Effective as of 01-DEC-20

PSYCHOLOGIST

OKONSKI, MICHELE, PSYD

Provider ID: N/A

333 CORPORATE DR STE
260
LADERA RANCH, CA 92694
Effective as of 01-JUN-19

OKONSKI, MICHELE, PSYD

Provider ID: N/A

333 CORPORATE DR STE
260
LADERA RANCH, CA 92694
Effective as of 01-JUN-19

OKONSKI, MICHELE, PSYD

Provider ID: N/A

333 CORPORATE DR STE
260
LADERA RANCH, CA 92694
Effective as of 01-JUN-19

OKONSKI, MICHELE, PSYD

Provider ID: N/A

333 CORPORATE DR STE
260
LADERA RANCH, CA 92694
Effective as of 01-JUN-19

SURGERY GENERAL

QURESHI, ALI, MD

Provider ID: N/A

800 CORPORATE DR STE
280
LADERA RANCH, CA 92694
Effective as of 01-FEB-24

QURESHI, ALI, MD

Provider ID: N/A

800 CORPORATE DR STE
280
LADERA RANCH, CA 92694
Effective as of 01-FEB-24

SURGERY PLASTIC

DOEZIE, ALLEN, MD†

Provider ID: N/A

777 CORPORATE DR STE 110
LADERA RANCH, CA 92694
Effective as of 01-SEP-10

DOEZIE, ALLEN, MD†

Provider ID: N/A

777 CORPORATE DR STE 110
LADERA RANCH, CA 92694
Effective as of 01-SEP-10

CERTIFIED NURSE PRACTITIONER

BINAVI, HOWNAZ, NP†

Provider ID: N/A

30201 GOLDEN LANTERN
STE B
LAGUNA BEACH, CA 92677
Effective as of 01-JUL-21

INFECTIOUS DISEASE

HAMIDI ASL, KAMRAN, MD

Provider ID: N/A

31852 COAST HWY STE 302
LAGUNA BEACH, CA 92651
Effective as of 01-JAN-18

OPHTHALMOLOGY

HENRICK, ANDREW, MD

Provider ID: N/A

31852 COAST HWY STE 101
LAGUNA BEACH, CA 92651

Effective as of 01-OCT-23

HENRICK, ANDREW, MD

Provider ID: N/A

31852 COAST HWY
LAGUNA BEACH, CA 92651
Effective as of 01-JAN-23

JOSON, PETER, MD

Provider ID: N/A

25200 LA PAZ RD STE 100
LAGUNA BEACH, CA 92653
Effective as of 01-JUL-24

PRENDIVILLE, PAUL, MD

Provider ID: N/A

31852 COAST HWY STE 101
LAGUNA BEACH, CA 92651
Effective as of 01-OCT-23

PRENDIVILLE, PAUL, MD

Provider ID: N/A

31852 COAST HWY STE 101
LAGUNA BEACH, CA 92651
Effective as of 01-JAN-23

SPANGGORD, HOLLY, MD†

Provider ID: N/A

31852 COAST HWY STE 101
LAGUNA BEACH, CA 92651
Effective as of 01-JAN-19

SPANGGORD, HOLLY, MD†

Provider ID: N/A

31852 COAST HWY STE 101
LAGUNA BEACH, CA 92651
Effective as of 01-OCT-23

PEDIATRIC CRITICAL CARE MEDICINE

REDA, ZACHARIA, MD†

Provider ID: N/A

31862 COAST HWY STE 302
LAGUNA BEACH, CA 92651

**C1. Lista de proveedores de la red
Médico de atención especializada**

Effective as of 01-OCT-23

***PEDIATRIC
PULMONOLOGY***

REDA, ZACHARIA, MD†

Provider ID: N/A

31862 COAST HWY STE 203
LAGUNA BEACH, CA 92651

Effective as of 01-JUN-22

REDA, ZACHARIA, MD†

Provider ID: N/A

31862 COAST HWY STE 203
LAGUNA BEACH, CA 92651

Effective as of 01-JUN-22

REDA, ZACHARIA, MD†

Provider ID: N/A

31862 COAST HWY STE 203
LAGUNA BEACH, CA 92651

Effective as of 01-JUN-22

PODIATRIST

YETTER, MARCUS, DPM†

Provider ID: N/A

31852 COAST HWY STE 105
LAGUNA BEACH, CA 92651

Effective as of 01-MAR-20

YETTER, MARCUS, DPM†

Provider ID: N/A

31852 COAST HWY STE 105
LAGUNA BEACH, CA 92651

Effective as of 01-JUL-19

YETTER, MARCUS, DPM†

Provider ID: N/A

31852 COAST HWY STE 105
LAGUNA BEACH, CA 92651

Effective as of 01-MAR-20

PULMONARY DISEASES

SHAHINIAN, GEORGE, MD†

Provider ID: N/A

31852 COAST HWY STE 201
LAGUNA BEACH, CA 92651

Effective as of 01-NOV-23

SHAHINIAN, GEORGE, MD†

Provider ID: N/A

31852 COAST HWY STE 201
LAGUNA BEACH, CA 92651

Effective as of 01-JUL-23

SHAHINIAN, GEORGE, MD†

Provider ID: N/A

31852 COAST HWY STE 201
LAGUNA BEACH, CA 92651

Effective as of 01-JAN-15

SURGERY GENERAL

CHANG, STEVEN, MD

Provider ID: N/A

31862 COAST HWY STE 201
LAGUNA BEACH, CA 92651

Effective as of 01-SEP-13

CHANG, STEVEN, MD

Provider ID: N/A

31862 COAST HWY STE 201
LAGUNA BEACH, CA 92651

Effective as of 01-DEC-11

CHANG, STEVEN, MD

Provider ID: N/A

31862 COAST HWY STE 201
LAGUNA BEACH, CA 92651

Effective as of 01-APR-12

CHANG, STEVEN, MD

Provider ID: N/A

31862 COAST HWY STE 201
LAGUNA BEACH, CA 92651

Effective as of 01-JAN-18

COCCIA, MICHAEL, MD

Provider ID: N/A

31862 COAST HWY STE 201
LAGUNA BEACH, CA 92651

Effective as of 01-JAN-18

COCCIA, MICHAEL, MD

Provider ID: N/A

31862 COAST HWY STE 201
LAGUNA BEACH, CA 92651

Effective as of 01-NOV-14

COCCIA, MICHAEL, MD

Provider ID: N/A

31862 COAST HWY STE 201
LAGUNA BEACH, CA 92651

Effective as of 01-APR-12

SURGERY ORTHOPEDIC

ABDOLLAHI, KARIM, MD

Provider ID: N/A

31862 COAST HWY STE 400
LAGUNA BEACH, CA 92651

Effective as of 01-SEP-10

ABDOLLAHI, KARIM, MD

Provider ID: N/A

31862 COAST HWY STE 400
LAGUNA BEACH, CA 92651

Effective as of 01-NOV-14

ABDOLLAHI, KARIM, MD

Provider ID: N/A

31862 COAST HWY STE 400
LAGUNA BEACH, CA 92651

Effective as of 01-JAN-18

ASHKENAZE, DAVID, MD†

Provider ID: N/A

31862 COAST HWY STE 400
LAGUNA BEACH, CA 92651

Effective as of 01-JAN-18

ASHKENAZE, DAVID, MD†

Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

31862 COAST HWY STE 400 LAGUNA HILLS, CA 92653
LAGUNA BEACH, CA 92651 Effective as of 01-SEP-20
Effective as of 01-OCT-13

ASHKENAZE, DAVID, MD†

Provider ID: N/A

31862 COAST HWY STE 400 LAGUNA HILLS, CA 92653
LAGUNA BEACH, CA 92651 Effective as of 01-SEP-20
Effective as of 01-OCT-13

GILLMAN, MICHAEL, MD

Provider ID: N/A

31862 COAST HWY STE 400 LAGUNA HILLS, CA 92653
LAGUNA BEACH, CA 92651 Effective as of 01-SEP-20
Effective as of 01-JAN-18

GILLMAN, MICHAEL, MD

Provider ID: N/A

31862 COAST HWY STE 400 LAGUNA HILLS, CA 92653
LAGUNA BEACH, CA 92651 Effective as of 01-DEC-21
Effective as of 01-APR-16

GILLMAN, MICHAEL, MD

Provider ID: N/A

31862 COAST HWY STE 400 LAGUNA HILLS, CA 92653
LAGUNA BEACH, CA 92651 Effective as of 01-AUG-17
Effective as of 01-NOV-14

GILLMAN, MICHAEL, MD

Provider ID: N/A

31862 COAST HWY STE 400 LAGUNA HILLS, CA 92653
LAGUNA BEACH, CA 92651 Effective as of 01-FEB-22
Effective as of 01-SEP-10

ALLERGY IMMUNOLOGY

LIAO, OTTO, MD†

Provider ID: N/A

25401 CABOT RD STE 101 LAGUNA HILLS, CA 92653
LAGUNA HILLS, CA 92653 Effective as of 01-JAN-20
Effective as of 01-OCT-23

LIAO, OTTO, MD†

Provider ID: N/A

25401 CABOT RD STE 101

LAGUNA HILLS, CA 92653
Effective as of 01-SEP-20

LIAO, OTTO, MD†

Provider ID: N/A

25401 CABOT RD STE 101 LAGUNA HILLS, CA 92653
LAGUNA HILLS, CA 92653 Effective as of 01-SEP-20
Effective as of 01-SEP-20

LIAO, OTTO, MD†

Provider ID: N/A

25401 CABOT RD STE 101 LAGUNA HILLS, CA 92653
LAGUNA HILLS, CA 92653 Effective as of 01-SEP-20
Effective as of 01-SEP-20

LIAO, OTTO, MD†

Provider ID: N/A

25401 CABOT RD STE 101 LAGUNA HILLS, CA 92653
LAGUNA HILLS, CA 92653 Effective as of 01-DEC-21
Effective as of 01-DEC-21

LIAO, OTTO, MD†

Provider ID: N/A

25401 CABOT RD STE 101 LAGUNA HILLS, CA 92653
LAGUNA HILLS, CA 92653 Effective as of 01-AUG-17
Effective as of 01-AUG-17

LIAO, OTTO, MD†

Provider ID: N/A

25401 CABOT RD STE 101 LAGUNA HILLS, CA 92653
LAGUNA HILLS, CA 92653 Effective as of 01-FEB-22
Effective as of 01-FEB-22

LIAO, OTTO, MD†

Provider ID: N/A

25401 CABOT RD STE 101 LAGUNA HILLS, CA 92653
LAGUNA HILLS, CA 92653 Effective as of 01-JAN-20
Effective as of 01-JAN-20

LIAO, OTTO, MD†

Provider ID: N/A

25401 CABOT RD STE 101 LAGUNA HILLS, CA 92653
LAGUNA HILLS, CA 92653 Effective as of 01-JAN-17
Effective as of 01-JAN-17

ANESTHESIOLOGY

ALIKHANI, SHAHRIAR, MD†

Provider ID: N/A

23025 MILL CREEK DR LAGUNA HILLS, CA 92653
LAGUNA HILLS, CA 92653 Effective as of 01-JAN-20
Effective as of 01-JAN-20

BARNHILL, JOSHUA, MD

Provider ID: N/A

23521 PASEO DE VALENCIA STE 204 LAGUNA HILLS, CA 92653
LAGUNA HILLS, CA 92653 Effective as of 01-FEB-24
Effective as of 01-FEB-24

BARNHILL, JOSHUA, MD

Provider ID: N/A

23521 PASEO DE VALENCIA STE 204 LAGUNA HILLS, CA 92653
LAGUNA HILLS, CA 92653 Effective as of 01-FEB-24
Effective as of 01-FEB-24

GERAYLI, AFSHIN, MD†

Provider ID: N/A

24953 PASEO DE VALENCIA STE 5A LAGUNA HILLS, CA 92653
LAGUNA HILLS, CA 92653 Effective as of 01-AUG-22
Effective as of 01-AUG-22

GERAYLI, AFSHIN, MD†

Provider ID: N/A

24953 PASEO DE VALENCIA STE 5A LAGUNA HILLS, CA 92653
LAGUNA HILLS, CA 92653 Effective as of 01-AUG-22
Effective as of 01-AUG-22

GERAYLI, AFSHIN, MD†

Provider ID: N/A

24953 PASEO DE VALENCIA STE 5A LAGUNA HILLS, CA 92653
LAGUNA HILLS, CA 92653 Effective as of 01-JAN-18
Effective as of 01-JAN-18

HO, ALAN, MD†

Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

24953 PASEO DE
VALENCIA STE 7A
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-14

HO, ALAN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

ANESTHESIOLOGY PAIN MANAGEMENT

ALSHARIF, KAIS, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-18

ALSHARIF, KAIS, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

GERAYLI, AFSHIN, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

GERAYLI, AFSHIN, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

GERAYLI, AFSHIN, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

GERAYLI, AFSHIN, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

HARRIS, MATTHEW, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

HARRIS, MATTHEW, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

HARRIS, MATTHEW, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-15

HARRIS, MATTHEW, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

HARRIS, MATTHEW, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653

Effective as of 01-APR-21

HARRIS, MATTHEW, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-APR-21

HO, ALAN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653
Effective as of 01-APR-22

HO, ALAN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653
Effective as of 01-APR-22

HO, ALAN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653
Effective as of 01-APR-22

HO, ALAN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653
Effective as of 01-APR-22

HO, ALAN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653
Effective as of 01-APR-22

HO, ALAN, MD†

**C1. Lista de proveedores de la red
Médico de atención especializada**

Provider ID: N/A

24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653
Effective as of 01-APR-22

HO, ALAN, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 7A
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-19

HO, ALAN, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 7A
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-17

KUO, DENNIS, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-19

KUO, DENNIS, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-21

KUO, DENNIS, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-21

MESSIHA, ANDREW, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 204

LAGUNA HILLS, CA 92653
Effective as of 01-OCT-22

MOUSAVI, SHAHRYAR, MD

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-20

MOUSAVI, SHAHRYAR, MD

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-22

MOUSAVI, SHAHRYAR, MD

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

MOUSAVI, SHAHRYAR, MD

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

MOUSAVI, SHAHRYAR, MD

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-16

MOUSAVI, SHAHRYAR, MD

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-16

MOUSAVI, SHAHRYAR, MD

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-16

POURADIB, AMIR, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-21

POURADIB, AMIR, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

POURADIB, AMIR, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-18

SHAHBAZIAN, MICHAEL, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-16

SHAHBAZIAN, MICHAEL, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

SHAHBAZIAN, MICHAEL, MD†

Provider ID: N/A

24953 PASEO DE

C1. Lista de proveedores de la red Médico de atención especializada

VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-20

SHAHBAZIAN, MICHAEL, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

SHAHBAZIAN, MICHAEL, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-22

SHAHBAZIAN, MICHAEL, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

AUDIOLOGIST

NIAVARANY, PIRAYEH, AuD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 370
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

NIAVARANY, PIRAYEH, AuD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 370
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

CARDIAC

ELECTROPHYSIOLOGY

DRURY, PAUL, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-24

DRURY, PAUL, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-24

GUJRAL, INDERPAL, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 30A
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

GUJRAL, INDERPAL, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 30A
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

SARCON, ANNAHITA, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

SARCON, ANNAHITA, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

CARDIOVASCULAR DISEASE

ARD, SCOTT, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-JAN-24

ARD, SCOTT, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-JUL-24

ARD, SCOTT, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-JUN-24

ARD, SCOTT, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-SEP-23

ARD, SCOTT, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-SEP-23

ARD, SCOTT, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

**C1. Lista de proveedores de la red
Médico de atención especializada**

Teleservice
Effective as of 01-AUG-23

ARD, SCOTT, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Teleservice
Effective as of 01-AUG-23

ARD, SCOTT, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Teleservice
Effective as of 01-SEP-23

ARD, SCOTT, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Teleservice
Effective as of 01-JUN-24

ARD, SCOTT, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Teleservice
Effective as of 01-JUN-24

ARD, SCOTT, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Teleservice
Effective as of 01-JUN-24

ARD, SCOTT, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Teleservice
Effective as of 01-JUN-24

ARD, SCOTT, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Teleservice
Effective as of 01-JUN-24

BAHADORANI, JOHN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 550
LAGUNA HILLS, CA 92653

Effective as of 01-JUN-24

CHEN, CHENG-HAN, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-MAY-24

CHEN, CHENG-HAN, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

CHEN, CHENG-HAN, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

DRURY, PAUL, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

DRURY, PAUL, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-19

DRURY, PAUL, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

FEINER, JEFFREY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 550
LAGUNA HILLS, CA 92653

Effective as of 01-MAY-12

GIM, RONALD, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 550
LAGUNA HILLS, CA 92653

Effective as of 01-MAY-12

GUJRAL, INDERPAL, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 30A
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-17

KONUGRES, GEORGE, DO†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

**C1. Lista de proveedores de la red
Médico de atención especializada**

Effective as of 01-JAN-24	Provider ID: N/A	LAGUNA HILLS, CA 92653
KONUGRES, GEORGE, DO†	 24411 HEALTH CENTER DR STE 550	Effective as of 01-APR-20
Provider ID: N/A	LAGUNA HILLS, CA 92653	PATEL, MILAN, MD†
 24022 CALLE DE LA PLATA STE 500	Effective as of 01-MAY-12	Provider ID: N/A
LAGUNA HILLS, CA 92653	LE, DAN, MD†	 24022 CALLE DE LA PLATA STE 500
Effective as of 01-JAN-24	Provider ID: N/A	LAGUNA HILLS, CA 92653
KONUGRES, GEORGE, DO†	 24022 CALLE DE LA PLATA STE 500	Effective as of 01-APR-19
Provider ID: N/A	LAGUNA HILLS, CA 92653	PATEL, MILAN, MD†
 24022 CALLE DE LA PLATA STE 500	Effective as of 01-FEB-23	Provider ID: N/A
LAGUNA HILLS, CA 92653	LE, DAN, MD†	 24022 CALLE DE LA PLATA STE 500
Effective as of 01-JAN-23	Provider ID: N/A	LAGUNA HILLS, CA 92653
KONUGRES, GEORGE, DO†	 24022 CALLE DE LA PLATA STE 500	Effective as of 01-SEP-19
Provider ID: N/A	LAGUNA HILLS, CA 92653	ROSANIO, SALVATORE, MD
 24022 CALLE DE LA PLATA STE 500	Effective as of 01-JAN-23	Provider ID: N/A
LAGUNA HILLS, CA 92653	LE, DAN, MD†	 24022 CALLE DE LA PLATA STE 500
Effective as of 01-FEB-23	Provider ID: N/A	LAGUNA HILLS, CA 92653
KONUGRES, GEORGE, DO†	 24022 CALLE DE LA PLATA STE 500	Teleservice
Provider ID: N/A	LAGUNA HILLS, CA 92653	Effective as of 01-SEP-23
 24022 CALLE DE LA PLATA STE 500	Effective as of 01-DEC-21	ROSANIO, SALVATORE, MD
LAGUNA HILLS, CA 92653	LE, DAN, MD†	Provider ID: N/A
Effective as of 01-JAN-23	Provider ID: N/A	 24022 CALLE DE LA PLATA STE 500
KONUGRES, GEORGE, DO†	 24022 CALLE DE LA PLATA STE 500	LAGUNA HILLS, CA 92653
Provider ID: N/A	LAGUNA HILLS, CA 92653	Teleservice
 24022 CALLE DE LA PLATA STE 500	Effective as of 01-DEC-21	Effective as of 01-SEP-23
LAGUNA HILLS, CA 92653	LYLE, DOUGLAS, MD†	ROSANIO, SALVATORE, MD
Effective as of 01-JAN-23	Provider ID: N/A	Provider ID: N/A
KONUGRES, GEORGE, DO†	 24411 HEALTH CENTER DR STE 550	 24022 CALLE DE LA PLATA STE 500
Provider ID: N/A	LAGUNA HILLS, CA 92653	LAGUNA HILLS, CA 92653
 24022 CALLE DE LA PLATA STE 500	Effective as of 01-MAY-12	Teleservice
LAGUNA HILLS, CA 92653	PARISE, CHARLES, MD†	Effective as of 01-SEP-23
Effective as of 01-AUG-17	Provider ID: N/A	ROSANIO, SALVATORE, MD
LAMONT, DANIEL, MD†	 24022 CALLE DE LA PLATA STE 500	Provider ID: N/A
		 24022 CALLE DE LA PLATA STE 500

C1. Lista de proveedores de la red Médico de atención especializada

LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-AUG-23

ROSANIO, SALVATORE, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-AUG-23

ROSANIO, SALVATORE, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-JUN-24

ROSANIO, SALVATORE, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-JUN-24

ROSANIO, SALVATORE, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-MAR-24

VAN, HOHAI, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

VAN, HOHAI, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

VAN, HOHAI, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-APR-20

VAN, HOHAI, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-22

VAN, HOHAI, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

VAN, HOHAI, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

ZAREMBA, MARK, MD†

Provider ID: N/A

25401 CABOT RD STE 107
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-14

ZAREMBA, MARK, MD†

Provider ID: N/A

25401 CABOT RD STE 107
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-14

ZAREMBA, MARK, MD†

Provider ID: N/A

25401 CABOT RD STE 107
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-13

CERTIFIED

ACUPUNCTURIST

OMIDI, SHOHREH, LAC

Provider ID: N/A

24422 AVENIDA DE LA
CARLOTA STE 105
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

OMIDI, SHOHREH, LAC

Provider ID: N/A

24422 AVENIDA DE LA
CARLOTA STE 105
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

SHE, WU, LAC†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 7C
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-22

CERTIFIED NURSE PRACTITIONER

CARASQUERO, ANDREA, NP

Provider ID: N/A

23121 PLAZA POINTE DR
STE 107
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-24

CHANG KIMES, AUDREY, NP†

Provider ID: N/A

24422 AVENIDA DE LA
CARLOTA STE 130

C1. Lista de proveedores de la red Médico de atención especializada

LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

CHANG KIMES, AUDREY, NP†

Provider ID: N/A

📍 24422 AVENIDA DE LA CARLOTA STE 130
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

CHANG KIMES, AUDREY, NP†

Provider ID: N/A

📍 24422 AVENIDA DE LA CARLOTA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

KHAN, KHADEER, NP

Provider ID: N/A

📍 23121 PLAZA POINTE DR STE 107
LAGUNA HILLS, CA 92653
Effective as of 01-APR-24

KHURANA, ANIL, NP

Provider ID: N/A

📍 23121 PLAZA POINTE DR STE 107
LAGUNA HILLS, CA 92653
Effective as of 01-APR-24

NGUYEN, MARICEL, NP

Provider ID: N/A

📍 23181 VERDUGO DR STE 103A
LAGUNA HILLS, CA 92653*
Effective as of 01-APR-23

NGUYEN, MARICEL, NP

Provider ID: N/A

📍 23181 VERDUGO DR STE 103A
LAGUNA HILLS, CA 92653*
Effective as of 01-APR-23

PARK, NURI, NP

Provider ID: N/A

📍 23181 VERDUGO DR STE 103A
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-15

PARK, SE, NP

Provider ID: N/A

📍 23961 CALLE DE LA MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

PARK, SE, NP

Provider ID: N/A

📍 23961 CALLE DE LA MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-23

PARK, SE, NP

Provider ID: N/A

📍 23961 CALLE DE LA MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-23

PARK, SE, NP

Provider ID: N/A

📍 23961 CALLE DE LA MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-23

PARK, SE, NP

Provider ID: N/A

📍 23961 CALLE DE LA MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-23

***CERTIFIED REGISTERED
NURSE MIDWIFE***

MCDANIEL-DAVIS, SHAYNA, CRNM

Provider ID: N/A

📍 24411 HEALTH CENTER DR STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-24

MCDANIEL-DAVIS, SHAYNA, CRNM

Provider ID: N/A

📍 24411 HEALTH CENTER DR STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-24

MOLINSKI, ALLISON, CRNM

Provider ID: N/A

📍 24411 HEALTH CENTER DR STE 620
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-24

SAJADI, ALISA, CRNM

Provider ID: N/A

📍 24411 HEALTH CENTER DR STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

VIVALDA, JULIE, CRNM

Provider ID: N/A

📍 24411 HEALTH CENTER DR STE 620
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-24

VIVALDA, JULIE, CRNM

Provider ID: N/A

📍 24411 HEALTH CENTER DR STE 620
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-24

VIVALDA, JULIE, CRNM

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 620
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-24

VIVALDA, JULIE, CRNM

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 620
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

CHIROPRACTOR

COSTALES, STEPHEN, DC

Provider ID: N/A

☐ 24741 ALICIA PKWY STE D
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

LANIER, TIMOTHY, DC†

Provider ID: N/A

☐ 23412 MOULTON PKWY
STE 100
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

MCHONE, PATRICIA, DC†

Provider ID: N/A

☐ 24741 ALICIA PKWY STE D
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

MCHONE, PATRICIA, DC†

Provider ID: N/A

☐ 24741 ALICIA PKWY STE D
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-19

DERMATOLOGY

ATHALYE, LEELA, DO

Provider ID: N/A

☐ 24012 CALLE DE LA PLATA

STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-24

ATHALYE, LEELA, DO

Provider ID: N/A

☐ 24012 CALLE DE LA PLATA
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-24

LANDER, JEFFREY, MD†

Provider ID: N/A

☐ 24431 CALLE DE LA LOUISA
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-19

LANDER, JEFFREY, MD†

Provider ID: N/A

☐ 24431 CALLE DE LA LOUISA
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

LANDER, JEFFREY, MD†

Provider ID: N/A

☐ 24431 CALLE DE LA LOUISA
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-23

LANDER, JEFFREY, MD†

Provider ID: N/A

☐ 24431 CALLE DE LA LOUISA
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

LANDER, JEFFREY, MD†

Provider ID: N/A

☐ 24431 CALLE DE LA LOUISA
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-16

LEE, KATHERINE, MD†

Provider ID: N/A

☐ 24431 CALLE DE LA LOUISA
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-14

LEE, KATHERINE, MD†

Provider ID: N/A

☐ 24431 CALLE DE LA LOUISA
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

LEE, KATHERINE, MD†

Provider ID: N/A

☐ 24431 CALLE DE LA LOUISA
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-14

LEE, KATHERINE, MD†

Provider ID: N/A

☐ 24431 CALLE DE LA LOUISA
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-19

LEE, KATHERINE, MD

Provider ID: N/A

☐ 24431 CALLE DE LA LOUISA
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

LEE, KATHERINE, MD†

Provider ID: N/A

☐ 24431 CALLE DE LA LOUISA
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

NAMI, NAVID, DO

Provider ID: N/A

**C1. Lista de proveedores de la red
Médico de atención especializada**

24012 CALLE DE LA PLATA
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-24

NAMI, NAVID, DO
Provider ID: N/A

24012 CALLE DE LA PLATA
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-24

EMERGENCY MEDICINE

BLAND, HOWARD, MD
Provider ID: N/A

23595 MOULTON PKWY
STE E
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-23

GEE, KELLY, DO†
Provider ID: N/A

23521 PASEO DE VALENCIA
STE 311
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-22

ENDOCRINOLOGY

METABOLISM DIABETES

BANDUKWALA, RAHIL, DO†
Provider ID: N/A

23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-19

BANDUKWALA, RAHIL, DO†
Provider ID: N/A

23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

BANDUKWALA, RAHIL, DO†
Provider ID: N/A

23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-16

BANDUKWALA, RAHIL, DO†
Provider ID: N/A

23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

BANDUKWALA, RAHIL, DO†
Provider ID: N/A

23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

CHAN, JESSICA, MD†
Provider ID: N/A

24321 AVENIDA DE LA
CARLOTA
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

CHAN, JESSICA, MD†
Provider ID: N/A

24321 AVENIDA DE LA
CARLOTA
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

CHANG, KU JUEY, MD
Provider ID: N/A

23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-16

CHANG, KU JUEY, MD
Provider ID: N/A

23141 MOULTON PKWY STE

102
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-19

CHANG, KU JUEY, MD
Provider ID: N/A

23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

CHANG, KU JUEY, MD
Provider ID: N/A

23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-21

FARJOUDI, FARHAD, MD†
Provider ID: N/A

23521 PASEO DE VALENCIA
STE 108
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-22

FARJOUDI, FARHAD, MD†
Provider ID: N/A

23521 PASEO DE VALENCIA
STE 106
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-22

FARJOUDI, FARHAD, MD†
Provider ID: N/A

23521 PASEO DE VALENCIA
STE 106
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-22

FARJOUDI, FARHAD, MD†
Provider ID: N/A

23521 PASEO DE VALENCIA
STE 108
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-22

**C1. Lista de proveedores de la red
Médico de atención especializada**

<p>KRISHNAN, PRIYANKA, MD Provider ID: N/A 23141 MOULTON PKWY STE 102 LAGUNA HILLS, CA 92653 Teleservice Effective as of 01-JUN-19</p>	<p>102 LAGUNA HILLS, CA 92653 Teleservice Effective as of 01-AUG-21</p>	<p>LAGUNA HILLS, CA 92653 Effective as of 01-MAR-23</p>
<p>KRISHNAN, PRIYANKA, MD Provider ID: N/A 23141 MOULTON PKWY STE 102 LAGUNA HILLS, CA 92653 Teleservice Effective as of 01-JUL-16</p>	<p>KRISHNAN, PRIYANKA, MD Provider ID: N/A 23141 MOULTON PKWY STE 102 LAGUNA HILLS, CA 92653 Teleservice Effective as of 01-OCT-23</p>	<p>MARKMAN, LISA, MD Provider ID: N/A 23141 MOULTON PKWY STE 102 LAGUNA HILLS, CA 92653 Effective as of 01-MAR-23</p>
<p>KRISHNAN, PRIYANKA, MD Provider ID: N/A 23141 MOULTON PKWY STE 102 LAGUNA HILLS, CA 92653 Teleservice Effective as of 01-JUN-24</p>	<p>MARKMAN, LISA, MD Provider ID: N/A 23141 MOULTON PKWY STE 102 LAGUNA HILLS, CA 92653 Effective as of 01-OCT-23</p>	<p>MEHTA, SHILPA, MD[†] Provider ID: N/A 23141 MOULTON PKWY STE 102 LAGUNA HILLS, CA 92653 Teleservice Effective as of 01-NOV-19</p>
<p>KRISHNAN, PRIYANKA, MD Provider ID: N/A 23141 MOULTON PKWY STE 102 LAGUNA HILLS, CA 92653 Teleservice Effective as of 01-FEB-16</p>	<p>MARKMAN, LISA, MD Provider ID: N/A 23141 MOULTON PKWY STE 102 LAGUNA HILLS, CA 92653 Effective as of 01-MAR-23</p>	<p>MEHTA, SHILPA, MD[†] Provider ID: N/A 23141 MOULTON PKWY STE 102 LAGUNA HILLS, CA 92653 Teleservice Effective as of 01-NOV-19</p>
<p>KRISHNAN, PRIYANKA, MD Provider ID: N/A 23141 MOULTON PKWY STE 102 LAGUNA HILLS, CA 92653 Teleservice Effective as of 01-APR-18</p>	<p>MARKMAN, LISA, MD Provider ID: N/A 23141 MOULTON PKWY STE 102 LAGUNA HILLS, CA 92653 Effective as of 01-MAR-23</p>	<p>MEHTA, SHILPA, MD[†] Provider ID: N/A 23141 MOULTON PKWY STE 102 LAGUNA HILLS, CA 92653 Teleservice Effective as of 01-NOV-19</p>
<p>KRISHNAN, PRIYANKA, MD Provider ID: N/A 23141 MOULTON PKWY STE</p>	<p>MARKMAN, LISA, MD Provider ID: N/A 23141 MOULTON PKWY STE 102 LAGUNA HILLS, CA 92653 Effective as of 01-JAN-23</p>	<p>MEHTA, SHILPA, MD[†] Provider ID: N/A 23141 MOULTON PKWY STE 102 LAGUNA HILLS, CA 92653 Teleservice Effective as of 01-NOV-19</p>

**C1. Lista de proveedores de la red
Médico de atención especializada**

<p>23141 MOULTON PKWY STE 102 LAGUNA HILLS, CA 92653 Teleservice Effective as of 01-JUN-24</p>	<p>Effective as of 01-OCT-23 TRAN, NEIL, MD Provider ID: N/A</p>	<p>STE 620 LAGUNA HILLS, CA 92653 Effective as of 01-JAN-18</p>
<p>MEHTA, SHILPA, MD† Provider ID: N/A</p>	<p>24321 AVENIDA DE LA CARLOTA LAGUNA HILLS, CA 92653 Effective as of 01-FEB-23</p>	<p>FAMILY PRACTICE GERIATRIC MEDICINE</p>
<p>23141 MOULTON PKWY STE 102 LAGUNA HILLS, CA 92653 Teleservice Effective as of 01-JAN-23</p>	<p>ENDOCRINOLOGY REPRODUCTIVE</p>	<p>PATEL, NEHAL, MD† Provider ID: N/A</p>
<p>MEHTA, SHILPA, MD† Provider ID: N/A</p>	<p>23961 CALLE DE LA MAGDALENA STE 541 LAGUNA HILLS, CA 92653 Effective as of 01-JUN-24</p>	<p>23141 VERDUGO DR STE 201 LAGUNA HILLS, CA 92653 Teleservice Effective as of 01-DEC-20</p>
<p>23141 MOULTON PKWY STE 102 LAGUNA HILLS, CA 92653 Teleservice Effective as of 01-JUN-19</p>	<p>FREDERICK, JANE, MD† Provider ID: N/A</p>	<p>PATEL, NEHAL, MD† Provider ID: N/A</p>
<p>MEHTA, SHILPA, MD† Provider ID: N/A</p>	<p>23961 CALLE DE LA MAGDALENA STE 503 LAGUNA HILLS, CA 92653* Effective as of 01-JUN-19</p>	<p>23141 VERDUGO DR STE 201 LAGUNA HILLS, CA 92653 Teleservice Effective as of 01-AUG-24</p>
<p>23141 MOULTON PKWY STE 102 LAGUNA HILLS, CA 92653 Teleservice Effective as of 01-JUN-19</p>	<p>FREDERICK, JANE, MD† Provider ID: N/A</p>	<p>PATEL, NEHAL, MD† Provider ID: N/A</p>
<p>MEHTA, SHILPA, MD† Provider ID: N/A</p>	<p>23961 CALLE DE LA MAGDALENA STE 541 LAGUNA HILLS, CA 92653 Effective as of 01-NOV-13</p>	<p>23141 VERDUGO DR STE 201 LAGUNA HILLS, CA 92653 Teleservice Effective as of 01-DEC-20</p>
<p>23141 MOULTON PKWY STE 102 LAGUNA HILLS, CA 92653 Teleservice Effective as of 01-OCT-23</p>	<p>FAMILY PRACTICE</p>	<p>FEMALE PELVIC MED AND RECONSTRUCTIVE SURG</p>
<p>POURBABAK, SAM, MD Provider ID: N/A</p>	<p>LEISH, BRIAN, MD Provider ID: N/A</p>	<p>MWESIGWA, PATRICIA, MD† Provider ID: N/A</p>
<p>23141 MOULTON PKWY STE 102 LAGUNA HILLS, CA 92653 Teleservice</p>	<p>24411 HEALTH CENTER DR STE 460 LAGUNA HILLS, CA 92653 Effective as of 01-JAN-18</p>	<p>23961 CALLE DE LA MAGDALENA STE 500 LAGUNA HILLS, CA 92653 Effective as of 01-MAR-22</p>
	<p>RIZNIS, TENGIS, MD† Provider ID: N/A</p>	<p>SHOURESHI, POONE, MD Provider ID: N/A</p>
	<p>24451 HEALTH CENTER DR</p>	<p>23961 CALLE DE LA MAGDALENA STE 500 LAGUNA HILLS, CA 92653 Effective as of 01-SEP-23</p>

**C1. Lista de proveedores de la red
Médico de atención especializada**

SHOURESHI, POONE, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-23

GASTROENTEROLOGY

JALALI, FARID, MD†

Provider ID: N/A

24221 CALLE DE LA LOUISA
STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-AUG-19

JALALI, FARID, MD†

Provider ID: N/A

24221 CALLE DE LA LOUISA
STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-AUG-19

NGO, CATHERINE, MD

Provider ID: N/A

26671 ALISO CREEK RD STE
301
LAGUNA HILLS, CA 92656

Effective as of 01-DEC-22

NGO, CATHERINE, MD

Provider ID: N/A

26671 ALISO CREEK RD STE
301
LAGUNA HILLS, CA 92656

Effective as of 01-DEC-22

SHAH, KETAN, MD

Provider ID: N/A

24221 CALLE DE LA LOUISA
STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-16

SHAH, KETAN, MD

Provider ID: N/A

24221 CALLE DE LA LOUISA
STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-16

SHAH, KETAN, MD

Provider ID: N/A

24221 CALLE DE LA LOUISA
STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-16

SHAH, KETAN, MD

Provider ID: N/A

24221 CALLE DE LA LOUISA
STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-JUN-24

SY, THEODORE, MD†

Provider ID: N/A

26538 MOULTON PKWY
STE 38E
LAGUNA HILLS, CA 92653

Effective as of 01-MAR-21

SY, THEODORE, MD†

Provider ID: N/A

26538 MOULTON PKWY
STE 38E
LAGUNA HILLS, CA 92653

Effective as of 01-MAR-21

SY, THEODORE, MD†

Provider ID: N/A

26538 MOULTON PKWY
STE 38E
LAGUNA HILLS, CA 92653

Effective as of 01-AUG-18

SY, THEODORE, MD†

Provider ID: N/A

26538 MOULTON PKWY
STE 38E

LAGUNA HILLS, CA 92653

Effective as of 01-AUG-18

GENERAL PRACTICE

SHAW, BRIAN, DO†

Provider ID: N/A

23265 S POINTE DR STE
100
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-15

GYNECOLOGIC

ONCOLOGY

DHOLAKIYA, PRIYAL, MD

Provider ID: N/A

24401 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-24

DHOLAKIYA, PRIYAL, MD

Provider ID: N/A

24401 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-24

DHOLAKIYA, PRIYAL, MD

Provider ID: N/A

24401 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-24

DHOLAKIYA, PRIYAL, MD

Provider ID: N/A

24401 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-24

DHOLAKIYA, PRIYAL, MD

Provider ID: N/A

**C1. Lista de proveedores de la red
Médico de atención especializada**

24401 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-24

DHOLAKIYA, PRIYAL, MD

Provider ID: N/A

24401 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-24

**HEMATOLOGY /
ONCOLOGY**

CHENG, HOWARD, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 25B
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-08

CHENG, HOWARD, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 25B
LAGUNA HILLS, CA 92653
Effective as of 01-APR-11

CHENG, HOWARD, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 25B
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-14

HASSAN, SARAH, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 320
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-21

**MALEKIRAD, JACQUELINE,
MD†**

Provider ID: N/A

24411 HEALTH CENTER DR
STE 320
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-22

**MALEKIRAD, JACQUELINE,
MD†**

Provider ID: N/A

24411 HEALTH CENTER DR
STE 320
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-22

MULTANI, GURPREET, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 320
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-21

PATHAK, BHAVANA, MD

Provider ID: N/A

24401 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-24

PATHAK, BHAVANA, MD

Provider ID: N/A

24401 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-24

PATHAK, BHAVANA, MD

Provider ID: N/A

24401 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-24

PATHAK, BHAVANA, MD

Provider ID: N/A

24401 HEALTH CENTER DR

STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-24

PATHAK, BHAVANA, MD

Provider ID: N/A

24401 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-24

POW-ANPONGKUL, PETE, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 420
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

POW-ANPONGKUL, PETE, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 420
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

POW-ANPONGKUL, PETE, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 420
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-22

POW-ANPONGKUL, PETE, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 420
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-22

POW-ANPONGKUL, PETE, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 501
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-22

C1. Lista de proveedores de la red Médico de atención especializada

RAO, AMOL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 320
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-21

SALIMI-TARI, PEYMAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 501
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-22

SU, DERRICK, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 501
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-22

VU, COLLIN, MD†

Provider ID: N/A

25431 CABOT RD STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

VU, COLLIN, MD†

Provider ID: N/A

25431 CABOT RD STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

VU, COLLIN, MD†

Provider ID: N/A

25431 CABOT RD STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-22

VU, COLLIN, MD†

Provider ID: N/A

25431 CABOT RD STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-22

VU, COLLIN, MD†

Provider ID: N/A

25431 CABOT RD STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-22

VU, COLLIN, MD†

Provider ID: N/A

25431 CABOT RD STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

HOSPITALIST MD/DO

ABCEDE, GAIL FRANCES LIEZL, MD†

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 7C
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-SEP-22

SINGH, DEEPJOT, MD

Provider ID: N/A

24451 HEALTH CENTER DR
LAGUNA HILLS, CA 92653
Effective as of 01-APR-24

INFECTIOUS DISEASE

KOPACZ, JOANNA, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-23

KOPACZ, JOANNA, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-23

KOPACZ, JOANNA, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-23

KOPACZ, JOANNA, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-23

KOPACZ, JOANNA, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

KOPACZ, JOANNA, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-23

KOPACZ, JOANNA, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-23

WHITE, ALAN, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 460
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

INTERNAL MEDICINE

BAE, CHAY, DO†

**C1. Lista de proveedores de la red
Médico de atención especializada**

Provider ID: N/A

26538 MOULTON PKWY
STE 38E
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-22

BAE, CHAY, DO†

Provider ID: N/A

26538 MOULTON PKWY
STE 38E
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-22

BAE, CHAY, DO†

Provider ID: N/A

26538 MOULTON PKWY
STE 38E
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-22

BAE, CHAY, DO†

Provider ID: N/A

26538 MOULTON PKWY
STE 38E
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-22

KOOKOOTSEDES, GAYLE, MD

Provider ID: N/A

25411 CABOT RD STE 109
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-FEB-24

KOOKOOTSEDES, GAYLE, MD

Provider ID: N/A

25411 CABOT RD STE 109
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-FEB-24

KOOKOOTSEDES, GAYLE, MD

Provider ID: N/A

25411 CABOT RD STE 109
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-FEB-24

KOOKOOTSEDES, GAYLE, MD

Provider ID: N/A

25411 CABOT RD STE 109
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-FEB-24

LO, ALAN, MD

Provider ID: N/A

25401 CABOT RD STE 101
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

NGUYEN, AN, DO†

Provider ID: N/A

23181 VERDUGO DR STE
103A
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-23

POURBABAK, SAM, MD

Provider ID: N/A

23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-JAN-23

SOONG, YEN-HUI, MD†

Provider ID: N/A

23141 MOULTON PKWY STE
108
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

SOONG, YEN-HUI, MD†

Provider ID: N/A

23141 MOULTON PKWY STE
108
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

INTERNAL MEDICINE

CRITICAL CARE MEDICINE

KADIFA, FADY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

VOVAN, THOMAS, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

**INTERVENTIONAL
CARDIOLOGY**

ALLAM, SHAMILI, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

ALLAM, SHAMILI, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

ALLAM, SHAMILI, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

CHEN, CHENG-HAN, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA

**C1. Lista de proveedores de la red
Médico de atención especializada**

STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-20

CHEN, CHENG-HAN, MD†

Provider ID: N/A
24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-20

CHEN, CHENG-HAN, MD†

Provider ID: N/A
24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

CHEN, CHENG-HAN, MD†

Provider ID: N/A
24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-APR-20

CHEN, CHENG-HAN, MD†

Provider ID: N/A
24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-20

DRURY, PAUL, MD†

Provider ID: N/A
24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

DRURY, PAUL, MD†

Provider ID: N/A
24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

DRURY, PAUL, MD†

Provider ID: N/A
24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

DRURY, PAUL, MD†

Provider ID: N/A
24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

DRURY, PAUL, MD†

Provider ID: N/A
24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

FEINER, JEFFREY, MD†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 550
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

FRUMIN, HOWARD, MD†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

GAULT, MICHAEL, MD†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 550
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

GIM, RONALD, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 550
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

GUJRAL, INDERPAL, MD†

Provider ID: N/A
24953 PASEO DE
VALENCIA STE 30A
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-11

KARROWNI, WASSEF, MD

Provider ID: N/A
24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-23

KONUGRES, GEORGE, DO†

Provider ID: N/A
24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

LAMONT, DANIEL, MD†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 550
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

LYLE, DOUGLAS, MD†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 550
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

MASTERS, ROBERT, MD†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 550
LAGUNA HILLS, CA 92653

**C1. Lista de proveedores de la red
Médico de atención especializada**

Effective as of 01-JUN-24	Provider ID: N/A	LAGUNA HILLS, CA 92653
PARISE, CHARLES, MD†	 24022 CALLE DE LA PLATA	Effective as of 01-AUG-20
Provider ID: N/A	STE 500	
 24022 CALLE DE LA PLATA	LAGUNA HILLS, CA 92653	VAN, HOHAI, MD†
Effective as of 01-JAN-23		Provider ID: N/A
PARISE, CHARLES, MD†	Effective as of 01-JAN-18	 24022 CALLE DE LA PLATA
Provider ID: N/A	PATEL, MILAN, MD†	STE 500
 24022 CALLE DE LA PLATA	Provider ID: N/A	LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23	 24022 CALLE DE LA PLATA	Effective as of 01-JAN-18
PARISE, CHARLES, MD†	STE 500	
Provider ID: N/A	LAGUNA HILLS, CA 92653	VAN, HOHAI, MD†
 24022 CALLE DE LA PLATA	Effective as of 01-AUG-20	Provider ID: N/A
Effective as of 01-JAN-18	PATEL, MILAN, MD†	 24022 CALLE DE LA PLATA
PARISE, CHARLES, MD†	Provider ID: N/A	STE 500
Provider ID: N/A	 24022 CALLE DE LA PLATA	LAGUNA HILLS, CA 92653
 24022 CALLE DE LA PLATA	Effective as of 01-AUG-20	Effective as of 01-FEB-23
Effective as of 01-JAN-18	STE 500	
PARISE, CHARLES, MD†	LAGUNA HILLS, CA 92653	VAN, HOHAI, MD†
Provider ID: N/A	Effective as of 01-AUG-20	Provider ID: N/A
 24022 CALLE DE LA PLATA	TURIY, YULIYA, MD†	 24022 CALLE DE LA PLATA
Effective as of 01-JAN-23	Provider ID: N/A	STE 500
PARISE, CHARLES, MD†	 24022 CALLE DE LA PLATA	LAGUNA HILLS, CA 92653
Provider ID: N/A	STE 500	Effective as of 01-AUG-20
 24022 CALLE DE LA PLATA	LAGUNA HILLS, CA 92653	VAN, HOHAI, MD†
Effective as of 01-JAN-23	Effective as of 01-MAY-21	Provider ID: N/A
PARISE, CHARLES, MD†	TURIY, YULIYA, MD†	 24022 CALLE DE LA PLATA
Provider ID: N/A	Provider ID: N/A	STE 500
 24022 CALLE DE LA PLATA	 24022 CALLE DE LA PLATA	LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23	STE 500	Effective as of 01-AUG-20
PARISE, CHARLES, MD†	LAGUNA HILLS, CA 92653	WALTERS, DANIEL, MD
Provider ID: N/A	Effective as of 01-MAY-21	Provider ID: N/A
 24022 CALLE DE LA PLATA	TURIY, YULIYA, MD†	 24411 HEALTH CENTER DR
Effective as of 01-JAN-23	Provider ID: N/A	STE 550
PATEL, MILAN, MD†	 24022 CALLE DE LA PLATA	LAGUNA HILLS, CA 92653
Provider ID: N/A	STE 500	Effective as of 01-NOV-23
 24022 CALLE DE LA PLATA	LAGUNA HILLS, CA 92653	WALTERS, DANIEL, MD
Effective as of 01-FEB-23	Effective as of 01-MAY-21	Provider ID: N/A
PATEL, MILAN, MD†	VAN, HOHAI, MD†	 24411 HEALTH CENTER DR
Provider ID: N/A	Provider ID: N/A	STE 550
 24022 CALLE DE LA PLATA	 24022 CALLE DE LA PLATA	LAGUNA HILLS, CA 92653
STE 500	STE 500	Effective as of 01-NOV-23

C1. Lista de proveedores de la red Médico de atención especializada

WALTERS, DANIEL, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 550
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

WALTERS, DANIEL, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 550
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

LICENSED CLINICAL SOCIAL WORKER

DOWNES, SAIGE, LCSW

Provider ID: N/A

23461 S POINTE DR STE 240
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

DOWNES, SAIGE, LCSW

Provider ID: N/A

23461 S POINTE DR STE 240
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

HAYDEN, SANDRA, LCSW

Provider ID: N/A

25255 CABOT RD STE 210
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-21

HAYDEN, SANDRA, LCSW

Provider ID: N/A

25255 CABOT RD STE 210
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-21

MACIEL, MARLA, LCSW

Provider ID: N/A

23121 PLAZA POINTE DR

STE 107

LAGUNA HILLS, CA 92653

Effective as of 01-MAR-24

ZARGARBASHI, STEFANIE, LCSW†

Provider ID: N/A

24321 AVENIDA DE LA
CARLOTA
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

MARRIAGE FAMILY THERAPIST

MOORE, CANDACE, MFT

Provider ID: N/A

23461 S POINTE DR
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-22

MOORE, CANDACE, MFT

Provider ID: N/A

23461 S POINTE DR
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-22

MATERNAL AND FETAL MEDICINE

BUSH, MELISSA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-20

BUSH, MELISSA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 260
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-19

BUSH, MELISSA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-16

BUSH, MELISSA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

BUSH, MELISSA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-22

BUSH, MELISSA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-11

BUSH, MELISSA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

BUSH, MELISSA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-24

BUSH, MELISSA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300

**C1. Lista de proveedores de la red
Médico de atención especializada**

LAGUNA HILLS, CA 92653
Effective as of 01-JUL-04

BUSH, MELISSA, MD†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 260

LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

BUSH, MELISSA, MD†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 300

LAGUNA HILLS, CA 92653
Effective as of 01-APR-11

BUSH, MELISSA, MD†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 300

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-20

BUSH, MELISSA, MD†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 260

LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

BUSH, MELISSA, MD†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 260

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

BUSH, MELISSA, MD†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 260

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

CHAU, CINDY, MD†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

CHAU, CINDY, MD†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

CHAU, CINDY, MD†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-23

CHAU, CINDY, MD†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-JUN-19

CHAU, CINDY, MD†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-19

DAY, ROBERT, MD†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-MAY-22

KFIR, MENASHE, MD†

Provider ID: N/A
24411 HEALTH CENTER DR

STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

KFIR, MENASHE, MD†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 300

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

KFIR, MENASHE, MD†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 300

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

KFIR, MENASHE, MD†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 300

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

MASAKI, DAMON, MD†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 300

LAGUNA HILLS, CA 92653
Effective as of 01-MAY-19

MASAKI, DAMON, MD†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 300

LAGUNA HILLS, CA 92653
Effective as of 01-DEC-19

MILLS, MARLIN, MD†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 540

LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

C1. Lista de proveedores de la red Médico de atención especializada

MILLS, MARLIN, MD†

Provider ID: N/A

📍 24411 HEALTH CENTER DR
STE 540
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

MILLS, MARLIN, MD†

Provider ID: N/A

📍 24411 HEALTH CENTER DR
STE 540
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

MILLS, MARLIN, MD†

Provider ID: N/A

📍 24411 HEALTH CENTER DR
STE 540
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

SHRIVASTAVA, VINEET, MD†

Provider ID: N/A

📍 24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-22

SHRIVASTAVA, VINEET, MD†

Provider ID: N/A

📍 24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-23

MEDICAL ONCOLOGY

VU, COLLIN, MD†

Provider ID: N/A

📍 25431 CABOT RD STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

NEONATAL / PERINATAL

MEDICINE

BUSH, MELISSA, MD†

Provider ID: N/A

📍 24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

MASAKI, DAMON, MD†

Provider ID: N/A

📍 24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-19

NEPHROLOGY

HAFTBARADARAN

MOHAMMADI, AFSANEH, MD

Provider ID: N/A

📍 25411 CABOT RD STE 105
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

HAFTBARADARAN

MOHAMMADI, AFSANEH, MD

Provider ID: N/A

📍 25411 CABOT RD STE 105
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

JAMES, JOJI, MD

Provider ID: N/A

📍 23141 MOULTON PKWY STE
102
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-23

MANSOURY, HADI, MD

Provider ID: N/A

📍 23521 PASEO DE VALENCIA
STE 108
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

NEUROLOGY

BANDARI, DANIEL, MD†

Provider ID: N/A

📍 24012 CALLE DE LA PLATA
STE 210
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-20

CHOAN, CAROLINE, MD

Provider ID: N/A

📍 24012 CALLE DE LA PLATA
STE 150
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-JUN-24

LOC, KIET, MD†

Provider ID: N/A

📍 24012 CALLE DE LA PLATA
STE 150
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-17

LOC, KIET, MD†

Provider ID: N/A

📍 24012 CALLE DE LA PLATA
STE 150
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

LOC, KIET, MD†

Provider ID: N/A

📍 24012 CALLE DE LA PLATA
STE 150
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

MAASUMI, KASRA, MD†

Provider ID: N/A

📍 24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-21

**C1. Lista de proveedores de la red
Médico de atención especializada**

MAASUMI, KASRA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-21

MAASUMI, KASRA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-21

MAASUMI, KASRA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-21

MAASUMI, KASRA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-21

RAPOPORT, ZHANNA, MD

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 8A
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-19

RAPOPORT, ZHANNA, MD

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 8A
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-19

RAPOPORT, ZHANNA, MD

Provider ID: N/A

24953 PASEO DE

VALENCIA STE 8A
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-19

RAPOPORT, ZHANNA, MD

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 8A
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-19

RAPOPORT, ZHANNA, MD

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 8A
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-20

SHEN, MICHAEL, MD

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 150
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-16

SHEN, MICHAEL, MD

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 150
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-16

SHEN, MICHAEL, MD

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 150
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

SHEN, MICHAEL, MD

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 150
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-16

***OBSTETRICS /
GYNECOLOGY***

AL-AZAWI, HIND, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-23

AL-AZAWI, HIND, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-23

CHUNG, LINDA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-APR-20

CHUNG, LINDA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

COUGH, HEIDI, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

COUGH, HEIDI, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

**C1. Lista de proveedores de la red
Médico de atención especializada**

COUGH, HEIDI, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-20

DAVIS, STEPHANIE, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

DAVIS, STEPHANIE, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

DAY, ROBERT, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

DEJBAKHS, SHEILA, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-19

EDMUNDSON, MORIAH, DO†

Provider ID: N/A

24321 AVENIDA DE LA
CARLOTA
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

FREDERICK, JANE, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 503
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

FREDERICK, JANE, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 503
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

JOHNSON, SUSAN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

KONG, GRACE, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

KONG, GRACE, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

KONG, GRACE, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-20

KRYCHMAN, MICHAEL, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 620
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-24

KRYCHMAN, MICHAEL, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 620
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

KRYCHMAN, MICHAEL, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 620
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

KRYCHMAN, MICHAEL, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 620
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

LAM, KIM, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

LAM, KIM, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

LEE, KATHERINE, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

LEE, KATHERINE, MD

**C1. Lista de proveedores de la red
Médico de atención especializada**

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

LO, PATRICIA, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

LOPEZ, RACHAEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640
LAGUNA HILLS, CA 92653
Effective as of 01-APR-11

LOPEZ, RACHAEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

LOPEZ, RACHAEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-20

LOPEZ, RACHAEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-20

LOPEZ, RACHAEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640

LAGUNA HILLS, CA 92653
Effective as of 01-MAY-12

MASAKI, DAMON, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-22

MASAKI, DAMON, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
LAGUNA HILLS, CA 92653
Effective as of 01-APR-19

MASAKI, DAMON, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-22

MENDELSON, SUSAN, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

MENDELSON, SUSAN, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

MENDELSON, SUSAN, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

MILLER, JAMIE, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

O TOOLE, MARY, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

O TOOLE, MARY, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

PATEL, MITA, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-19

PETERS, AMY, DO

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

PETERS, AMY, DO†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

PRIESTLEY, ANGELIKA, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200

**C1. Lista de proveedores de la red
Médico de atención especializada**

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

STERNFELD, DANIEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640

LAGUNA HILLS, CA 92653
Effective as of 01-APR-11

STERNFELD, DANIEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640

LAGUNA HILLS, CA 92653
Effective as of 01-MAY-12

STERNFELD, DANIEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640

LAGUNA HILLS, CA 92653
Effective as of 01-SEP-20

STERNFELD, DANIEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640

LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

TANAMAI, VAYA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640

LAGUNA HILLS, CA 92653
Effective as of 01-OCT-19

TANAMAI, VAYA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

TANAMAI, VAYA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640

LAGUNA HILLS, CA 92653
Effective as of 01-JUL-21

TANAMAI, VAYA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

TANAMAI, VAYA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640

LAGUNA HILLS, CA 92653
Effective as of 01-MAY-20

TANAMAI, VAYA, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

VICENS-VILLAFANA, JOSE, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200

LAGUNA HILLS, CA 92653
Effective as of 01-SEP-23

VICENS-VILLAFANA, JOSE, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 200

LAGUNA HILLS, CA 92653
Effective as of 01-SEP-23

WINTER, MARC, MD

Provider ID: N/A

24411 HEALTH CENTER DR

STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

YU, MIAO, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

YU, MIAO, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

YU, MIAO, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 640

LAGUNA HILLS, CA 92653
Effective as of 01-MAY-20

OPHTHALMOLOGY

AHMAD, ASHRAF, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300

LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

AHMAD, ASHRAF, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300

LAGUNA HILLS, CA 92653
Effective as of 01-SEP-22

AHMAD, ASHRAF, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300

**C1. Lista de proveedores de la red
Médico de atención especializada**

LAGUNA HILLS, CA 92653
Effective as of 01-SEP-23

AHMAD, ASHRAF, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-23

BANUELOS, LYDIA, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-22

BANUELOS, LYDIA, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 309
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

BROOKMAN, MYLES, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-23

BROOKMAN, MYLES, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-23

CHEN, SANFORD, MD†

Provider ID: N/A

23521 PASEO VALENCIA
309
LAGUNA HILLS, CA 92653
Effective as of 01-APR-13

CHOI, DAVID, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

CHOI, DAVID, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

CHOI, DAVID, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

CHOI, DAVID, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-24

DHOOT, SONIA, MD†

Provider ID: N/A

24401 CALLE DE LA LOUISA
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-19

DHOOT, SONIA, MD†

Provider ID: N/A

24401 CALLE DE LA LOUISA
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-19

DHOOT, SONIA, MD†

Provider ID: N/A

23961 CALLE DE LA

MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-22

DHOOT, SONIA, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

**EIFRIG, CHARLES WILLIAM,
MD†**

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-20

**EIFRIG, CHARLES WILLIAM,
MD†**

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-20

**EIFRIG, CHARLES WILLIAM,
MD†**

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-22

**EIFRIG, CHARLES WILLIAM,
MD†**

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

**EIFRIG, CHARLES WILLIAM,
MD†**

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-18

EIFRIG, CHARLES WILLIAM, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-18

GUJRAL, SATVINDER, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-22

GUJRAL, SATVINDER, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

GUJRAL, SATVINDER, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

GUJRAL, SATVINDER, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

GUPTA, MRINALI, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA

STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-22

GUPTA, MRINALI, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-22

GUPTA, MRINALI, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-20

GUPTA, MRINALI, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-20

GUPTA, MRINALI, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-20

GUPTA, MRINALI, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-20

GUPTA, MRINALI, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-20

GWYNN, DAVID, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-23

GWYNN, DAVID, MD

Provider ID: N/A

25200 LA PAZ RD
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-24

GWYNN, DAVID, MD

Provider ID: N/A

25200 LA PAZ RD
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-24

HENRICK, ANDREW, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

HENRICK, ANDREW, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-14

HENRICK, ANDREW, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-14

HENRICK, ANDREW, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 305

**C1. Lista de proveedores de la red
Médico de atención especializada**

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

HENRICK, ANDREW, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 305

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

HOVANESIAN, JOHN, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

HOVANESIAN, JOHN, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-APR-23

HOVANESIAN, JOHN, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-APR-23

HOVANESIAN, JOHN, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

HWANG, JOHN, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 207
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-18

HWANG, JOHN, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 207
LAGUNA HILLS, CA 92653

Effective as of 01-JUL-18

HWANG, JOHN, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 207
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-20

HWANG, JOHN, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 207
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

HWANG, JOHN, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 207
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-16

JACOBS, JEFFREY, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-AUG-22

JACOBS, JEFFREY, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-APR-23

JACOBS, JEFFREY, MD†

Provider ID: N/A

23961 CALLE DE LA

MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

JACOBS, JEFFREY, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

JOSON, PETER, MD

Provider ID: N/A

25200 LA PAZ RD
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-24

JOSON, PETER, MD

Provider ID: N/A

25200 LA PAZ RD
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-24

JOSON, PETER, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 309
LAGUNA HILLS, CA 92653

Effective as of 01-JUL-22

JOSON, PETER, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 309
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-17

KELLER, CHARLES, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-AUG-22

KELLER, CHARLES, MD

**C1. Lista de proveedores de la red
Médico de atención especializada**

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

KERSTEN, DIANA, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

KERSTEN, DIANA, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-22

KERSTEN, DIANA, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-APR-23

KERSTEN, DIANA, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-APR-23

KHAN, SAMIRA, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-24

KHAN, SAMIRA, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305

LAGUNA HILLS, CA 92653

Effective as of 01-MAY-24

KIM, JANET, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305

LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

KIM, JANET, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305

LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

KIM, JANET, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305

LAGUNA HILLS, CA 92653

Effective as of 01-FEB-23

KIM, JANET, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305

LAGUNA HILLS, CA 92653

Effective as of 01-FEB-23

KIM, JANET, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305

LAGUNA HILLS, CA 92653

Effective as of 01-FEB-23

KIM, JANET, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305

LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

KIM, BRIAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-APR-23

KIM, BRIAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-AUG-22

KIM, ESTHER, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 745
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-22

KIM, BRIAN, MD†

Provider ID: N/A

24401 CALLE DE LA LOUISA
STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-14

KIM, EDWARD, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-JUL-22

KIM, BRIAN, MD†

Provider ID: N/A

24401 CALLE DE LA LOUISA
STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-14

KIM, ESTHER, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA

CI. Lista de proveedores de la red Médico de atención especializada

STE 745
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

KIM, BRIAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

KIM, EDWARD, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

MCGUIRE, DESMOND, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 207
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-20

NOGUCHI, JONATHAN, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

PATEL, ALPA, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

PATEL, ALPA, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-22

PERRY, ANGELA, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

PERRY, ANGELA, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-23

PERRY, ANGELA, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-23

PRENDIVILLE, PAUL, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

PRENDIVILLE, PAUL, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-14

PRENDIVILLE, PAUL, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-14

PRENDIVILLE, PAUL, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

PRENDIVILLE, PAUL, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

RATHOD, RAJIV, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 475
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

RATHOD, RAJIV, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 475
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-16

RATHOD, RAJIV, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 475
LAGUNA HILLS, CA 92653
Effective as of 01-APR-22

RATHOD, RAJIV, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 475
LAGUNA HILLS, CA 92653
Effective as of 01-APR-22

RATHOD, RAJIV, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 475
LAGUNA HILLS, CA 92653
Effective as of 01-APR-22

RATHOD, RAJIV, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 475

**C1. Lista de proveedores de la red
Médico de atención especializada**

LAGUNA HILLS, CA 92653
Effective as of 01-APR-22

RATHOD, RAJIV, MD†

Provider ID: N/A

23521 PASEO VALENCIA
309

LAGUNA HILLS, CA 92653
Effective as of 01-FEB-15

ROUHANI, BEHNAZ, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-APR-23

ROUHANI, BEHNAZ, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-22

ROUHANI, BEHNAZ, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

ROUHANI, BEHNAZ, MD

Provider ID: N/A

24401 CALLE DE LA LOUISA
STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-19

ROUHANI, BEHNAZ, MD

Provider ID: N/A

24401 CALLE DE LA LOUISA
STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-19

SALEHI-HAD, HANI, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 309
LAGUNA HILLS, CA 92653

Effective as of 01-JUN-21

SALEHI-HAD, HANI, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 309
LAGUNA HILLS, CA 92653

Effective as of 01-JUN-21

SALIB, GEORGE, MD†

Provider ID: N/A

24422 AVENIDA DE LA
CARLOTA STE 110
LAGUNA HILLS, CA 92653

Effective as of 01-MAR-20

SALIB, GEORGE, MD†

Provider ID: N/A

24422 AVENIDA DE LA
CARLOTA STE 110
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-18

SALIB, GEORGE, MD†

Provider ID: N/A

24422 AVENIDA DE LA
CARLOTA STE 110
LAGUNA HILLS, CA 92653

Effective as of 01-JUN-21

SPANGGORD, HOLLY, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 305
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

SPANGGORD, HOLLY, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA

STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-14

SPANGGORD, HOLLY, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 305
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-18

SPANGGORD, HOLLY, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 305
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-19

SPANGGORD, HOLLY, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 305
LAGUNA HILLS, CA 92653

Effective as of 01-DEC-14

TAI, AUDREY, DO

Provider ID: N/A

25200 LA PAZ RD STE 100
LAGUNA HILLS, CA 92653

Effective as of 01-JUL-24

TAYANI, RAMIN, MD

Provider ID: N/A

25200 LA PAZ RD STE 100
LAGUNA HILLS, CA 92653

Effective as of 01-JUL-24

TAYANI, RAMIN, MD

Provider ID: N/A

25200 LA PAZ RD
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-24

TAYANI, RAMIN, MD

Provider ID: N/A

**C1. Lista de proveedores de la red
Médico de atención especializada**

25200 LA PAZ RD
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-24

TAYANI, RAMIN, MD
Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-23

TEYMOORIAN, SAVAK, MD†
Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

TEYMOORIAN, SAVAK, MD†
Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-22

TEYMOORIAN, SAVAK, MD†
Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-23

TEYMOORIAN, SAVAK, MD†
Provider ID: N/A

24401 CALLE DE LA LOUISA
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-14

TEYMOORIAN, SAVAK, MD†
Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

TEYMOORIAN, SAVAK, MD†
Provider ID: N/A

24401 CALLE DE LA LOUISA
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-14

TOMPKINS, BRETT, DO
Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

TOMPKINS, BRETT, DO
Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

TOMPKINS, BRETT, DO
Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-24

TOMPKINS, BRETT, DO
Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-24

TOMPKINS, BRETT, DO
Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-24

TOMPKINS, BRETT, DO
Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305

LAGUNA HILLS, CA 92653
Effective as of 01-SEP-24

TOMPKINS, BRETT, DO
Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-24

WANG, YE, MD†
Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

WANG, YE, MD†
Provider ID: N/A

24401 CALLE DE LA LOUISA
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-19

WANG, YE, MD†
Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-22

WANG, YE, MD†
Provider ID: N/A

24401 CALLE DE LA LOUISA
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-19

WANG, YE, MD†
Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

**C1. Lista de proveedores de la red
Médico de atención especializada**

WILLIAMS, MARK, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 475
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-24

WILLIAMS, MARK, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 475
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-24

WILLIAMS, MARK, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 475
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

WILLIAMS, MARK, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 475
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

WILLIAMS, MARK, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 475
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

YOU, TIMOTHY, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 475
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-16

YOU, TIMOTHY, MD†

Provider ID: N/A

24022 CALLE DE LA PLATA

STE 475
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

YOU, TIMOTHY, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-05

OPTOMETRIST

**CHOI-SIRITARATIWAT,
ISABELL, OD†**

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

**CHOI-SIRITARATIWAT,
ISABELL, OD†**

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-22

**CHOI-SIRITARATIWAT,
ISABELL, OD†**

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

**CHOI-SIRITARATIWAT,
ISABELL, OD†**

Provider ID: N/A

24401 CALLE DE LA LOUISA
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-19

CHOI-SIRITARATIWAT,

ISABELL, OD†

Provider ID: N/A

24401 CALLE DE LA LOUISA
STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-19

GRATTAN, ANNE, OD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

GRATTAN, ANNE, OD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

GRATTAN, ANNE, OD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-22

GRATTAN, ANNE, OD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-22

GRATTAN, ANNE, OD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-22

HUYNH, ANTHONY, OD†

Provider ID: N/A

23521 PASEO DE VALENCIA

C1. Lista de proveedores de la red Médico de atención especializada

STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-22

HUYNH, ANTHONY, OD†

Provider ID: N/A

☞ 23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-22

HUYNH, ANTHONY, OD†

Provider ID: N/A

☞ 23521 PASEO DE VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-23

HUYNH, ANTHONY, OD†

Provider ID: N/A

☞ 23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

HUYNH, ANTHONY, OD†

Provider ID: N/A

☞ 23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

HUYNH, ANTHONY, OD†

Provider ID: N/A

☞ 23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-22

LEI, SHARON, OD

Provider ID: N/A

☞ 23521 PASEO DE VALENCIA
STE 325
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-21

LEIGHT, TERRA, OD†

Provider ID: N/A

☞ 23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-22

LEIGHT, TERRA, OD†

Provider ID: N/A

☞ 23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

LEUNG, CHRISTINA, OD†

Provider ID: N/A

☞ 25260 LA PAZ RD STE G
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-16

MONTANA-COLLINS, CLAUDIA, OD†

Provider ID: N/A

☞ 23961 CALLE DE LA
MAGDALENA STE 412
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

MULICK, STEPHANIE, OD

Provider ID: N/A

☞ 25200 LA PAZ RD STE 100
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-24

NG, REBECCA, OD

Provider ID: N/A

☞ 25200 LA PAZ RD STE 100
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-24

NG, REBECCA, OD

Provider ID: N/A

☞ 23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653

Effective as of 01-MAR-23

PHAN, MIMI, OD†

Provider ID: N/A

☞ 23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-21

PLECHOT, ERIQ, OD

Provider ID: N/A

☞ 23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-APR-24

PLECHOT, ERIQ, OD

Provider ID: N/A

☞ 23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-APR-24

PLECHOT, ERIQ, OD

Provider ID: N/A

☞ 23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-APR-24

PLECHOT, ERIQ, OD

Provider ID: N/A

☞ 23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-APR-24

PLECHOT, ERIQ, OD

Provider ID: N/A

☞ 23521 PASEO DE VALENCIA
STE 305
LAGUNA HILLS, CA 92653
Effective as of 01-APR-24

SKVARNA, KAREN, OD

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-22

SKVARNA, KAREN, OD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

SKVARNA, KAREN, OD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-APR-23

TERADA, SEIJU, OD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-APR-23

TERADA, SEIJU, OD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

TERADA, SEIJU, OD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 300
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-22

OTOLARYNGOLOGY

ABEDI ASL, ESRAFIL, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 430
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-13

ABEDI ASL, ESRAFIL, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 430
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-18

ABEDI ASL, ESRAFIL, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 430
LAGUNA HILLS, CA 92653

Effective as of 01-APR-23

ABEDI ASL, ESRAFIL, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 430
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-14

BALAKER, ASHLEY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 370
LAGUNA HILLS, CA 92653

Effective as of 01-JUN-24

BALAKER, ASHLEY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 370
LAGUNA HILLS, CA 92653

Effective as of 01-MAY-19

BALAKER, ASHLEY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 370
LAGUNA HILLS, CA 92653

Effective as of 01-JUN-19

BUEN, FLOYD, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 370
LAGUNA HILLS, CA 92653

Effective as of 01-DEC-20

BUEN, FLOYD, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 370
LAGUNA HILLS, CA 92653

Effective as of 01-DEC-20

BUEN, FLOYD, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 370
LAGUNA HILLS, CA 92653

Effective as of 01-DEC-20

CHO, MICHAEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 370
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-18

CHO, MICHAEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 370
LAGUNA HILLS, CA 92653

Effective as of 01-JUN-24

JAKOBSEN, MICHAEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 370
LAGUNA HILLS, CA 92653

Effective as of 01-JUN-24

JAKOBSEN, MICHAEL, MD†

**C1. Lista de proveedores de la red
Médico de atención especializada**

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 370
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-22

MUNDI, JAGMEET, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 370
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

SUN, PAUL, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

SUN, PAUL, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-14

SUN, JOHN, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-14

SUN, PAUL, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

SUN, JOHN, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 600

LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

SUN, PAUL, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-11

SUN, JOHN, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

SUN, JOHN, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-16

SUN, JOHN, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-12

SUN, PAUL, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-12

SUN, PAUL, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-APR-11

SUN, JOHN, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-11

SUN, JOHN, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-APR-11

SUN, PAUL, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-16

SUN, PAUL, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-07

SUN, JOHN, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-07

SUN, PAUL, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

SUN, JOHN, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR

**C1. Lista de proveedores de la red
Médico de atención especializada**

STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

SUN, PAUL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

SUN, JOHN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

SUN, PAUL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-17

SUN, JOHN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-17

SUN, JOHN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-20

SUN, PAUL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-20

SUN, PAUL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-14

SUN, JOHN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-14

SUN, PAUL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-12

SUN, JOHN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-12

YIAN, CHRISTOPHER, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-12

YIAN, CHRISTOPHER, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-14

YIAN, CHRISTOPHER, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-17

YIAN, CHRISTOPHER, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

YIAN, CHRISTOPHER, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

YIAN, CHRISTOPHER, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-07

YIAN, CHRISTOPHER, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-16

YIAN, CHRISTOPHER, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-APR-11

YIAN, CHRISTOPHER, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653

**C1. Lista de proveedores de la red
Médico de atención especializada**

Effective as of 01-MAY-11

YIAN, CHRISTOPHER, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653

Effective as of 01-JUN-24

YIAN, CHRISTOPHER, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

YIAN, CHRISTOPHER, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653

Effective as of 01-MAY-12

YIAN, CHRISTOPHER, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-14

PEDIATRIC CARDIOLOGY

DENNY-BROWN, SINAN, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-JUN-24

DENNY-BROWN, SINAN, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-23

DENNY-BROWN, SINAN, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-23

DENNY-BROWN, SINAN, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-23

DENNY-BROWN, SINAN, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-23

DENNY-BROWN, SINAN, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-23

***PHYS MED/ REHAB PAIN
MEDICINE***

HANNA, ANDREW, DO

Provider ID: N/A

24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653

Effective as of 01-JUL-23

HANNA, ANDREW, DO

Provider ID: N/A

24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653

Effective as of 01-JUL-23

HANNA, ANDREW, DO

Provider ID: N/A

24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653

Effective as of 01-JUL-23

***PHYSICAL MEDICINE /
REHABILITATION***

ALSHARIF, KAIS, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653

Effective as of 01-MAR-21

ALSHARIF, KAIS, MD†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653

Effective as of 01-MAR-21

HILAL, TARIQ, DO†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653

Effective as of 01-MAR-21

HILAL, TARIQ, DO†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653

Effective as of 01-MAR-21

HILAL, TARIQ, DO†

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-20

**C1. Lista de proveedores de la red
Médico de atención especializada**

HILAL, TARIQ, DO[†]

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-20

KUO, DENNIS, MD[†]

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-20

LYNN, KENNETH, MD[†]

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 460
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-19

POURADIB, AMIR, MD[†]

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-APR-21

POURADIB, AMIR, MD[†]

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-22

POURADIB, AMIR, MD[†]

Provider ID: N/A

24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-21

POURADIB, AMIR, MD[†]

Provider ID: N/A

24012 CALLE DE LA PLATA

STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-22

PHYSICIANS ASSISTANT

BYNON, KRISTEN, PA

Provider ID: N/A

24401 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

BYNON, KRISTEN, PA

Provider ID: N/A

24401 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

BYNON, KRISTEN, PA

Provider ID: N/A

24401 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

CARDENAS, RICARDO, PA[†]

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 250
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

CARDENAS, RICARDO, PA[†]

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 250
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

CARR, OLIVIA, PA

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500

LAGUNA HILLS, CA 92653
Effective as of 01-APR-24

CARR, OLIVIA, PA

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-APR-24

DINH, Y NHA THI, PA[†]

Provider ID: N/A

23181 VERDUGO DR STE
103A
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-15

KIM, MOSES, MD[†]

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-APR-21

KISCADEN, LAUREN, PA

Provider ID: N/A

24411 HEALTH CENTER DR
STE 208
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

KISCADEN, LAUREN, PA

Provider ID: N/A

24411 HEALTH CENTER DR
STE 208
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

NAGEL, IRENE, PA[†]

Provider ID: N/A

24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-19

C1. Lista de proveedores de la red Médico de atención especializada

OWEN, LISA, PA

Provider ID: N/A

☒ 23181 VERDUGO DR STE
103A
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

PALMER, VIVIENNE, PA

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-24

PALMER, VIVIENNE, PA

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-24

PALMER, VIVIENNE, PA

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-24

SHARAF, KAREEM, PA

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-24

SHARAF, KAREEM, PA

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-24

SHARAF, KAREEM, PA

Provider ID: N/A

☒ 24411 HEALTH CENTER DR

STE 680
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-24

SHARAF, KAREEM, PA

Provider ID: N/A

☒ 24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-24

SOBHANIAN, SHAHAB, PA

Provider ID: N/A

☒ 23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

SOBHANIAN, SHAHAB, PA

Provider ID: N/A

☒ 23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

SOBHANIAN, SHAHAB, PA

Provider ID: N/A

☒ 23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

SOBHANIAN, SHAHAB, PA

Provider ID: N/A

☒ 23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

SOBHANIAN, SHAHAB, PA

Provider ID: N/A

☒ 23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

WANG, LILLIAN, PA†

Provider ID: N/A

☒ 24331 EL TORO RD STE 200
LAGUNA HILLS, CA 92637
Effective as of 01-FEB-22

PODIATRIST

ARJOMANDI, NEDA, DPM†

Provider ID: N/A

☒ 24022 CALLE DE LA PLATA
STE 410
LAGUNA HILLS, CA 92653
Effective as of 01-APR-21

ARJOMANDI, NEDA, DPM†

Provider ID: N/A

☒ 24022 CALLE DE LA PLATA
STE 410
LAGUNA HILLS, CA 92653
Effective as of 01-APR-21

GOLSHAHI, BAHAR, DPM†

Provider ID: N/A

☒ 23141 MOULTON PKWY STE
109
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-19

GOLSHAHI, BAHAR, DPM†

Provider ID: N/A

☒ 23141 MOULTON PKWY STE
109
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-19

GOLSHAHI, BAHAR, DPM†

Provider ID: N/A

☒ 23141 MOULTON PKWY STE
109
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-20

GOLSHAHI, BAHAR, DPM†

**C1. Lista de proveedores de la red
Médico de atención especializada**

Provider ID: N/A

23141 MOULTON PKWY STE 109
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-20

LEAMING, ROBERT, DPM

Provider ID: N/A

23141 MOULTON PKWY STE 109
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-FEB-24

LEAMING, ROBERT, DPM

Provider ID: N/A

23141 MOULTON PKWY STE 109
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-FEB-24

MCCANN, JAN, DPM

Provider ID: N/A

24012 CALLE DE LA PLATA STE 135
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-20

MCCANN, JAN, DPM

Provider ID: N/A

24012 CALLE DE LA PLATA STE 135
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-20

NOSRATI, SAM, DPM†

Provider ID: N/A

23141 MOULTON PKWY STE 109
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-19

NOSRATI, SAM, DPM†

Provider ID: N/A

23141 MOULTON PKWY STE 109
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-16

NOSRATI, SAM, DPM†

Provider ID: N/A

23141 MOULTON PKWY STE 109
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-16

POLISKIE, MICHAEL, DPM†

Provider ID: N/A

23521 PASEO DE VALENCIA STE 108
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-22

POLISKIE, MICHAEL, DPM†

Provider ID: N/A

23521 PASEO DE VALENCIA STE 108
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-18

YETTER, MARCUS, DPM†

Provider ID: N/A

23961 CALLE DE LA MAGDALENA STE 143
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

PSYCHIATRY

CHU, WEIMING, MD†

Provider ID: N/A

24953 PASEO DE VALENCIA STE 7C
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-21

CHU, WEIMING, MD†

Provider ID: N/A

24953 PASEO DE

VALENCIA STE 7C
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-21

EAGAN, TERRY, MD

Provider ID: N/A

23961 CALLE DE LA MAGDALENA STE 424
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

EAGAN, TERRY, MD

Provider ID: N/A

23961 CALLE DE LA MAGDALENA STE 424
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

PULMONARY DISEASES

CHANG, WILLIAM, DO†

Provider ID: N/A

23141 MOULTON PKWY STE 108
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-23

CHANG, WILLIAM, DO†

Provider ID: N/A

23141 MOULTON PKWY STE 108
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-23

CHANG, WILLIAM, DO†

Provider ID: N/A

23141 MOULTON PKWY STE 108
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-23

CHANG, WILLIAM, DO†

Provider ID: N/A

23141 MOULTON PKWY STE 108

C1. Lista de proveedores de la red
Médico de atención especializada

LAGUNA HILLS, CA 92653
 Effective as of 01-NOV-22

CHANG, WILLIAM, DO†

Provider ID: N/A

23141 MOULTON PKWY STE 108

LAGUNA HILLS, CA 92653
 Effective as of 01-JUN-24

CHANG, WILLIAM, DO†

Provider ID: N/A

23141 MOULTON PKWY STE 108

LAGUNA HILLS, CA 92653
 Effective as of 01-NOV-22

CHANG, WILLIAM, DO†

Provider ID: N/A

23141 MOULTON PKWY STE 108

LAGUNA HILLS, CA 92653
 Effective as of 01-JUN-24

ESPELETA, VIDAL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR STE 560

LAGUNA HILLS, CA 92653
 Effective as of 01-JAN-18

ESPELETA, VIDAL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR STE 560

LAGUNA HILLS, CA 92653
 Effective as of 01-JAN-17

ESPELETA, VIDAL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR STE 560

LAGUNA HILLS, CA 92653
 Effective as of 01-JAN-17

ESPELETA, VIDAL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR STE 560

LAGUNA HILLS, CA 92653
 Effective as of 01-AUG-23

ESPELETA, VIDAL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR STE 560

LAGUNA HILLS, CA 92653
 Effective as of 01-AUG-23

ESPELETA, VIDAL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR STE 560

LAGUNA HILLS, CA 92653
 Effective as of 01-JUN-24

ESPELETA, VIDAL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR STE 560

LAGUNA HILLS, CA 92653
 Effective as of 01-MAY-22

ESPELETA, VIDAL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR STE 560

LAGUNA HILLS, CA 92653
 Effective as of 01-OCT-23

ESPELETA, VIDAL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR STE 560

LAGUNA HILLS, CA 92653
 Effective as of 01-JUN-17

KADIFA, FADY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR

STE 560

LAGUNA HILLS, CA 92653
 Effective as of 01-NOV-19

KADIFA, FADY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR STE 560

LAGUNA HILLS, CA 92653
 Effective as of 01-JAN-23

KADIFA, FADY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR STE 560

LAGUNA HILLS, CA 92653
 Effective as of 01-JAN-23

KADIFA, FADY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR STE 560

LAGUNA HILLS, CA 92653
 Effective as of 01-MAY-12

KADIFA, FADY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR STE 560

LAGUNA HILLS, CA 92653
 Effective as of 01-NOV-19

KADIFA, FADY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR STE 560

LAGUNA HILLS, CA 92653
 Effective as of 01-JUN-24

KADIFA, FADY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR STE 560

LAGUNA HILLS, CA 92653
 Effective as of 01-APR-11

**C1. Lista de proveedores de la red
Médico de atención especializada**

KADIFA, FADY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-17

KADIFA, FADY, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-18

KOHLI, SANJIVAN, MD†

Provider ID: N/A

23141 MOULTON PKWY STE
108
LAGUNA HILLS, CA 92653

Effective as of 01-JUN-23

KOHLI, SANJIVAN, MD†

Provider ID: N/A

23141 MOULTON PKWY STE
108
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-22

KOHLI, SANJIVAN, MD†

Provider ID: N/A

23141 MOULTON PKWY STE
108
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-22

KOHLI, SANJIVAN, MD†

Provider ID: N/A

23141 MOULTON PKWY STE
108
LAGUNA HILLS, CA 92653

Effective as of 01-JUN-24

SHAHINIAN, GEORGE, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 620
LAGUNA HILLS, CA 92653

Effective as of 01-APR-23

SINGH, SAMARJIT, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653

Effective as of 01-MAR-19

SINGH, SAMARJIT, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653

Effective as of 01-MAR-22

SINGH, SAMARJIT, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653

Effective as of 01-JUN-24

SINGH, SAMARJIT, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

SOONG, YEN-HUI, MD†

Provider ID: N/A

23141 MOULTON PKWY STE
108
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-22

SOONG, YEN-HUI, MD†

Provider ID: N/A

23141 MOULTON PKWY STE
108
LAGUNA HILLS, CA 92653

Effective as of 01-JUN-24

SOONG, YEN-HUI, MD†

Provider ID: N/A

23141 MOULTON PKWY STE
108
LAGUNA HILLS, CA 92653

Effective as of 01-JUN-24

VO, BRYAN, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

VO, BRYAN, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-12

VO, BRYAN, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

VO, BRYAN, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

VO, BRYAN, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653

Effective as of 01-JUN-24

VO, BRYAN, MD

**C1. Lista de proveedores de la red
Médico de atención especializada**

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-18

VO, BRYAN, MD

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

VOVAN, THOMAS, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

VOVAN, THOMAS, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

VOVAN, THOMAS, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

VOVAN, THOMAS, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

VOVAN, THOMAS, MD†

Provider ID: N/A

☐ 24411 HEALTH CENTER DR
STE 560

LAGUNA HILLS, CA 92653
Effective as of 01-NOV-19

RADIATION ONCOLOGY

CHAN, LINDA, MD†

Provider ID: N/A

☐ 24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

CHAN, LINDA, MD†

Provider ID: N/A

☐ 24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

CHAN, LINDA, MD†

Provider ID: N/A

☐ 24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-19

CHAN, LINDA, MD†

Provider ID: N/A

☐ 24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

CHAN, LINDA, MD†

Provider ID: N/A

☐ 24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

CHAN, LINDA, MD†

Provider ID: N/A

☐ 24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653

Effective as of 01-AUG-24

HARSOLIA, ASIF, MD†

Provider ID: N/A

☐ 24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

HARSOLIA, ASIF, MD†

Provider ID: N/A

☐ 24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

HARSOLIA, ASIF, MD†

Provider ID: N/A

☐ 24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-19

HARSOLIA, ASIF, MD†

Provider ID: N/A

☐ 24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

KABOLIZADEH, PEYMAN, MD†

Provider ID: N/A

☐ 24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-APR-24

KABOLIZADEH, PEYMAN, MD†

Provider ID: N/A

☐ 24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-21

LEE, SHARON, MD†

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

📄 24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

LEE, SHARON, MD†

Provider ID: N/A

📄 24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

LEE, SHARON, MD†

Provider ID: N/A

📄 24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

LEE, SHARON, MD†

Provider ID: N/A

📄 24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

LEE, SHARON, MD†

Provider ID: N/A

📄 24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-21

MOYSES, HARRY, MD†

Provider ID: N/A

📄 24302 PASEO DE
VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

MOYSES, HARRY, MD†

Provider ID: N/A

📄 24302 PASEO DE
VALENCIA

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

RHEUMATOLOGY

**KHALEGHI DAMAVANDI, MIR
BEHNAM, MD**

Provider ID: N/A

📄 25411 CABOT RD STE 112
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-19

**KHALEGHI DAMAVANDI, MIR
BEHNAM, MD**

Provider ID: N/A

📄 25411 CABOT RD STE 112
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-18

**KHALEGHI DAMAVANDI, MIR
BEHNAM, MD**

Provider ID: N/A

📄 25411 CABOT RD STE 112
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-15

**KHALEGHI DAMAVANDI, MIR
BEHNAM, MD**

Provider ID: N/A

📄 25411 CABOT RD STE 112
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

**KHALEGHI DAMAVANDI, MIR
BEHNAM, MD**

Provider ID: N/A

📄 25411 CABOT RD STE 112
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-20

**KHALEGHI DAMAVANDI, MIR
BEHNAM, MD**

Provider ID: N/A

📄 25411 CABOT RD STE 112

LAGUNA HILLS, CA 92653
Effective as of 01-OCT-20

**KHALEGHI DAMAVANDI, MIR
BEHNAM, MD**

Provider ID: N/A

📄 25411 CABOT RD STE 112
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

**KHALEGHI DAMAVANDI, MIR
BEHNAM, MD**

Provider ID: N/A

📄 25411 CABOT RD STE 112
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-19

**KHALEGHI DAMAVANDI, MIR
BEHNAM, MD**

Provider ID: N/A

📄 25411 CABOT RD STE 112
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-21

**KHALEGHI DAMAVANDI, MIR
BEHNAM, MD**

Provider ID: N/A

📄 25411 CABOT RD STE 112
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-17

**KHALEGHI DAMAVANDI, MIR
BEHNAM, MD**

Provider ID: N/A

📄 25411 CABOT RD STE 112
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-17

**KHALEGHI DAMAVANDI, MIR
BEHNAM, MD**

Provider ID: N/A

📄 25411 CABOT RD STE 112
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-17

**C1. Lista de proveedores de la red
Médico de atención especializada**

**KHALEGHI DAMAVANDI, MIR
BEHNAM, MD**

Provider ID: N/A

25411 CABOT RD STE 112
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

KOOKOOTSEDES, GAYLE, MD

Provider ID: N/A

25411 CABOT RD STE 109
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-JUL-24

KOOKOOTSEDES, GAYLE, MD

Provider ID: N/A

25411 CABOT RD STE 109
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-JUL-24

KOOKOOTSEDES, GAYLE, MD

Provider ID: N/A

25411 CABOT RD STE 112
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-23

KOOKOOTSEDES, GAYLE, MD

Provider ID: N/A

25411 CABOT RD STE 109
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-APR-24

KOOKOOTSEDES, GAYLE, MD

Provider ID: N/A

25411 CABOT RD STE 109
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-APR-24

KOOKOOTSEDES, GAYLE, MD

Provider ID: N/A

25411 CABOT RD STE 109
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-FEB-24

KOOKOOTSEDES, GAYLE, MD

Provider ID: N/A

25411 CABOT RD STE 109
LAGUNA HILLS, CA 92653
Teleservice
Effective as of 01-FEB-24

***SURGERY COLON
SURGERY***

BRADY, MATTHEW, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-21

BRADY, MATTHEW, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-21

BRADY, MATTHEW, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-21

BRADY, MATTHEW, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-21

SYN, GENE, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 417
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-21

SYN, GENE, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 231
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

SURGERY GENERAL

ABOU ABBASS, AHMAD, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

ASHLEY, BLAKE, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

ASHLEY, BLAKE, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

ASHLEY, BLAKE, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

ASHLEY, BLAKE, MD†

Provider ID: N/A

24411 HEALTH CENTER DR

**C1. Lista de proveedores de la red
Médico de atención especializada**

STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-14

ASHLEY, BLAKE, MD†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-19

ASHLEY, BLAKE, MD†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-APR-11

ASHLEY, BLAKE, MD†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-12

ASHLEY, BLAKE, MD†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-19

ASHLEY, BLAKE, MD†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

BACON, LOUISE, MD

Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

BACON, LOUISE, MD

Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

DEARING, DAVID, MD†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-19

DEARING, DAVID, MD†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-18

DEARING, DAVID, MD†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-19

DEARING, DAVID, MD†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

DEARING, DAVID, MD†

Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-23

HOLNESS, RONALD, MD†

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 108
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-19

KLAUSE, ELVIRA, MD

Provider ID: N/A
23961 CALLE DE LA
MAGDALENA STE 417
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-23

KLAUSE, ELVIRA, MD

Provider ID: N/A
23961 CALLE DE LA
MAGDALENA STE 417
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-23

KLAUSE, ELVIRA, MD

Provider ID: N/A
23961 CALLE DE LA
MAGDALENA STE 417
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-23

KLAUSE, ELVIRA, MD

Provider ID: N/A
23961 CALLE DE LA
MAGDALENA STE 417
LAGUNA HILLS, CA 92653*
Effective as of 01-JUN-23

KLAUSE, ELVIRA, MD

Provider ID: N/A
23961 CALLE DE LA
MAGDALENA STE 417
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-23

KLAUSE, ELVIRA, MD

Provider ID: N/A
23961 CALLE DE LA
MAGDALENA STE 417
LAGUNA HILLS, CA 92653

**C1. Lista de proveedores de la red
Médico de atención especializada**

Effective as of 01-JUN-24

KLAUSE, ELVIRA, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 417
LAGUNA HILLS, CA 92653

Effective as of 01-MAY-23

KUSHNER, KENNETH, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

KUSHNER, KENNETH, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

PHAM, ALEXANDER, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 108
LAGUNA HILLS, CA 92653

Effective as of 01-MAR-24

PHAM, ALEXANDER, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 108
LAGUNA HILLS, CA 92653

Effective as of 01-MAR-24

PHAM, ALEXANDER, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 108
LAGUNA HILLS, CA 92653

Effective as of 01-MAR-24

RAHNEMA, CYRUS, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 108
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-24

RAHNEMA, CYRUS, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 108
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-24

RAHNEMA, CYRUS, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 108
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-24

RAHNEMA, CYRUS, MD

Provider ID: N/A

23521 PASEO DE VALENCIA
STE 108
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-24

ROBERTSON, ELSIE, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653

Effective as of 01-JUN-24

ROBERTSON, ELSIE, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653

Effective as of 01-JUN-24

ROBERTSON, ELSIE, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350

LAGUNA HILLS, CA 92653

Effective as of 01-JUN-24

ROBERTSON, ELSIE, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653

Effective as of 01-JUN-24

ROBERTSON, ELSIE, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653

Effective as of 01-JUN-24

ROBERTSON, ELSIE, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

ROBERTSON, ELSIE, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653

Effective as of 01-MAR-23

RONA, KAIS, MD

Provider ID: N/A

11 MAREBLU STE 200
LAGUNA HILLS, CA 92656*

Effective as of 01-FEB-23

SHARMA, RAHUL, DO⁺

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-19

SHARMA, RAHUL, DO⁺

**C1. Lista de proveedores de la red
Médico de atención especializada**

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-19

SHAVER, JOHN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

SHAVER, JOHN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-19

SHAVER, JOHN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-19

SHAVER, JOHN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-22

TENG, WANG, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

TUNG, SHAWNDEEP, MD

Provider ID: N/A

24401 CALLE DE LA LOUISA
STE 102

LAGUNA HILLS, CA 92653
Effective as of 01-JUL-21

TUNG, SHAWNDEEP, MD

Provider ID: N/A

24401 CALLE DE LA LOUISA
STE 102
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-21

TUNG, SHAWNDEEP, MD

Provider ID: N/A

24401 CALLE DE LA LOUISA
STE 102
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-21

TUNG, SHAWNDEEP, MD

Provider ID: N/A

24401 CALLE DE LA LOUISA
STE 102
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-21

WALLACE, WILLIAM, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-20

WALLACE, WILLIAM, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-20

WALLACE, WILLIAM, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

WALLACE, WILLIAM, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

WALLACE, WILLIAM, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-APR-11

WALLACE, WILLIAM, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-13

WALLACE, WILLIAM, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-16

WALLACE, WILLIAM, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-12

WALLACE, WILLIAM, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

WATANABE, BRIAN, MD†

Provider ID: N/A

24953 PASCO DE

**C1. Lista de proveedores de la red
Médico de atención especializada**

VALENCIA
STE 15C
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-21

WATANABE, BRIAN, MD†
Provider ID: N/A
24953 PASCO DE
VALENCIA
STE 15C
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-21

WATANABE, BRIAN, MD†
Provider ID: N/A
24953 PASCO DE
VALENCIA
STE 15C
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-21

WONG, JASON, MD†
Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

WONG, JASON, MD†
Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-12

WONG, JASON, MD†
Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-12

WONG, JASON, MD†
Provider ID: N/A
24411 HEALTH CENTER DR

STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

WONG, JASON, MD†
Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-20

WONG, JASON, MD†
Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-20

WONG, JASON, MD†
Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

WONG, JASON, MD†
Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

***SURGERY GENERAL
VASCULAR***

DEARING, DAVID, MD†
Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-19

DEARING, DAVID, MD†
Provider ID: N/A
24411 HEALTH CENTER DR

STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

DEARING, DAVID, MD†
Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-15

DEARING, DAVID, MD†
Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-18

SHARMA, RAHUL, DO†
Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-18

SHARMA, RAHUL, DO†
Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

SHARMA, RAHUL, DO†
Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-APR-19

SHARMA, RAHUL, DO†
Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-APR-19

C1. Lista de proveedores de la red Médico de atención especializada

SHARMA, RAHUL, DO†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

SHARMA, RAHUL, DO†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-19

TENG, WANG, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-12

TENG, WANG, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

TENG, WANG, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-16

TENG, WANG, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-APR-11

TENG, WANG, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-16

TENG, WANG, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

TENG, WANG, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-12

TENG, WANG, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

WALLACE, WILLIAM, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

WALLACE, WILLIAM, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-16

SURGERY HAND ORTHOPEDIC

PATEL, AMAR, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA HILLS, CA 92637
Effective as of 01-NOV-20

PATEL, AMAR, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA HILLS, CA 92637
Effective as of 01-NOV-20

PATEL, AMAR, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA HILLS, CA 92637
Effective as of 01-NOV-20

SURGERY

NEUROLOGICAL

HWANG, BRIAN, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

HWANG, BRIAN, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

HWANG, BRIAN, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

HWANG, BRIAN, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-MAR-23

HWANG, BRIAN, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653

Effective as of 01-JUN-24

HWANG, BRIAN, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-22

HWANG, BRIAN, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

HWANG, BRIAN, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

JACKSON, ROBERT, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653

Effective as of 01-JUL-23

JACKSON, ROBERT, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653

Effective as of 01-JUL-23

LIAUW, JASON, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653

Effective as of 01-JUL-19

LIAUW, JASON, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653

Effective as of 01-JUL-19

LIAUW, JASON, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-19

LIAUW, JASON, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-19

LIAUW, JASON, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 504
LAGUNA HILLS, CA 92653

Effective as of 01-AUG-18

LIAUW, JASON, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 504
LAGUNA HILLS, CA 92653

Effective as of 01-AUG-21

LIAUW, JASON, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 504

LAGUNA HILLS, CA 92653

Effective as of 01-AUG-21

MASSOUDI, FARZAD, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-JAN-21

MASSOUDI, FARZAD, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-JAN-21

MASSOUDI, FARZAD, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-APR-22

MASSOUDI, FARZAD, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-MAY-20

MASSOUDI, FARZAD, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-MAY-20

MASSOUDI, FARZAD, MD†

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653

Teleservice

Effective as of 01-JUN-24

SURGERY ORTHOPEDIC

GREENBAUM, BRADLEY, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 415
LAGUNA HILLS, CA 92653

Effective as of 01-JUN-24

GREENBAUM, BRADLEY, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 415
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-24

KIM-ORDEN, MICHAEL, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 415
LAGUNA HILLS, CA 92653

Effective as of 01-MAY-24

KIM-ORDEN, MICHAEL, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 415
LAGUNA HILLS, CA 92653

Effective as of 01-MAY-24

KIM-ORDEN, MICHAEL, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 415
LAGUNA HILLS, CA 92653

Effective as of 01-MAY-24

KIM-ORDEN, MICHAEL, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 415
LAGUNA HILLS, CA 92653

Effective as of 01-MAY-24

KIM-ORDEN, MICHAEL, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 415
LAGUNA HILLS, CA 92653

Effective as of 01-MAY-24

KIM-ORDEN, MICHAEL, MD

Provider ID: N/A

24022 CALLE DE LA PLATA
STE 415
LAGUNA HILLS, CA 92653

Effective as of 01-MAY-24

PATEL, AMAR, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA HILLS, CA 92637

Effective as of 01-SEP-23

PATEL, AMAR, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA HILLS, CA 92637

Effective as of 01-NOV-22

PATEL, AMAR, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA HILLS, CA 92637

Effective as of 01-NOV-22

PATEL, AMAR, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA HILLS, CA 92637

Effective as of 01-JUL-21

PATEL, AMAR, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA HILLS, CA 92637
Effective as of 01-MAY-22

PATEL, AMAR, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA HILLS, CA 92637

Effective as of 01-JAN-22

PATEL, AMAR, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA HILLS, CA 92637

Effective as of 01-DEC-21

SURGERY THORACIC

GRIFFITH, PATRICK, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653

Effective as of 01-AUG-23

GRIFFITH, PATRICK, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653

Effective as of 01-AUG-23

GRIFFITH, PATRICK, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-23

GRIFFITH, PATRICK, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653

**C1. Lista de proveedores de la red
Médico de atención especializada**

Effective as of 01-SEP-23

GRIFFITH, PATRICK, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-23

GRIFFITH, PATRICK, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-23

GRIFFITH, PATRICK, MD

Provider ID: N/A

24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-23

HARGROVE, RACHEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653

Effective as of 01-SEP-19

HARGROVE, RACHEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653

Effective as of 01-DEC-22

HARGROVE, RACHEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-23

HARGROVE, RACHEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

HARGROVE, RACHEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

HARGROVE, RACHEL, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-23

KANAAN, SAMER, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 630
LAGUNA HILLS, CA 92653

Effective as of 01-MAR-17

KANAAN, SAMER, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 630
LAGUNA HILLS, CA 92653

Effective as of 01-MAR-17

LAM, TUAN, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 680
LAGUNA HILLS, CA 92653

Effective as of 01-APR-19

POWELL, LEDFORD, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 630

LAGUNA HILLS, CA 92653

Effective as of 01-APR-16

POWELL, LEDFORD, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 630
LAGUNA HILLS, CA 92653

Effective as of 01-JUL-14

POWELL, LEDFORD, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 630
LAGUNA HILLS, CA 92653

Effective as of 01-JUN-24

POWELL, LEDFORD, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 630
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-20

POWELL, LEDFORD, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 630
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-16

POWELL, LEDFORD, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 630
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-18

TENG, WANG, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-20

C1. Lista de proveedores de la red Médico de atención especializada

TENG, WANG, MD†

Provider ID: N/A

24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-20

SURGICAL ONCOLOGY

BREMNER, AMY, MD

Provider ID: N/A

24401 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

BREMNER, AMY, MD†

Provider ID: N/A

24401 CALLE DE LA LOUISA
STE 102
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-21

BREMNER, AMY, MD

Provider ID: N/A

24401 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

BREMNER, AMY, MD

Provider ID: N/A

24401 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

BREMNER, AMY, MD

Provider ID: N/A

24401 HEALTH CENTER DR
STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

UROLOGY

BUI, DON, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

BUI, DON, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

BUI, DON, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

BUI, DON, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

BUI, DON, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

BUI, DON, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

BUI, DON, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

BUI, DON, MD†

Provider ID: N/A

25200 LA PAZ RD STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

ELKHOURY, FUAD, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-22

ELKHOURY, FUAD, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-22

ELKHOURY, FUAD, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

ELKHOURY, FUAD, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-21

ELKHOURY, FUAD, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-21

C1. Lista de proveedores de la red Médico de atención especializada

ELKHOORY, FUAD, MD[†]

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

ELKHOORY, FUAD, MD[†]

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-21

ELKHOORY, FUAD, MD[†]

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-23

ELKHOORY, FUAD, MD[†]

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-21

ELKHOORY, FUAD, MD[†]

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-21

ELKHOORY, FUAD, MD[†]

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-NOV-21

GRUENENFELDER, JENNIFER, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-21

HO, TAMMY, MD[†]

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-20

HO, TAMMY, MD[†]

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-20

HO, TAMMY, MD[†]

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-JUN-24

HO, TAMMY, MD[†]

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-JAN-21

HO, TAMMY, MD[†]

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23

HO, TAMMY, MD[†]

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500

LAGUNA HILLS, CA 92653

Effective as of 01-FEB-22

HO, TAMMY, MD[†]

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-20

HO, TAMMY, MD[†]

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-20

HO, TAMMY, MD[†]

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-20

HO, TAMMY, MD[†]

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-20

HO, TAMMY, MD[†]

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-20

KIM, MOSES, MD[†]

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-20

C1. Lista de proveedores de la red Médico de atención especializada

KIM, MOSES, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

KIM, MOSES, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

KIM, MOSES, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

KIM, MOSES, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

KIM, MOSES, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

KIM, MOSES, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

KIM, MOSES, MD†

Provider ID: N/A

23961 CALLE DE LA

MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

KIM, MOSES, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

KIM, MOSES, MD†

Provider ID: N/A

25200 LA PAZ RD STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

LIAUW, JASON, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 405
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-19

MEAGLIA, JAMES, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

MEAGLIA, JAMES, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

MEAGLIA, JAMES, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

MEAGLIA, JAMES, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

MEAGLIA, JAMES, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

MEAGLIA, JAMES, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

MEAGLIA, JAMES, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

MEAGLIA, JAMES, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

MEAGLIA, JAMES, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

MEAGLIA, JAMES, MD†

Provider ID: N/A

23961 CALLE DE LA

C1. Lista de proveedores de la red Médico de atención especializada

MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

MEAGLIA, JAMES, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

NAKAMURA, LEAH, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

NAKAMURA, LEAH, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

NAKAMURA, LEAH, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

NAKAMURA, LEAH, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

NAKAMURA, LEAH, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

NAKAMURA, LEAH, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

NAKAMURA, LEAH, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

NAKAMURA, LEAH, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

PASIN, ERIK, MD

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 15B
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-21

PASIN, ERIK, MD

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 15B
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-21

PASIN, ERIK, MD

Provider ID: N/A

24321 AVENIDA DE LA
CARLOTA STE H7
LAGUNA HILLS, CA 92653
Effective as of 01-APR-24

PASIN, ERIK, MD

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 15B
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-21

PASIN, ERIK, MD

Provider ID: N/A

24321 AVENIDA DE LA
CARLOTA STE H7
LAGUNA HILLS, CA 92653
Effective as of 01-APR-24

PASIN, ERIK, MD

Provider ID: N/A

24953 PASEO DE
VALENCIA STE 15B
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-24

PASIN, ERIK, MD

Provider ID: N/A

24953 PASEO VALENCIA7C
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-12

PASIN, ERIK, MD

Provider ID: N/A

24953 PASEO VALENCIA7C
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-15

SHOURESHI, POONE, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-23

SHOURESHI, POONE, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-23

C1. Lista de proveedores de la red Médico de atención especializada

SHOURESHI, POONE, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-23

SHOURESHI, POONE, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-23

SHOURESHI, POONE, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-23

SHOURESHI, POONE, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-23

SHOURESHI, POONE, MD

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

SINGH, KARAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

SINGH, KARAN, MD†

Provider ID: N/A

23961 CALLE DE LA

MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

SINGH, KARAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

SINGH, KARAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

SINGH, KARAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

SINGH, KARAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

SINGH, KARAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

SINGH, KARAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

SINGH, KARAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

SINGH, KARAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

SINGH, KARAN, MD†

Provider ID: N/A

25200 LA PAZ RD STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

SPITZ, AARON, MD†

Provider ID: N/A

25200 LA PAZ RD STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-14

SPITZ, AARON, MD†

Provider ID: N/A

25200 LA PAZ RD STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-22

SPITZ, AARON, MD†

Provider ID: N/A

25200 LA PAZ RD STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-14

SPITZ, AARON, MD†

Provider ID: N/A

25200 LA PAZ RD STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

**C1. Lista de proveedores de la red
Médico de atención especializada**

SPITZ, AARON, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

SPITZ, AARON, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

SPITZ, AARON, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

SPITZ, AARON, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

SPITZ, AARON, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

SPITZ, AARON, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-APR-21

SPITZ, AARON, MD†

Provider ID: N/A

23961 CALLE DE LA

MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

SPITZ, AARON, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

SPITZ, AARON, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

SPITZ, AARON, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

SPITZ, AARON, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

SU, DANIEL, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

SU, DANIEL, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

SU, DANIEL, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

SU, DANIEL, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

SU, DANIEL, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

SU, DANIEL, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

SU, DANIEL, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

SU, DANIEL, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

SU, DANIEL, MD†

Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

25200 LA PAZ RD STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

25200 LA PAZ RD STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

25200 LA PAZ RD STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-17

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-24

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

23961 CALLE DE LA
MAGDALENA STE 500

LAGUNA HILLS, CA 92653
Effective as of 01-MAY-21

ALLERGY IMMUNOLOGY

DYER, MARC, MD

Provider ID: N/A

30131 TOWN CENTER DR
STE 120
LAGUNA NIGUEL, CA 92677
Effective as of 01-JAN-13

DYER, MARC, MD

Provider ID: N/A

30131 TOWN CENTER DR
STE 120
LAGUNA NIGUEL, CA 92677
Effective as of 01-NOV-14

DYER, MARC, MD

Provider ID: N/A

30131 TOWN CENTER DR
STE 120
LAGUNA NIGUEL, CA 92677
Effective as of 01-JAN-18

AUDIOLOGIST

ABRAMSON, MARIA, AuD†

Provider ID: N/A

28985 GOLDEN LANTERN
STE B105
LAGUNA NIGUEL, CA 92677
Effective as of 01-NOV-21

ABRAMSON, MARIA, AuD†

Provider ID: N/A

28985 GOLDEN LANTERN
STE B105
LAGUNA NIGUEL, CA 92677
Effective as of 01-NOV-21

CERTIFIED

ACUPUNCTURIST

**C1. Lista de proveedores de la red
Médico de atención especializada**

PARK, ERIC, LAC[†]

Provider ID: N/A

30101 TOWN CENTER DR
STE 112
LAGUNA NIGUEL, CA 92677

Effective as of 01-OCT-22

DERMATOLOGY

KLEIN, LORRIE, MD[†]

Provider ID: N/A

30201 GOLDEN LANTERN
STE B
LAGUNA NIGUEL, CA 92677

Effective as of 01-JUL-21

KLEIN, LORRIE, MD[†]

Provider ID: N/A

30201 GOLDEN LANTERN
STE B
LAGUNA NIGUEL, CA 92677

Effective as of 01-JAN-23

KLEIN, LORRIE, MD[†]

Provider ID: N/A

30201 GOLDEN LANTERN
STE B
LAGUNA NIGUEL, CA 92677

Effective as of 01-SEP-19

KLEIN, LORRIE, MD[†]

Provider ID: N/A

30201 GOLDEN LANTERN
STE B
LAGUNA NIGUEL, CA 92677

Effective as of 01-SEP-19

KLEIN, LORRIE, MD[†]

Provider ID: N/A

30201 GOLDEN LANTERN
STE B
LAGUNA NIGUEL, CA 92677

Effective as of 01-OCT-23

LANDER, JEFFREY, MD[†]

Provider ID: N/A

30201 GOLDEN LANTERN
STE B
LAGUNA NIGUEL, CA 92677

Effective as of 01-OCT-23

LANDER, JEFFREY, MD[†]

Provider ID: N/A

30201 GOLDEN LANTERN
STE B
LAGUNA NIGUEL, CA 92677

Effective as of 01-OCT-22

LANDER, JEFFREY, MD[†]

Provider ID: N/A

30201 GOLDEN LANTERN
STE B
LAGUNA NIGUEL, CA 92677

Effective as of 01-JAN-23

NAMI, NAVID, DO[†]

Provider ID: N/A

30281 GOLDEN LANTERN
LAGUNA NIGUEL, CA 92677

Effective as of 01-MAR-22

ENDOCRINOLOGY

METABOLISM DIABETES

HAMIDI, AFSHIN, MD

Provider ID: N/A

28202 CABOT RD STE 300
LAGUNA NIGUEL, CA 92677

Effective as of 01-JUL-24

HAMIDI, AFSHIN, MD

Provider ID: N/A

28202 CABOT RD STE 300
LAGUNA NIGUEL, CA 92677

Effective as of 01-JUL-24

NEMATI, MARYAM, MD

Provider ID: N/A

30281 GOLDEN LANTERN
LAGUNA NIGUEL, CA 92677

Effective as of 01-SEP-23

GASTROENTEROLOGY

ARGUELLO, JUAN, MD

Provider ID: N/A

30131 TOWN CENTER DR
STE 215
LAGUNA NIGUEL, CA 92677

Effective as of 01-NOV-17

ARGUELLO, JUAN, MD

Provider ID: N/A

30131 TOWN CENTER DR
STE 215
LAGUNA NIGUEL, CA 92677

Effective as of 01-NOV-17

GENERAL PRACTICE

PATEL, JYOTINKUMAR, MD[†]

Provider ID: N/A

30281 GOLDEN LANTERN
LAGUNA NIGUEL, CA 92677

Effective as of 01-SEP-22

INTERNAL MEDICINE

SHAHIM, ZAHRA, MD

Provider ID: N/A

32341 GOLDEN LANTERN
STE D
LAGUNA NIGUEL, CA 92677

Effective as of 01-NOV-23

MEDICAL ONCOLOGY

WAGNER, EDWARD, MD

Provider ID: N/A

25500 RANCHO NIGUEL
RD STE 240
LAGUNA NIGUEL, CA 92677

Teleservice

Effective as of 01-OCT-12

**C1. Lista de proveedores de la red
Médico de atención especializada**

NEUROLOGY CHILD

GARFINKLE, REBECCA, DO

Provider ID: N/A

30131 TOWN CENTER DR
STE 245
LAGUNA NIGUEL, CA 92677
Effective as of 01-NOV-14

GARFINKLE, REBECCA, DO

Provider ID: N/A

30131 TOWN CENTER DR
STE 245
LAGUNA NIGUEL, CA 92677
Effective as of 01-MAY-24

GARFINKLE, REBECCA, DO

Provider ID: N/A

30131 TOWN CENTER DR
STE 245
LAGUNA NIGUEL, CA 92677
Effective as of 01-MAY-24

GARFINKLE, REBECCA, DO

Provider ID: N/A

30131 TOWN CENTER DR
STE 245
LAGUNA NIGUEL, CA 92677
Effective as of 01-MAY-14

MCINTOSH, ANDREW, MD†

Provider ID: N/A

30131 TOWN CENTER DR
STE 195
LAGUNA NIGUEL, CA 92677
Effective as of 01-MAR-21

MCINTOSH, ANDREW, MD†

Provider ID: N/A

30131 TOWN CENTER DR
STE 195
LAGUNA NIGUEL, CA 92677
Effective as of 01-NOV-13

MCINTOSH, ANDREW, MD†

Provider ID: N/A

30131 TOWN CENTER DR
STE 195
LAGUNA NIGUEL, CA 92677
Effective as of 01-NOV-14

MCINTOSH, ANDREW, MD†

Provider ID: N/A

30131 TOWN CENTER DR
STE 195
LAGUNA NIGUEL, CA 92677
Effective as of 01-JAN-21

PRZEKLASA AUTH, MELISSA, MD†

Provider ID: N/A

30131 TOWN CENTER DR
STE 237
LAGUNA NIGUEL, CA 92677
Effective as of 01-SEP-19

PRZEKLASA AUTH, MELISSA, MD†

Provider ID: N/A

30131 TOWN CENTER DR
STE 237
LAGUNA NIGUEL, CA 92677
Effective as of 01-SEP-19

**PEDIATRIC ALLERGY /
IMMUNOLOGY**

DYER, MARC, MD

Provider ID: N/A

30131 TOWN CENTER DR
STE 120
LAGUNA NIGUEL, CA 92677
Effective as of 01-JAN-21

PODIATRIST

COX, MATTHEW, DPM

Provider ID: N/A

30001 TOWN CENTER DR

STE E2

LAGUNA NIGUEL, CA 92677
Effective as of 01-JAN-18

PSYCHOLOGIST

ENGELMAN, SUZANNE, PhD

Provider ID: N/A

30100 CROWN VALLEY
PKWY STE 17C
LAGUNA NIGUEL, CA 92677
Effective as of 01-OCT-23

ENGELMAN, SUZANNE, PhD

Provider ID: N/A

30131 TOWN CENTER DR
STE 268
LAGUNA NIGUEL, CA 92677
Effective as of 01-MAR-15

ENGELMAN, SUZANNE, PhD

Provider ID: N/A

30100 CROWN VALLEY
PKWY STE 17C
LAGUNA NIGUEL, CA 92677
Effective as of 01-OCT-23

ENGELMAN, SUZANNE, PhD

Provider ID: N/A

30131 TOWN CENTER DR
STE 268
LAGUNA NIGUEL, CA 92677
Effective as of 01-MAR-15

ENGELMAN, SUZANNE, PhD

Provider ID: N/A

30131 TOWN CENTER DR
STE 268
LAGUNA NIGUEL, CA 92677
Effective as of 01-MAR-15

ENGELMAN, SUZANNE, PhD

Provider ID: N/A

30100 CROWN VALLEY
PKWY STE 17C

**C1. Lista de proveedores de la red
Médico de atención especializada**

LAGUNA NIGUEL, CA 92677
Effective as of 01-OCT-23

ENGELMAN, SUZANNE, PhD

Provider ID: N/A

30100 CROWN VALLEY
PKWY STE 17C

LAGUNA NIGUEL, CA 92677
Effective as of 01-OCT-23

ENGELMAN, SUZANNE, PhD

Provider ID: N/A

30131 TOWN CENTER DR
STE 268

LAGUNA NIGUEL, CA 92677
Effective as of 01-MAR-15

***FAMILY PRACTICE
SPORTS MEDICINE***

GRAHAM, SCOTT, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-FEB-22

**VENEZIANO, CHRISTOPHER,
MD†**

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-FEB-23

**VENEZIANO, CHRISTOPHER,
MD†**

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-OCT-23

PHYSICIANS ASSISTANT

BOW, LINDA, PA†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-SEP-23

NGUYEN, TONY, PA†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-AUG-22

NGUYEN, TONY, PA†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-AUG-22

PODIATRIST

BATHAEE, FARSHAD, DPM

Provider ID: N/A

24331 EL TORO RD STE 370
LAGUNA WOODS, CA
92637

Effective as of 01-JAN-17

BATHAEE, FARSHAD, DPM

Provider ID: N/A

24331 EL TORO RD STE 370
LAGUNA WOODS, CA
92637

Effective as of 01-DEC-21

BATHAEE, FARSHAD, DPM

Provider ID: N/A

24331 EL TORO RD STE 370
LAGUNA WOODS, CA
92637

Effective as of 01-JAN-18

ROOHIAN, ARSHIA, DPM

Provider ID: N/A

24331 EL TORO RD STE 370
LAGUNA WOODS, CA
92637

Effective as of 01-DEC-21

ROOHIAN, ARSHIA, DPM

Provider ID: N/A

24331 EL TORO RD STE 370
LAGUNA WOODS, CA
92637

Effective as of 01-JUL-20

***REGISTERED PHYSICAL
THERAPIST***

FRESHMAN, JANELLE, PT†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-FEB-23

FRESHMAN, JANELLE, PT†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-OCT-23

PARK, JOSEPH, PT

Provider ID: N/A

24361 EL TORO RD STE 140
LAGUNA WOODS, CA
92637

Effective as of 01-OCT-23

***SURGERY HAND
ORTHOPEDIC***

KIM, ABRAHAM, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA

**C1. Lista de proveedores de la red
Médico de atención especializada**

92637
Effective as of 01-MAY-22

SURGERY ORTHOPEDIC

AMINIAN, ARASH, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-DEC-21

AMINIAN, ARASH, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JAN-18

AMINIAN, ARASH, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-FEB-21

AMINIAN, ARASH, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-NOV-14

AMINIAN, ARASH, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-MAY-12

AMINIAN, ARASH, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-OCT-22

AMINIAN, ARASH, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-OCT-22

AMINIAN, ARASH, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-DEC-14

AMINIAN, ARASH, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-AUG-11

AMINIAN, ARASH, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JUN-24

AMINIAN, ARASH, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-SEP-23

GRAHAM, SCOTT, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-SEP-23

GRAHAM, SCOTT, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JUN-24

GRAHAM, SCOTT, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-MAR-22

GRAHAM, SCOTT, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-FEB-24

GRAHAM, SCOTT, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-FEB-24

GRAHAM, SCOTT, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-FEB-24

GRAHAM, SCOTT, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-FEB-22

GRAHAM, SCOTT, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA

**C1. Lista de proveedores de la red
Médico de atención especializada**

92637
Effective as of 01-FEB-21

GRAHAM, SCOTT, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-FEB-21

GRAHAM, SCOTT, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JAN-18

GRAHAM, SCOTT, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-FEB-24

GURBANI, AJAY, MD

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-AUG-23

GURBANI, AJAY, MD

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-AUG-23

GURBANI, AJAY, MD

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-AUG-23

GURBANI, AJAY, MD

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-SEP-23

JOHNSON, BRYCE, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-SEP-23

JOHNSON, BRYCE, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-MAY-24

JOHNSON, BRYCE, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-MAY-24

JOHNSON, BRYCE, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-MAR-21

JOHNSON, BRYCE, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JUN-24

JOHNSON, BRYCE, MD†

Provider ID: N/A

24331 EL TORO RD STE 200

LAGUNA WOODS, CA
92637

Effective as of 01-DEC-21

JOHNSON, BRYCE, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JAN-18

JOHNSON, BRYCE, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-FEB-21

KADAKIA, NIMISH, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-DEC-21

KADAKIA, NIMISH, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JUN-24

KADAKIA, NIMISH, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-SEP-23

KIM, ABRAHAM, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-SEP-23

**C1. Lista de proveedores de la red
Médico de atención especializada**

KIM, ABRAHAM, MD† Provider ID: N/A	 24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637	Effective as of 01-JAN-24	KIM, ABRAHAM, MD† Provider ID: N/A	 24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637	Effective as of 01-JAN-24
 24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637	Effective as of 01-JUN-24	KIM, ABRAHAM, MD† Provider ID: N/A	 24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637	Effective as of 01-JAN-24	MOLHO, DAVID, MD Provider ID: N/A
Effective as of 01-OCT-23	KIM, ABRAHAM, MD† Provider ID: N/A	 24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637	Effective as of 01-DEC-18	Effective as of 01-JAN-24	 24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637
KIM, ABRAHAM, MD† Provider ID: N/A	 24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637	Effective as of 01-SEP-20	KIM, ABRAHAM, MD† Provider ID: N/A	 24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637	Teleservice Effective as of 01-JAN-24
KIM, ABRAHAM, MD† Provider ID: N/A	 24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637	Effective as of 01-SEP-18	 24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637	Effective as of 01-AUG-18	MOLHO, DAVID, MD Provider ID: N/A
KIM, ABRAHAM, MD† Provider ID: N/A	 24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637	Effective as of 01-JAN-24	KIM, ABRAHAM, MD† Provider ID: N/A	 24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637	Teleservice Effective as of 01-JAN-24
KIM, ABRAHAM, MD† Provider ID: N/A	 24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637	Effective as of 01-JUN-23	 24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637	Effective as of 01-JAN-23	MOLHO, DAVID, MD Provider ID: N/A
KIM, ABRAHAM, MD† Provider ID: N/A	 24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637	Effective as of 01-JUN-23	KIM, ABRAHAM, MD† Provider ID: N/A	 24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637	Teleservice Effective as of 01-JAN-24
KIM, ABRAHAM, MD† Provider ID: N/A	 24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637	Effective as of 01-JAN-24	 24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637	Effective as of 01-JAN-24	MOLHO, DAVID, MD Provider ID: N/A
KIM, ABRAHAM, MD† Provider ID: N/A	24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637	Effective as of 01-JAN-24	KIM, ABRAHAM, MD† Provider ID: N/A	 24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637	Effective as of 01-JAN-24

**C1. Lista de proveedores de la red
Médico de atención especializada**

LAGUNA WOODS, CA
92637

Teleservice

Effective as of 01-DEC-23

MOLHO, DAVID, MD

Provider ID: N/A

📄 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Teleservice

Effective as of 01-DEC-23

MOLHO, DAVID, MD

Provider ID: N/A

📄 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Teleservice

Effective as of 01-DEC-23

MOLHO, DAVID, MD

Provider ID: N/A

📄 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Teleservice

Effective as of 01-DEC-23

MOLHO, DAVID, MD

Provider ID: N/A

📄 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Teleservice

Effective as of 01-APR-24

MOLHO, DAVID, MD

Provider ID: N/A

📄 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Teleservice

Effective as of 01-APR-24

MOLHO, DAVID, MD

Provider ID: N/A

📄 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Teleservice

Effective as of 01-JUN-24

MOSKOW, LONNIE, MD†

Provider ID: N/A

📄 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JUN-24

MOSKOW, LONNIE, MD†

Provider ID: N/A

📄 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-DEC-11

MOSKOW, LONNIE, MD†

Provider ID: N/A

📄 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-APR-11

MOSKOW, LONNIE, MD†

Provider ID: N/A

📄 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-MAY-22

MOSKOW, LONNIE, MD†

Provider ID: N/A

📄 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-MAY-22

MOSKOW, LONNIE, MD†

Provider ID: N/A

📄 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-MAY-12

MOSKOW, LONNIE, MD†

Provider ID: N/A

📄 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-SEP-23

MOSKOW, LONNIE, MD†

Provider ID: N/A

📄 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JAN-18

MOSKOW, LONNIE, MD†

Provider ID: N/A

📄 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-FEB-21

PATEL, AMAR, MD

Provider ID: N/A

📄 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JAN-24

PATEL, AMAR, MD

Provider ID: N/A

📄 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JAN-24

PATEL, AMAR, MD

Provider ID: N/A

📄 24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

**C1. Lista de proveedores de la red
Médico de atención especializada**

Effective as of 01-JAN-24

PATEL, AMAR, MD

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JAN-24

PYRKO, PETER, MD

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-OCT-23

TOCCI, STEPHEN, MD†

Provider ID: N/A

24310 MOULTON PKWY
STE O563
LAGUNA WOODS, CA
92637

Effective as of 01-JUL-12

TOCCI, STEPHEN, MD†

Provider ID: N/A

24310 MOULTON PKWY
STE O563
LAGUNA WOODS, CA
92637

Effective as of 01-JUL-12

**VENEZIANO, CHRISTOPHER,
MD†**

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-SEP-23

**VENEZIANO, CHRISTOPHER,
MD†**

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA

92637

Effective as of 01-OCT-11

**VENEZIANO, CHRISTOPHER,
MD†**

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JUN-24

**VENEZIANO, CHRISTOPHER,
MD†**

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-MAR-21

**VENEZIANO, CHRISTOPHER,
MD†**

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-MAR-21

**VENEZIANO, CHRISTOPHER,
MD†**

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-MAR-21

**VENEZIANO, CHRISTOPHER,
MD†**

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JAN-24

**VENEZIANO, CHRISTOPHER,
MD†**

MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-DEC-21

**VENEZIANO, CHRISTOPHER,
MD†**

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-AUG-23

**VENEZIANO, CHRISTOPHER,
MD†**

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-AUG-23

**VENEZIANO, CHRISTOPHER,
MD†**

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JAN-24

**VENEZIANO, CHRISTOPHER,
MD†**

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JAN-24

**VENEZIANO, CHRISTOPHER,
MD†**

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA

**C1. Lista de proveedores de la red
Médico de atención especializada**

92637
Effective as of 01-JAN-24

WONG, JEFFREY, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-DEC-21

WONG, JEFFREY, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-DEC-21

WONG, JEFFREY, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-DEC-21

WONG, JEFFREY, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-AUG-19

YOUDERIAN, ARI, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-MAR-16

YOUDERIAN, ARI, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-MAR-16

YOUDERIAN, ARI, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-SEP-23

YOUDERIAN, ARI, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-DEC-21

YOUDERIAN, ARI, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-JAN-18

YOUDERIAN, ARI, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-FEB-15

YOUDERIAN, ARI, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-FEB-15

YOUDERIAN, ARI, MD†

Provider ID: N/A

24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637

Effective as of 01-FEB-21

**CARDIOVASCULAR
DISEASE**

QASQAS, SHADI, MD†

Provider ID: N/A

31571 CANYON ESTATES DR
STE 228
LAKE ELSINORE, CA 92532

Effective as of 01-JAN-17

QASQAS, SHADI, MD†

Provider ID: N/A

31571 CANYON ESTATES DR
STE 228
LAKE ELSINORE, CA 92532

Effective as of 01-MAR-21

QASQAS, SHADI, MD†

Provider ID: N/A

31571 CANYON ESTATES DR
STE 228
LAKE ELSINORE, CA 92532

Effective as of 01-JUL-21

QASQAS, SHADI, MD†

Provider ID: N/A

31571 CANYON ESTATES DR
STE 228
LAKE ELSINORE, CA 92532

Effective as of 01-JUN-17

QASQAS, SHADI, MD†

Provider ID: N/A

31571 CANYON ESTATES DR
STE 228
LAKE ELSINORE, CA 92532

Effective as of 01-MAY-15

QASQAS, SHADI, MD†

Provider ID: N/A

31571 CANYON ESTATES DR
STE 228
LAKE ELSINORE, CA 92532

Effective as of 01-JUL-21

QASQAS, SHADI, MD†

Provider ID: N/A

31571 CANYON ESTATES DR

**C1. Lista de proveedores de la red
Médico de atención especializada**

STE 228
LAKE ELSINORE, CA 92532
Effective as of 01-MAY-15

**CERTIFIED NURSE
PRACTITIONER**

AGORRILLA, MARIA, NP
Provider ID: N/A
31736 MISSION TRL STE G
LAKE ELSINORE, CA 92530
Effective as of 01-OCT-23

HARRIS, PAMELA, NP
Provider ID: N/A
31361 RIVERSIDE DR
LAKE ELSINORE, CA 92530*
Effective as of 01-OCT-24

HERNANDEZ, JESSICA, NP
Provider ID: N/A
31361 RIVERSIDE DR
LAKE ELSINORE, CA 92530*
Effective as of 01-OCT-24

HOWELL, AMANDA, NP
Provider ID: N/A
31361 RIVERSIDE DR
LAKE ELSINORE, CA 92530*
Effective as of 01-OCT-24

HUERTA, STEVEN, NP
Provider ID: N/A
31361 RIVERSIDE DR
LAKE ELSINORE, CA 92530*
Effective as of 01-OCT-24

VALENZUELA, CANDACE, NP
Provider ID: N/A
31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-24

CHIROPRACTOR

HERNANDEZ, MARCO, DC
Provider ID: N/A
30195 FRASER DR
LAKE ELSINORE, CA 92530
Effective as of 01-FEB-24

HERNANDEZ, MARCO, DC
Provider ID: N/A
30195 FRASER DR
LAKE ELSINORE, CA 92530
Effective as of 01-FEB-24

HERNANDEZ, MARCO, DC
Provider ID: N/A
30195 FRASER DR
LAKE ELSINORE, CA 92530
Effective as of 01-FEB-24

HERNANDEZ, MARCO, DC
Provider ID: N/A
30195 FRASER DR
LAKE ELSINORE, CA 92530
Effective as of 01-FEB-24

HERNANDEZ, MARCO, DC
Provider ID: N/A
30195 FRASER DR
LAKE ELSINORE, CA 92530
Effective as of 01-FEB-24

JU, NATHANIEL, DC†
Provider ID: N/A
30195 FRASER DR
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-22

**FEMALE PELVIC MED AND
RECONSTRUCTIVE SURG**

KAAKI, BILAL, MD†
Provider ID: N/A
31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-AUG-22

INTERNAL MEDICINE

ALTRIKI, MOHAMAD, MD†
Provider ID: N/A
425 DIAMOND DR STE 102
LAKE ELSINORE, CA 92530
Effective as of 01-NOV-20

ALTRIKI, MOHAMAD, MD†
Provider ID: N/A
425 DIAMOND DR STE 102
LAKE ELSINORE, CA 92530
Effective as of 01-NOV-20

ALTRIKI, MOHAMAD, MD†
Provider ID: N/A
425 DIAMOND DR STE 102
LAKE ELSINORE, CA 92530
Effective as of 01-OCT-20

MAHESHWARI, ANOOP, MD†
Provider ID: N/A
31571 CANYON ESTATES DR
STE 219
LAKE ELSINORE, CA 92532
Effective as of 01-MAY-15

YU, JERRY, MD†
Provider ID: N/A
425 DIAMOND DR STE 102
LAKE ELSINORE, CA 92530
Effective as of 01-DEC-23

YU, JERRY, MD†
Provider ID: N/A
425 DIAMOND DR STE 102
LAKE ELSINORE, CA 92530
Effective as of 01-AUG-18

YU, JERRY, MD†
Provider ID: N/A
425 DIAMOND DR STE 102
LAKE ELSINORE, CA 92530
Effective as of 01-AUG-18

C1. Lista de proveedores de la red Médico de atención especializada

YU, JERRY, MD†

Provider ID: N/A

📍 425 DIAMOND DR STE 102
LAKE ELSINORE, CA 92530
Effective as of 01-AUG-18

INTERVENTIONAL CARDIOLOGY

ATTIA, NADER, DO†

Provider ID: N/A

📍 31581 CANYON ESTATES
DR
LAKE ELSINORE, CA 92532
Effective as of 01-JAN-19

MESSENGER, BRADLEY, MD†

Provider ID: N/A

📍 31581 CANYON ESTATES
DR
LAKE ELSINORE, CA 92532
Effective as of 01-JAN-19

PAREKH, NIRAJ, MD†

Provider ID: N/A

📍 31581 CANYON ESTATES
DR
LAKE ELSINORE, CA 92532
Effective as of 01-SEP-24

PATANKAR, KAUSTUBH, MD†

Provider ID: N/A

📍 31581 CANYON ESTATES
DR
LAKE ELSINORE, CA 92532
Effective as of 01-JAN-19

SANGODKAR, SANDEEP, DO†

Provider ID: N/A

📍 31581 CANYON ESTATES
DR
LAKE ELSINORE, CA 92532
Effective as of 01-JAN-19

NEPHROLOGY

AKPOROTU, AKPOBO, MD

Provider ID: N/A

📍 31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-24

ALTRIKI, MOHAMAD, MD†

Provider ID: N/A

📍 425 DIAMOND DR STE 102
LAKE ELSINORE, CA 92530
Effective as of 01-FEB-20

ALTRIKI, MOHAMAD, MD†

Provider ID: N/A

📍 425 DIAMOND DR STE 102
LAKE ELSINORE, CA 92530
Effective as of 01-JAN-20

CHANG, DAVID, MD†

Provider ID: N/A

📍 425 DIAMOND DR STE 102
LAKE ELSINORE, CA 92530
Effective as of 01-DEC-23

CHANG, DAVID, MD†

Provider ID: N/A

📍 425 DIAMOND DR STE 102
LAKE ELSINORE, CA 92530
Effective as of 01-AUG-18

CHANG, DAVID, MD†

Provider ID: N/A

📍 425 DIAMOND DR STE 102
LAKE ELSINORE, CA 92530
Effective as of 01-AUG-18

CHANG, DAVID, MD†

Provider ID: N/A

📍 425 DIAMOND DR STE 102
LAKE ELSINORE, CA 92530
Effective as of 01-AUG-18

OBSTETRICS / GYNECOLOGY

FRANCIS, LARRY, MD†

Provider ID: N/A

📍 30195 FRASER DR
LAKE ELSINORE, CA 92530
Effective as of 01-DEC-22

FRANCIS, LARRY, MD†

Provider ID: N/A

📍 30195 FRASER DR
LAKE ELSINORE, CA 92530
Effective as of 01-DEC-22

FRANCIS, LARRY, MD

Provider ID: N/A

📍 31361 RIVERSIDE DR
LAKE ELSINORE, CA 92530
Effective as of 01-AUG-24

FRANCIS, LARRY, MD†

Provider ID: N/A

📍 30195 FRASER DR
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-22

GOMEZ, GUILLERMO, MD†

Provider ID: N/A

📍 141 N MAIN ST
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-21

GOMEZ, GUILLERMO, MD†

Provider ID: N/A

📍 141 N MAIN ST
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-21

GOMEZ, GUILLERMO, MD†


Provider ID: N/A

📍 31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-24


GOMEZ, GUILLERMO, MD†

Provider ID: N/A


C1. Lista de proveedores de la red Médico de atención especializada

 31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-APR-24


GOMEZ, GUILLERMO, MD†
Provider ID: N/A

 31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-APR-24


GOMEZ, GUILLERMO, MD†
Provider ID: N/A

 31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-APR-24


GOMEZ, GUILLERMO, MD†
Provider ID: N/A

 31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-21


GOMEZ, GUILLERMO, MD†
Provider ID: N/A

 31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-21


KAAKI, BILAL, MD†
Provider ID: N/A

 31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-24


REY, RODOLFO, MD†
Provider ID: N/A

 141 N MAIN ST
LAKE ELSINORE, CA 92530
Effective as of 01-JAN-21


REY, RODOLFO, MD†
Provider ID: N/A

 31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-APR-24


REY, RODOLFO, MD†
Provider ID: N/A

 31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-APR-24


REY, RODOLFO, MD†
Provider ID: N/A

 31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-SEP-23


REY, RODOLFO, MD†
Provider ID: N/A

 31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-NOV-22


VADAPARAMPIL, JANET, MD†
Provider ID: N/A

 31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-APR-24


VADAPARAMPIL, JANET, MD†
Provider ID: N/A

 31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-APR-24


VADAPARAMPIL, JANET, MD†
Provider ID: N/A

 31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-APR-24


VADAPARAMPIL, JANET, MD†
Provider ID: N/A

 141 N MAIN ST
LAKE ELSINORE, CA 92530
Effective as of 01-JAN-21

VADAPARAMPIL, JANET, MD†
Provider ID: N/A


 31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-24

VADAPARAMPIL, JANET, MD†
Provider ID: N/A


 31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-JAN-21

OPTOMETRIST


GEE, JENNIFER, OD
Provider ID: N/A

 30195 FRASER DR
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-22


MORA, WENDY, OD
Provider ID: N/A

 30195 FRASER DR
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-22

RICH, RYAN, OD
Provider ID: N/A


 30195 FRASER DR
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-22

TAM, EMILY, OD
Provider ID: N/A

 30195 FRASER DR
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-22

PHYSICIANS ASSISTANT

FATHI, NAGHMEH, PA
Provider ID: N/A

 31581 CANYON ESTATES
DR
LAKE ELSINORE, CA 92532
Effective as of 01-MAY-19

C1. Lista de proveedores de la red Médico de atención especializada

RUIZ-FLORES, ROSE, PA

Provider ID: N/A

425 DIAMOND DR STE 105
LAKE ELSINORE, CA 92530
Effective as of 01-SEP-23

PULMONARY DISEASES

MAHESHWARI, ANOOP, MD†

Provider ID: N/A

31571 CANYON ESTATES DR
STE 219
LAKE ELSINORE, CA 92532
Effective as of 01-JUL-24

MAHESHWARI, ANOOP, MD†

Provider ID: N/A

31571 CANYON ESTATES DR
STE 219
LAKE ELSINORE, CA 92532
Effective as of 01-MAY-15

MAHESHWARI, ANOOP, MD†

Provider ID: N/A

31571 CANYON ESTATES DR
STE 219
LAKE ELSINORE, CA 92532
Effective as of 01-AUG-13

MAHESHWARI, ANOOP, MD†

Provider ID: N/A

31571 CANYON ESTATES DR
STE 219
LAKE ELSINORE, CA 92532
Effective as of 01-AUG-14

REGISTERED PHYSICAL THERAPIST

CASTELLON, SHAWN, PT

Provider ID: N/A

425 DIAMOND DR STE 101
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-23

CASTELLON, SHAWN, PT

Provider ID: N/A

425 DIAMOND DR STE 101
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-23

DUPLECHAN, LAWRENCE, PT

Provider ID: N/A

425 DIAMOND DR STE 101
LAKE ELSINORE, CA 92530
Effective as of 01-MAY-23

DUPLECHAN, LAWRENCE, PT

Provider ID: N/A

425 DIAMOND DR STE 101
LAKE ELSINORE, CA 92530
Effective as of 01-MAY-23

EDDOW, JIM, PT†

Provider ID: N/A

425 DIAMOND DR
LAKE ELSINORE, CA 92530
Effective as of 01-MAY-17

EDDOW, JIM, PT†

Provider ID: N/A

425 DIAMOND DR
LAKE ELSINORE, CA 92530
Effective as of 01-MAY-17

EDDOW, JIM, PT†

Provider ID: N/A

425 DIAMOND DR STE 101
LAKE ELSINORE, CA 92530
Effective as of 01-AUG-20

PLASTER, WHITNEY, PT

Provider ID: N/A

425 DIAMOND DR STE 101
LAKE ELSINORE, CA 92530
Effective as of 01-MAR-23

PLASTER, WHITNEY, PT

Provider ID: N/A

425 DIAMOND DR STE 101

LAKE ELSINORE, CA 92530
Effective as of 01-MAR-23

TSAI, CHIAHONG, PT

Provider ID: N/A

425 DIAMOND DR STE
101ST
LAKE ELSINORE, CA 92530
Effective as of 01-NOV-23

TSAI, CHIAHONG, PT

Provider ID: N/A

425 DIAMOND DR STE
101ST
LAKE ELSINORE, CA 92530
Effective as of 01-NOV-23

VARGHESE, ROSHAN, PT

Provider ID: N/A

425 DIAMOND DR STE 101
LAKE ELSINORE, CA 92530
Effective as of 01-MAY-24

VARGHESE, ROSHAN, PT

Provider ID: N/A

425 DIAMOND DR STE 101
LAKE ELSINORE, CA 92530
Effective as of 01-MAY-24

CERTIFIED

ACUPUNCTURIST

KIM, ILWHA, LAC

Provider ID: N/A

23331 EL TORO RD STE 107
LAKE FOREST, CA 92630
Effective as of 01-AUG-23

WEON, SUK KYENG, LAC

Provider ID: N/A

23361 EL TORO RD STE 112
LAKE FOREST, CA 92630
Effective as of 01-FEB-22

CERTIFIED NURSE

C1. Lista de proveedores de la red Médico de atención especializada

PRACTITIONER

DO, JOCELYN, NP

Provider ID: N/A

26501 RANCHO PKWY S
STE 103
LAKE FOREST, CA 92630
Effective as of 01-MAY-24

TRAN, STEPHANIE, NP

Provider ID: N/A

26501 RANCHO PKWY S
STE 301
LAKE FOREST, CA 92630
Effective as of 01-MAY-24

TRAN, STEPHANIE, NP

Provider ID: N/A

26501 RANCHO PKWY S
STE 301
LAKE FOREST, CA 92630
Effective as of 01-MAR-24

TRAN, STEPHANIE, NP

Provider ID: N/A

26501 RANCHO PKWY S
STE 301
LAKE FOREST, CA 92630
Effective as of 01-AUG-23

DERMATOLOGY

BELL, IRA, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-APR-23

BELL, IRA, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 220
LAKE FOREST, CA 92630
Effective as of 01-DEC-18

BELL, IRA, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-DEC-18

BELL, IRA, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-22

BELL, IRA, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-NOV-18

BELL, IRA, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-22

BELL, IRA, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-22

BELL, IRA, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-22

BELL, IRA, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-22

BELL, IRA, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-22

BENIK, KAREN, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-21

BENIK, KAREN, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-21

BENIK, KAREN, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-NOV-18

BENIK, KAREN, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-DEC-18

BENIK, KAREN, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 220
LAKE FOREST, CA 92630

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-DEC-18

BENIK, KAREN, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-21

BENIK, KAREN, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-21

BENIK, KAREN, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-21

BENIK, KAREN, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-APR-23

BENIK, KAREN, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-FEB-19

MESHKINPOUR, AZIN, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-21

MESHKINPOUR, AZIN, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-21

MESHKINPOUR, AZIN, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-21

MESHKINPOUR, AZIN, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-DEC-18

MESHKINPOUR, AZIN, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 220
LAKE FOREST, CA 92630
Effective as of 01-DEC-18

MESHKINPOUR, AZIN, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-21

MESHKINPOUR, AZIN, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-NOV-18

MESHKINPOUR, AZIN, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210

LAKE FOREST, CA 92630
Effective as of 01-JUL-21

TANG, KIM, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-21

TANG, KIM, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-NOV-18

TANG, KIM, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-NOV-19

TANG, KIM, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-SEP-22

TANG, KIM, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-OCT-18

TANG, KIM, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-DEC-18

C1. Lista de proveedores de la red Médico de atención especializada

TANG, KIM, MD†

Provider ID: N/A

☐ 23832 ROCKFIELD BLVD
STE 220
LAKE FOREST, CA 92630
Effective as of 01-DEC-18

TANG, KIM, MD†

Provider ID: N/A

☐ 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-DEC-18

TANG, KIM, MD†

Provider ID: N/A

☐ 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-21

TANG, KIM, MD†

Provider ID: N/A

☐ 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-21

TANG, KIM, MD†

Provider ID: N/A

☐ 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-21

TANG, KIM, MD†

Provider ID: N/A

☐ 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-21

TANG, KIM, MD†

Provider ID: N/A

☐ 23832 ROCKFIELD BLVD

STE 220
LAKE FOREST, CA 92630
Effective as of 01-DEC-18

TANG, KIM, MD†

Provider ID: N/A

☐ 23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-DEC-18

TANG, KIM, MD†

Provider ID: N/A

☐ 23832 ROCKFIELD BLVD
STE 220
LAKE FOREST, CA 92630
Effective as of 01-DEC-18

EMERGENCY MEDICINE

KENNEDY, GREGORY, MD

Provider ID: N/A

☐ 23321 EL TORO RD STE F
LAKE FOREST, CA 92630
Effective as of 01-MAY-24

ENDOCRINOLOGY

METABOLISM DIABETES

KRISHNAN, PRIYANKA, MD

Provider ID: N/A

☐ 23331 EL TORO RD STE 102
LAKE FOREST, CA 92630
Effective as of 01-OCT-23

KRISHNAN, PRIYANKA, MD

Provider ID: N/A

☐ 23331 EL TORO RD STE 102
LAKE FOREST, CA 92630
Effective as of 01-AUG-21

GASTROENTEROLOGY

ASHRAF, HEBA, MD

Provider ID: N/A

☐ 25982 PALA
STE 140
LAKE FOREST, CA 92691
Effective as of 01-JUN-24

ASHRAF, HEBA, MD

Provider ID: N/A

☐ 25982 PALA
STE 140
LAKE FOREST, CA 92691
Effective as of 01-JUN-24

ASHRAF, HEBA, MD

Provider ID: N/A

☐ 25982 PALA
STE 140
LAKE FOREST, CA 92691
Effective as of 01-JUN-24

ASHRAF, HEBA, MD

Provider ID: N/A

☐ 25982 PALA
STE 140
LAKE FOREST, CA 92691
Effective as of 01-JUN-24

CHOI, DAVID, DO†

Provider ID: N/A

☐ 26672 PORTOLA PKWY STE
104
LAKE FOREST, CA 92610
Effective as of 01-JAN-23

CHOI, DAVID, DO†

Provider ID: N/A

☐ 26672 PORTOLA PKWY STE
104
LAKE FOREST, CA 92610
Effective as of 01-JUL-22

CHOI, DAVID, DO†

Provider ID: N/A

☐ 26672 PORTOLA PKWY STE
104
LAKE FOREST, CA 92610

**C1. Lista de proveedores de la red
Médico de atención especializada**

Effective as of 01-JUL-22	Provider ID: N/A	LAKE FOREST, CA 92630
CHOI, DAVID, DO†	 26501 RANCHO PKWY S STE 103 LAKE FOREST, CA 92630	Effective as of 01-JUN-22
Provider ID: N/A		JECMENICA, MLADEN, MD†
 26672 PORTOLA PKWY STE 104 LAKE FOREST, CA 92610	Effective as of 01-APR-23	Provider ID: N/A
Effective as of 01-JUL-22	JAMAL, MOHAMMAD, MD†	 26501 RANCHO PKWY S STE 103 LAKE FOREST, CA 92630
CHOI, DAVID, DO†	Provider ID: N/A	Effective as of 01-JAN-23
Provider ID: N/A	 26501 RANCHO PKWY S STE 103 LAKE FOREST, CA 92630	JECMENICA, MLADEN, MD†
 26672 PORTOLA PKWY STE 104 LAKE FOREST, CA 92610	Effective as of 01-MAY-24	Provider ID: N/A
Effective as of 01-JUL-22	JAMAL, MOHAMMAD, MD†	 26501 RANCHO PKWY S STE 103 LAKE FOREST, CA 92630
CHOI, DAVID, DO†	Provider ID: N/A	Effective as of 01-JAN-23
Provider ID: N/A	 26501 RANCHO PKWY S STE 103 LAKE FOREST, CA 92630	JECMENICA, MLADEN, MD†
 26672 PORTOLA PKWY STE 104 LAKE FOREST, CA 92610	Effective as of 01-JUN-24	Provider ID: N/A
Effective as of 01-OCT-23	JAMAL, MOHAMMAD, MD†	 26501 RANCHO PKWY S STE 103 LAKE FOREST, CA 92630
JAMAL, MOHAMMAD, MD†	Provider ID: N/A	Effective as of 01-APR-23
Provider ID: N/A	 26501 RANCHO PKWY S STE 103 LAKE FOREST, CA 92630	JECMENICA, MLADEN, MD†
 26501 RANCHO PKWY S STE 103 LAKE FOREST, CA 92630	Effective as of 01-JUN-24	Provider ID: N/A
Effective as of 01-OCT-22	JECMENICA, MLADEN, MD†	 26501 RANCHO PKWY S STE 103 LAKE FOREST, CA 92630
JAMAL, MOHAMMAD, MD†	Provider ID: N/A	Effective as of 01-DEC-23
Provider ID: N/A	 26501 RANCHO PKWY S STE 103 LAKE FOREST, CA 92630	JECMENICA, MLADEN, MD†
 26501 RANCHO PKWY S STE 103 LAKE FOREST, CA 92630	Effective as of 01-JUN-24	Provider ID: N/A
Effective as of 01-APR-24	JECMENICA, MLADEN, MD†	 26501 RANCHO PKWY S STE 103 LAKE FOREST, CA 92630
JAMAL, MOHAMMAD, MD†	Provider ID: N/A	Effective as of 01-DEC-23
Provider ID: N/A	 26501 RANCHO PKWY S STE 103 LAKE FOREST, CA 92630	JECMENICA, MLADEN, MD†
 26501 RANCHO PKWY S STE 103 LAKE FOREST, CA 92630	Effective as of 01-JUN-24	Provider ID: N/A
Effective as of 01-APR-23	JECMENICA, MLADEN, MD†	 26501 RANCHO PKWY S STE 103 LAKE FOREST, CA 92630
JAMAL, MOHAMMAD, MD†	Provider ID: N/A	Effective as of 01-DEC-23
	 26501 RANCHO PKWY S STE 103	

C1. Lista de proveedores de la red Médico de atención especializada

JECMENICA, MLADEN, MD†

Provider ID: N/A

26501 RANCHO PKWY S
STE 103
LAKE FOREST, CA 92630
Effective as of 01-DEC-23

JECMENICA, MLADEN, MD†

Provider ID: N/A

26501 RANCHO PKWY S
STE 103
LAKE FOREST, CA 92630
Effective as of 01-DEC-23

JECMENICA, MLADEN, MD†

Provider ID: N/A

26501 RANCHO PKWY S
STE 103
LAKE FOREST, CA 92630
Effective as of 01-DEC-23

JECMENICA, MLADEN, MD†

Provider ID: N/A

26501 RANCHO PKWY S
STE 103
LAKE FOREST, CA 92630
Effective as of 01-MAY-24

SZU, ERIC, MD

Provider ID: N/A

26501 RANCHO PKWY S
STE 103
LAKE FOREST, CA 92630
Effective as of 01-OCT-23

SZU, ERIC, MD

Provider ID: N/A

26501 RANCHO PKWY S
STE 103
LAKE FOREST, CA 92630
Effective as of 01-OCT-23

SZU, ERIC, MD

Provider ID: N/A

26501 RANCHO PKWY S

STE 103
LAKE FOREST, CA 92630
Effective as of 01-MAY-24

SZU, ERIC, MD

Provider ID: N/A

26501 RANCHO PKWY S
STE 103
LAKE FOREST, CA 92630
Effective as of 01-FEB-23

GYNECOLOGY

WALLACE, PATRICIA, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY
STE 381
LAKE FOREST, CA 92691
Effective as of 01-FEB-24

INTERNAL MEDICINE

CHEN, MAY, MD

Provider ID: N/A

22621 LAKE FOREST DR STE
D1
LAKE FOREST, CA 92630
Effective as of 01-APR-23

CHEN, MAY, MD

Provider ID: N/A

22621 LAKE FOREST DR STE
D1
LAKE FOREST, CA 92630
Effective as of 01-APR-23

NEUROLOGY

NIK, ANDREW, MD

Provider ID: N/A

26800 CROWN VALLEY
PKWY
STE 320
LAKE FOREST, CA 92691

Effective as of 01-MAY-24

NIK, ANDREW, MD

Provider ID: N/A

26800 CROWN VALLEY
PKWY
STE 320
LAKE FOREST, CA 92691
Effective as of 01-MAY-24

OPHTHALMOLOGY

FAZILAT, GOLAREH, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 150
LAKE FOREST, CA 92630
Effective as of 01-NOV-18

FAZILAT, GOLAREH, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 150
LAKE FOREST, CA 92630
Effective as of 01-APR-21

FAZILAT, GOLAREH, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 150
LAKE FOREST, CA 92630
Effective as of 01-JAN-21

FAZILAT, GOLAREH, MD†

Provider ID: N/A

23832 ROCKFIELD BLVD
STE 150
LAKE FOREST, CA 92630
Effective as of 01-APR-21

OPTOMETRIST

WELLS, MARY, OD†

Provider ID: N/A

23591 EL TORO RD STE 145

C1. Lista de proveedores de la red Médico de atención especializada

LAKE FOREST, CA 92630
Effective as of 01-JAN-17

WELLS, MARY, OD[†]

Provider ID: N/A

23591 EL TORO RD STE 145
LAKE FOREST, CA 92630
Effective as of 01-JAN-18

PHYSICIANS ASSISTANT

ANASTASIU, DANIELLE, PA[†]

Provider ID: N/A

24401 MUIRLANDS BLVD
STE A
LAKE FOREST, CA 92630
Effective as of 01-DEC-20

ANASTASIU, DANIELLE, PA[†]

Provider ID: N/A

24401 MUIRLANDS BLVD
STE A
LAKE FOREST, CA 92630
Effective as of 01-DEC-20

ANASTASIU, DANIELLE, PA[†]

Provider ID: N/A

24401 MUIRLANDS BLVD
STE A
LAKE FOREST, CA 92630
Effective as of 01-DEC-20

DELEON, ROBERT, PA[†]

Provider ID: N/A

24401 MUIRLANDS BLVD
STE A
LAKE FOREST, CA 92630
Effective as of 01-DEC-20

DELEON, ROBERT, PA[†]

Provider ID: N/A

24401 MUIRLANDS BLVD
STE A
LAKE FOREST, CA 92630
Effective as of 01-DEC-20

DELEON, ROBERT, PA[†]

Provider ID: N/A

24401 MUIRLANDS BLVD
STE A
LAKE FOREST, CA 92630
Effective as of 01-DEC-20

KIM, JANE, PA

Provider ID: N/A

25982 PALA
STE 140
LAKE FOREST, CA 92691
Effective as of 01-JUN-24

VU, BAO-KHOI, PA

Provider ID: N/A

26501 RANCHO PKWY S
STE 103
LAKE FOREST, CA 92630
Effective as of 01-MAY-24

WHITNEY, LESLIE, PA

Provider ID: N/A

25982 PALA
STE 140
LAKE FOREST, CA 92691
Effective as of 01-JUN-24

WHITNEY, LESLIE, PA

Provider ID: N/A

25982 PALA
STE 140
LAKE FOREST, CA 92691
Effective as of 01-AUG-24

WHITNEY, LESLIE, PA

Provider ID: N/A

25982 PALA
STE 140
LAKE FOREST, CA 92691
Effective as of 01-AUG-24

WU, VANNA, PA

Provider ID: N/A

25982 PALA

STE 140

LAKE FOREST, CA 92691
Effective as of 01-JUN-24

PSYCHIATRY

DESILVA, GAYANI, MD[†]

Provider ID: N/A

24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-DEC-21

DESILVA, GAYANI, MD[†]

Provider ID: N/A

24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-OCT-23

DESILVA, GAYANI, MD[†]

Provider ID: N/A

24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-AUG-23

DESILVA, GAYANI, MD[†]

Provider ID: N/A

24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-AUG-23

DESILVA, GAYANI, MD[†]

Provider ID: N/A

24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-AUG-23

DESILVA, GAYANI, MD[†]

Provider ID: N/A

24432 MUIRLANDS BLVD
STE 131

**C1. Lista de proveedores de la red
Médico de atención especializada**

LAKE FOREST, CA 92630
Effective as of 01-AUG-23

DESILVA, GAYANI, MD†

Provider ID: N/A

24432 MUIRLANDS BLVD
STE 131

LAKE FOREST, CA 92630
Effective as of 01-AUG-23

DESILVA, GAYANI, MD†

Provider ID: N/A

24432 MUIRLANDS BLVD
STE 131

LAKE FOREST, CA 92630
Effective as of 01-AUG-23

DESILVA, GAYANI, MD†

Provider ID: N/A

24432 MUIRLANDS BLVD
STE 131

LAKE FOREST, CA 92630
Effective as of 01-OCT-23

DESILVA, GAYANI, MD†

Provider ID: N/A

24432 MUIRLANDS BLVD
STE 131

LAKE FOREST, CA 92630
Effective as of 01-DEC-21

JAKKULA, JAGAN, MD†

Provider ID: N/A

24432 MUIRLANDS BLVD
STE 131

LAKE FOREST, CA 92630
Effective as of 01-SEP-19

JAKKULA, JAGAN, MD†

Provider ID: N/A

24432 MUIRLANDS BLVD
STE 131

LAKE FOREST, CA 92630
Effective as of 01-SEP-19

JAKKULA, JAGAN, MD†

Provider ID: N/A

24432 MUIRLANDS BLVD
STE 131

LAKE FOREST, CA 92630
Effective as of 01-SEP-19

JAKKULA, JAGAN, MD†

Provider ID: N/A

24432 MUIRLANDS BLVD
STE 131

LAKE FOREST, CA 92630
Effective as of 01-SEP-19

JAKKULA, JAGAN, MD†

Provider ID: N/A

24432 MUIRLANDS BLVD
STE 131

LAKE FOREST, CA 92630
Effective as of 01-MAR-21

JAKKULA, JAGAN, MD†

Provider ID: N/A

24432 MUIRLANDS BLVD
STE 131

LAKE FOREST, CA 92630
Effective as of 01-MAR-21

KANUKUNTLA, TULASI, MD†

Provider ID: N/A

24432 MUIRLANDS BLVD
STE 131

LAKE FOREST, CA 92630
Effective as of 01-OCT-23

KANUKUNTLA, TULASI, MD†

Provider ID: N/A

24432 MUIRLANDS BLVD
STE 131

LAKE FOREST, CA 92630
Effective as of 01-OCT-23

KANUKUNTLA, TULASI, MD†

Provider ID: N/A

24432 MUIRLANDS BLVD

STE 131

LAKE FOREST, CA 92630
Effective as of 01-DEC-21

KANUKUNTLA, TULASI, MD†

Provider ID: N/A

24432 MUIRLANDS BLVD
STE 131

LAKE FOREST, CA 92630
Effective as of 01-NOV-21

KANUKUNTLA, TULASI, MD†

Provider ID: N/A

24432 MUIRLANDS BLVD
STE 131

LAKE FOREST, CA 92630
Effective as of 01-DEC-21

KANUKUNTLA, TULASI, MD†

Provider ID: N/A

24432 MUIRLANDS BLVD
STE 131

LAKE FOREST, CA 92630
Effective as of 01-DEC-21

KANUKUNTLA, TULASI, MD†

Provider ID: N/A

24432 MUIRLANDS BLVD
STE 131

LAKE FOREST, CA 92630
Effective as of 01-DEC-21

KANUKUNTLA, TULASI, MD†

Provider ID: N/A

24432 MUIRLANDS BLVD
STE 131

LAKE FOREST, CA 92630
Effective as of 01-DEC-21

KANUKUNTLA, TULASI, MD†

Provider ID: N/A

24432 MUIRLANDS BLVD
STE 131

LAKE FOREST, CA 92630
Effective as of 01-NOV-21

C1. Lista de proveedores de la red Médico de atención especializada

KANUKUNTLA, TULASI, MD†

Provider ID: N/A

24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-DEC-21

RAJPOOT, DEEPAK, MD†

Provider ID: N/A

24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-FEB-22

RAJPOOT, DEEPAK, MD†

Provider ID: N/A

24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-FEB-22

RAJPOOT, DEEPAK, MD†

Provider ID: N/A

24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-FEB-22

RAJPOOT, DEEPAK, MD†

Provider ID: N/A

24432 MUIRLANDS BLVD
STE 131
LAKE FOREST, CA 92630
Effective as of 01-FEB-22

PSYCHOLOGIST

KANG, EILEEN, PhD

Provider ID: N/A

13 ORCHARD STE 103
LAKE FOREST, CA 92630
Effective as of 01-MAY-15

KANG, EILEEN, PhD

Provider ID: N/A

13 ORCHARD STE 103
LAKE FOREST, CA 92630
Effective as of 01-MAY-15

REGISTERED PHYSICAL THERAPIST

BECKER GALUSHA, JANE, PT

Provider ID: N/A

22821 LAKE FOREST DR STE
100
LAKE FOREST, CA 92630
Effective as of 01-MAY-20

SPEECH PATHOLOGIST

MARSDEN, CLAIRE, SP

Provider ID: N/A

22672 LAMBERT ST STE 611
LAKE FOREST, CA 92630
Effective as of 01-JUN-24

MARSDEN, CLAIRE, SP

Provider ID: N/A

22672 LAMBERT ST STE 612
LAKE FOREST, CA 92630
Effective as of 01-JUN-24

MARSDEN, CLAIRE, SP

Provider ID: N/A

22672 LAMBERT ST STE 611
LAKE FOREST, CA 92630
Effective as of 01-JUL-23

MARSDEN, CLAIRE, SP

Provider ID: N/A

22672 LAMBERT ST STE 612
LAKE FOREST, CA 92630
Effective as of 01-JUL-23

MARSDEN, CLAIRE, SP

Provider ID: N/A

22672 LAMBERT ST STE 611
LAKE FOREST, CA 92630

Effective as of 01-JUL-23

MARSDEN, CLAIRE, SP

Provider ID: N/A

22672 LAMBERT ST STE 612
LAKE FOREST, CA 92630
Effective as of 01-JUL-23

MARSDEN, CLAIRE, SP

Provider ID: N/A

22672 LAMBERT ST STE 611
LAKE FOREST, CA 92630
Effective as of 01-JUL-23

MARSDEN, CLAIRE, SP

Provider ID: N/A

22672 LAMBERT ST STE 612
LAKE FOREST, CA 92630
Effective as of 01-JUL-23

UROLOGY

CHUANG, KAI-WEN, MD

Provider ID: N/A

26691 PLAZA
STE 130
LAKE FOREST, CA 92691
Effective as of 01-JAN-24

CHIROPRACTOR

CASTRO, DAVID, DC

Provider ID: N/A

10039 VINE ST
LAKESIDE, CA 92040
Effective as of 01-JAN-23

FULKS, ZACKARY, DC

Provider ID: N/A

10039 VINE ST
LAKESIDE, CA 92040
Effective as of 01-MAY-23

MANSOUR, RASHAD, DC

Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

10039 VINE ST
LAKESIDE, CA 92040
Effective as of 01-MAR-23

MCCOWN, BARRY, DC

Provider ID: N/A

10039 VINE ST
LAKESIDE, CA 92040
Effective as of 01-DEC-23

ZECHA, RONALD, DC

Provider ID: N/A

10039 VINE ST
LAKESIDE, CA 92040
Effective as of 01-JUL-22

FAMILY PRACTICE

PATEL, RAKESH, MD

Provider ID: N/A

10039 VINE ST
LAKESIDE, CA 92040
Effective as of 01-AUG-24

PSYCHIATRY

LIU-BARBARO, DOROTHY, MD

Provider ID: N/A

10039 VINE ST
LAKESIDE, CA 92040
Effective as of 01-JAN-24

LIU-BARBARO, DOROTHY, MD

Provider ID: N/A

10039 VINE ST
LAKESIDE, CA 92040
Effective as of 01-NOV-22

LIU-BARBARO, DOROTHY, MD

Provider ID: N/A

10039 VINE ST
LAKESIDE, CA 92040
Effective as of 01-NOV-22

LIU-BARBARO, DOROTHY, MD

Provider ID: N/A

10039 VINE ST
LAKESIDE, CA 92040
Effective as of 01-JAN-24

PSYCHOLOGIST

BRUNETTO, HEIDI, PSYD

Provider ID: N/A

10039 VINE ST
LAKESIDE, CA 92040*
Effective as of 01-JAN-24

BRUNETTO, HEIDI, PSYD

Provider ID: N/A

10039 VINE ST
LAKESIDE, CA 92040*
Effective as of 01-JAN-24

ANESTHESIOLOGY

GUIANG, RAINIER, MD†

Provider ID: N/A

27990 SHERMAN RD
MENIFEE, CA 92585
Effective as of 01-SEP-19

HYUN, SUZANNE, MD

Provider ID: N/A

27990 SHERMAN RD
MENIFEE, CA 92585
Effective as of 01-MAR-24

PANG, GARY, MD†

Provider ID: N/A

27990 SHERMAN RD
MENIFEE, CA 92585
Effective as of 01-MAR-24

PANG, GARY, MD†

Provider ID: N/A

27990 SHERMAN RD
MENIFEE, CA 92585
Effective as of 01-SEP-19

ANESTHESIOLOGY PAIN MANAGEMENT

CHEN, HAMILTON, MD†

Provider ID: N/A

27990 SHERMAN RD
MENIFEE, CA 92585
Effective as of 01-SEP-19

CHEN, HAMILTON, MD†

Provider ID: N/A

27990 SHERMAN RD
MENIFEE, CA 92585
Effective as of 01-SEP-19

CHEN, HAMILTON, MD†

Provider ID: N/A

27990 SHERMAN RD
MENIFEE, CA 92585
Effective as of 01-MAY-21

GUIANG, RAINIER, MD†

Provider ID: N/A

27990 SHERMAN RD
MENIFEE, CA 92585
Effective as of 01-MAR-24

GUIANG, RAINIER, MD†

Provider ID: N/A

27990 SHERMAN RD
MENIFEE, CA 92585
Effective as of 01-MAY-21

GUIANG, RAINIER, MD†

Provider ID: N/A

27990 SHERMAN RD
MENIFEE, CA 92585
Effective as of 01-JUL-24

HYUN, SUZANNE, MD

Provider ID: N/A

27990 SHERMAN RD
MENIFEE, CA 92585
Effective as of 01-JUL-24

C1. Lista de proveedores de la red Médico de atención especializada

PANG, GARY, MD[†]

Provider ID: N/A

📍 27990 SHERMAN RD
MENIFEE, CA 92586
Effective as of 01-JUL-24

PANG, GARY, MD[†]

Provider ID: N/A

📍 27990 SHERMAN RD
MENIFEE, CA 92586
Effective as of 01-MAY-21

CARDIOVASCULAR DISEASE

ALFAY, WISAM, MD

Provider ID: N/A

📍 26960 CHERRY HILLS
BLVD STE C
MENIFEE, CA 92586
Effective as of 01-JAN-22

ALFAY, WISAM, MD

Provider ID: N/A

📍 26960 CHERRY HILLS
BLVD STE C
MENIFEE, CA 92586
Effective as of 01-MAR-22

TIWARI, RATAN, MD

Provider ID: N/A

📍 26960 CHERRY HILLS
BLVD STE A
MENIFEE, CA 92586
Effective as of 01-JUL-24

CERTIFIED NURSE PRACTITIONER

LUCACI, BIANCA, NP

Provider ID: N/A

📍 29826 HAUN RD STE 300
MENIFEE, CA 92586
Effective as of 01-APR-23

MELOT, KAREN, NP

Provider ID: N/A

📍 29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-DEC-20

MELOT, KAREN, NP

Provider ID: N/A

📍 29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-AUG-20

MELOT, KAREN, NP

Provider ID: N/A

📍 29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-AUG-20

NGUYEN, ANDY, NP

Provider ID: N/A

📍 29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-AUG-23

NGUYEN, ANDY, NP

Provider ID: N/A

📍 29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-AUG-23

NGUYEN, ANDY, NP

Provider ID: N/A

📍 29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-NOV-23

PAULHUS, PATRICIA, NP[†]

Provider ID: N/A

📍 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-JUN-19

PAULHUS, PATRICIA, NP[†]

Provider ID: N/A

📍 27851 BRADLEY RD STE 125

MENIFEE, CA 92586
Effective as of 01-JUN-19

PAULHUS, PATRICIA, NP[†]

Provider ID: N/A

📍 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-DEC-20

PAULHUS, PATRICIA, NP[†]

Provider ID: N/A

📍 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-MAR-21

PAULHUS, PATRICIA, NP[†]

Provider ID: N/A

📍 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-JUN-19

PAULHUS, PATRICIA, NP[†]

Provider ID: N/A

📍 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-JUN-19

SERAILE, KIRSTEN, NP

Provider ID: N/A

📍 29826 HAUN RD STE 204
MENIFEE, CA 92586
Effective as of 01-MAY-22

SERAILE, KIRSTEN, NP

Provider ID: N/A

📍 29826 HAUN RD STE 204
MENIFEE, CA 92586
Effective as of 01-MAY-22

VAHDAT, VALERIE, NP

Provider ID: N/A

📍 26926 CHERRY HILLS
BLVD STE B
MENIFEE, CA 92586
Effective as of 01-JUN-24

C1. Lista de proveedores de la red Médico de atención especializada

VIERA, LIANA, NP†

Provider ID: N/A

29826 HAUN RD STE 300
MENIFEE, CA 92586
Effective as of 01-JAN-22

VIERA, LIANA, NP†

Provider ID: N/A

29826 HAUN RD STE 300
MENIFEE, CA 92586
Effective as of 01-JAN-22

CHIROPRACTOR

FARSHLER, ANTHONY, DC†

Provider ID: N/A

26926 CHERRY HILLS
BLVD STE B
MENIFEE, CA 92586
Effective as of 01-JUL-22

SHERIDAN, SHANE, DC

Provider ID: N/A

26926 CHERRY HILLS
BLVD STE B
MENIFEE, CA 92586
Effective as of 01-JUL-22

DERMATOLOGY

JACOBS, RANDOLPH, MD

Provider ID: N/A

28120 BRADLEY RD
MENIFEE, CA 92586
Effective as of 01-DEC-18

JACOBS, RANDOLPH, MD

Provider ID: N/A

28120 BRADLEY RD
MENIFEE, CA 92586
Effective as of 01-AUG-24

JACOBS, RANDOLPH, MD

Provider ID: N/A

28120 BRADLEY RD
MENIFEE, CA 92586
Effective as of 01-AUG-24

JACOBS, RANDOLPH, MD

Provider ID: N/A

28120 BRADLEY RD
MENIFEE, CA 92586
Effective as of 01-JAN-18

JACOBS, RANDOLPH, MD

Provider ID: N/A

28120 BRADLEY RD
MENIFEE, CA 92586
Effective as of 01-JAN-18

KOUPAIE, JAFAR, MD

Provider ID: N/A

29798 HAUN RD STE 104
MENIFEE, CA 92586
Effective as of 01-JUL-24

KOUPAIE, JAFAR, MD

Provider ID: N/A

29798 HAUN RD STE 104
MENIFEE, CA 92586
Effective as of 01-MAY-24

MITCHELL, JESSE, MD†

Provider ID: N/A

29798 HAUN RD STE 104
MENIFEE, CA 92586
Effective as of 01-AUG-18

MITCHELL, JESSE, MD†

Provider ID: N/A

29798 HAUN RD STE 104
MENIFEE, CA 92586
Effective as of 01-AUG-18

MITCHELL, JESSE, MD†

Provider ID: N/A

29798 HAUN RD STE 104
MENIFEE, CA 92586
Effective as of 01-JUL-24

MITCHELL, JESSE, MD†

Provider ID: N/A

29798 HAUN RD STE 104
MENIFEE, CA 92586
Effective as of 01-JUL-21

MITCHELL, JESSE, MD†

Provider ID: N/A

29798 HAUN RD STE 104
MENIFEE, CA 92586
Effective as of 01-JUL-21

MITCHELL, JESSE, MD†

Provider ID: N/A

29798 HAUN RD STE 104
MENIFEE, CA 92586
Effective as of 01-AUG-18

MITCHELL, JESSE, MD†

Provider ID: N/A

29798 HAUN RD STE 104
MENIFEE, CA 92586
Effective as of 01-AUG-18

ENDOCRINOLOGY

METABOLISM DIABETES

HAIDER, UZMA, MD†

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-JUL-21

HAIDER, SHANZAY, MD

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-MAR-24

HAIDER, SHANZAY, MD

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-MAR-24

C1. Lista de proveedores de la red Médico de atención especializada

HAIDER, SHANZAY, MD

Provider ID: N/A

📍 29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-MAR-24

HAIDER, SHANZAY, MD

Provider ID: N/A

📍 29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-MAR-24

HAIDER, UZMA, MD†

Provider ID: N/A

📍 29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-NOV-23

HAIDER, UZMA, MD†

Provider ID: N/A

📍 29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-DEC-20

HAIDER, UZMA, MD†

Provider ID: N/A

📍 29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-APR-24

HAIDER, UZMA, MD†

Provider ID: N/A

📍 29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-DEC-20

FAMILY PRACTICE

ZURITA, DANIELA, MD†

Provider ID: N/A

📍 26926 CHERRY HILLS
BLVD STE B
MENIFEE, CA 92586
Effective as of 01-NOV-22

GASTROENTEROLOGY

FLANNERY, CHRISTOPHER, MD

Provider ID: N/A

📍 29826 HAUN RD STE 308
MENIFEE, CA 92586
Effective as of 01-APR-23

FLANNERY, CHRISTOPHER, MD

Provider ID: N/A

📍 29826 HAUN RD STE 308
MENIFEE, CA 92586
Effective as of 01-APR-23

INTERNAL MEDICINE

JACOBS, NATALIA, MD

Provider ID: N/A

📍 28120 BRADLEY RD
MENIFEE, CA 92586
Effective as of 01-MAY-23

LAC, PETER, MD†

Provider ID: N/A

📍 29878 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-JAN-22

NAGASUNDER, ARABHI, DO

Provider ID: N/A

📍 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Teleservice
Effective as of 01-SEP-23

NAGASUNDER, ARABHI, DO

Provider ID: N/A

📍 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Teleservice
Effective as of 01-SEP-23

NAGASUNDER, ARABHI, DO

Provider ID: N/A

📍 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Teleservice
Effective as of 01-SEP-23

NAGASUNDER, ARABHI, DO

Provider ID: N/A

📍 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Teleservice
Effective as of 01-SEP-23

INTERVENTIONAL CARDIOLOGY

GOKHROO, RAHUL, MD†

Provider ID: N/A

📍 26960 CHERRY HILLS
BLVD STE A
MENIFEE, CA 92586
Effective as of 01-DEC-22

GOKHROO, RAHUL, MD†

Provider ID: N/A

📍 26960 CHERRY HILLS
BLVD STE A
MENIFEE, CA 92586
Effective as of 01-DEC-22

LICENSED CLINICAL SOCIAL WORKER

SIERRAS, KELLI, LCSW

Provider ID: N/A

📍 26926 CHERRY HILLS
BLVD STE B AND C
MENIFEE, CA 92586
Effective as of 01-MAY-24

SIERRAS, KELLI, LCSW

Provider ID: N/A

📍 26926 CHERRY HILLS

C1. Lista de proveedores de la red Médico de atención especializada

BLVD STE B AND C
MENIFEE, CA 92586
Effective as of 01-MAY-24

TABIL-GALAPON, BERNICE, LCSW

Provider ID: N/A

📄 26926 CHERRY HILLS
BLVD STE C
MENIFEE, CA 92586
Effective as of 01-JUL-23

NEPHROLOGY

CHARLES COWAN, TRICIA, DO†

Provider ID: N/A

📄 29878 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-SEP-17

CHARLES COWAN, TRICIA, DO†

Provider ID: N/A

📄 29878 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-SEP-17

CHARLES COWAN, TRICIA, DO†

Provider ID: N/A

📄 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-OCT-20

CHARLES COWAN, TRICIA, DO†

Provider ID: N/A

📄 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-JUN-19

CHARLES COWAN, TRICIA, DO†

Provider ID: N/A

📄 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-JUN-19

CHARLES COWAN, TRICIA, DO†

Provider ID: N/A

📄 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-JUN-19

CHARLES COWAN, TRICIA, DO†

Provider ID: N/A

📄 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-JUN-19

LAC, PETER, MD†

Provider ID: N/A

📄 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-JUN-19

LAC, PETER, MD†

Provider ID: N/A

📄 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-JUN-19

LAC, PETER, MD†

Provider ID: N/A

📄 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-JUN-19

LAC, PETER, MD†

Provider ID: N/A

📄 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-DEC-23

LAC, PETER, MD†

Provider ID: N/A

📄 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-JUN-19

LAC, PETER, MD†

Provider ID: N/A

📄 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-MAR-21

LAC, PETER, MD†

Provider ID: N/A

📄 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-NOV-19

NAGASUNDER, ARABHI, DO

Provider ID: N/A

📄 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Teleservice
Effective as of 01-OCT-23

NAGASUNDER, ARABHI, DO

Provider ID: N/A

📄 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Teleservice
Effective as of 01-OCT-23

NAGASUNDER, ARABHI, DO

Provider ID: N/A

📄 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Teleservice
Effective as of 01-NOV-23

NATH, ASHOK, MD†

Provider ID: N/A

📄 27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-JUN-19

NATH, ASHOK, MD†

Provider ID: N/A

**C1. Lista de proveedores de la red
Médico de atención especializada**

27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Effective as of 01-JUN-19

NATH, ASHOK, MD†

Provider ID: N/A

29878 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-MAR-19

YAN, ERIC, MD†

Provider ID: N/A

27851 BRADLEY RD STE 125
MENIFEE, CA 92586

Teleservice

Effective as of 01-JUN-19

YAN, ERIC, MD†

Provider ID: N/A

27851 BRADLEY RD STE 125
MENIFEE, CA 92586

Teleservice

Effective as of 01-JUN-19

YAN, ERIC, MD†

Provider ID: N/A

27851 BRADLEY RD STE 125
MENIFEE, CA 92586

Teleservice

Effective as of 01-JUN-19

YAN, ERIC, MD†

Provider ID: N/A

27851 BRADLEY RD STE 125
MENIFEE, CA 92586

Teleservice

Effective as of 01-JUN-19

YAN, ERIC, MD†

Provider ID: N/A

27851 BRADLEY RD STE 125
MENIFEE, CA 92586

Teleservice

Effective as of 01-JUN-19

YAN, ERIC, MD†

Provider ID: N/A

27851 BRADLEY RD STE 125
MENIFEE, CA 92586

Teleservice

Effective as of 01-JUL-23

YAN, ERIC, MD†

Provider ID: N/A

27851 BRADLEY RD STE 125
MENIFEE, CA 92586

Teleservice

Effective as of 01-MAY-20

YOUSSEF, AMR, DO†

Provider ID: N/A

27851 BRADLEY RD STE 125
MENIFEE, CA 92586

Effective as of 01-SEP-22

YOUSSEF, AMR, DO†

Provider ID: N/A

27851 BRADLEY RD STE 125
MENIFEE, CA 92586

Effective as of 01-JUN-22

YOUSSEF, AMR, DO†

Provider ID: N/A

27851 BRADLEY RD STE 125
MENIFEE, CA 92586

Effective as of 01-SEP-22

NEUROLOGY

TALANKI, VARUN, MD

Provider ID: N/A

29826 HAUN RD STE 209
MENIFEE, CA 92586

Effective as of 01-DEC-22

**OBSTETRICS /
GYNECOLOGY**

HOM, KATHERINE, MD†

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586

Effective as of 01-JUL-23

RIZVI, SYED, MD†

Provider ID: N/A

27174 NEWPORT RD STE 2
MENIFEE, CA 92584

Effective as of 01-MAR-22

URSO, MARY JO, DO†

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586

Effective as of 01-AUG-20

URSO, MARY JO, DO†

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586

Effective as of 01-JUL-23

URSO, MARY JO, DO†

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586

Effective as of 01-AUG-20

URSO, MARY JO, DO†

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586

Effective as of 01-AUG-21

**OCCUPATIONAL
THERAPIST**

MERCADO, ROBIN, MD

Provider ID: N/A

30141 ANTELOPE RD STE A
MENIFEE, CA 92584

Effective as of 01-MAY-24

MERCADO, ROBIN, MD

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-MAY-24

STOTLER, APRIL, OT

Provider ID: N/A

30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-JAN-24

STOTLER, APRIL, OT

Provider ID: N/A

30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-JAN-24

ZECHA, RICHARD, OT†

Provider ID: N/A

30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-JAN-21

ZECHA, RICHARD, OT†

Provider ID: N/A

30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-JAN-21

OPHTHALMOLOGY

CHAWLA, ANUJ, MD†

Provider ID: N/A

29950 HAUN RD STE 202
MENIFEE, CA 92586
Effective as of 01-JUN-16

CHAWLA, ANUJ, MD†

Provider ID: N/A

29950 HAUN RD STE 202
MENIFEE, CA 92586
Effective as of 01-JUL-23

CHOW, JASON, MD†

Provider ID: N/A

27168 NEWPORT RD STE 4
MENIFEE, CA 92584
Effective as of 01-JUL-23

CULOTTA, ANTHONY, MD†

Provider ID: N/A

29950 HAUN RD STE 202
MENIFEE, CA 92586
Teleservice
Effective as of 01-JUL-23

CULOTTA, ANTHONY, MD†

Provider ID: N/A

29950 HAUN RD STE 202
MENIFEE, CA 92586
Teleservice
Effective as of 01-NOV-20

DAVIS, MICHAEL, MD†

Provider ID: N/A

29950 HAUN RD STE 202
MENIFEE, CA 92586
Teleservice
Effective as of 01-SEP-24

GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A

29950 HAUN RD STE 202
MENIFEE, CA 92586
Effective as of 01-OCT-17

LAZZARINI, THOMAS, MD

Provider ID: N/A

29798 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-FEB-24

LAZZARINI, THOMAS, MD

Provider ID: N/A

29798 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-FEB-24

LAZZARINI, THOMAS, MD

Provider ID: N/A

29798 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-FEB-24

LAZZARINI, THOMAS, MD

Provider ID: N/A

29798 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-FEB-24

LEE, JOHN, MD†

Provider ID: N/A

29826 HAUN RD STE 100
MENIFEE, CA 92586
Effective as of 01-JUL-23

LIN, THEODORE, MD†

Provider ID: N/A

29798 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-APR-24

LIN, THEODORE, MD†

Provider ID: N/A

29798 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-APR-24

LIN, THEODORE, MD†

Provider ID: N/A

29798 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-SEP-17

LOBUE, THOMAS, MD

Provider ID: N/A

29950 HAUN RD STE 206
MENIFEE, CA 92586
Effective as of 01-APR-14

SAMUEL, MICHAEL, MD†

Provider ID: N/A

29950 HAUN RD STE 202
MENIFEE, CA 92586
Teleservice

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-JUL-23

SKINNER, ANTHONY, MD

Provider ID: N/A

29826 HAUN RD STE 100
MENIFEE, CA 92586

Effective as of 01-APR-24

SKINNER, ANTHONY, MD

Provider ID: N/A

29826 HAUN RD STE 100
MENIFEE, CA 92586

Effective as of 01-APR-24

SKINNER, ANTHONY, MD

Provider ID: N/A

29826 HAUN RD STE 100
MENIFEE, CA 92586

Effective as of 01-APR-24

SKINNER, ANTHONY, MD

Provider ID: N/A

29826 HAUN RD STE 100
MENIFEE, CA 92586

Effective as of 01-JUN-24

SKINNER, ANTHONY, MD

Provider ID: N/A

29826 HAUN RD STE 100
MENIFEE, CA 92586

Effective as of 01-JUN-24

ZHOU, SIWEI, MD†

Provider ID: N/A

27168 NEWPORT RD STE 4
MENIFEE, CA 92584

Effective as of 01-JUL-23

OPTOMETRIST

ARCHIBALD, JOHN, OD†

Provider ID: N/A

27168 NEWPORT RD STE 4
MENIFEE, CA 92584

Effective as of 01-JUL-23

ARCHIBALD, JOHN, OD†

Provider ID: N/A

27168 NEWPORT RD STE 4
MENIFEE, CA 92584

Effective as of 01-DEC-23

BARR, AUSTIN, OD

Provider ID: N/A

29826 HAUN RD STE 100
MENIFEE, CA 92586

Effective as of 01-MAR-23

BARR, AUSTIN, OD

Provider ID: N/A

29826 HAUN RD STE 100
MENIFEE, CA 92586

Effective as of 01-NOV-22

BARR, AUSTIN, OD

Provider ID: N/A

29826 HAUN RD STE 100
MENIFEE, CA 92586

Effective as of 01-NOV-22

BARR, AUSTIN, OD

Provider ID: N/A

29826 HAUN RD STE 100
MENIFEE, CA 92586

Effective as of 01-NOV-22

FENNEMA, ERIC, OD†

Provider ID: N/A

27168 NEWPORT RD STE 4
MENIFEE, CA 92584

Effective as of 01-SEP-22

FENNEMA, ERIC, OD†

Provider ID: N/A

27168 NEWPORT RD STE 4
MENIFEE, CA 92584

Effective as of 01-FEB-22

HAMOUIE, JUDY, OD†

Provider ID: N/A

29950 HAUN RD STE 202
MENIFEE, CA 92586

Effective as of 01-NOV-22

HAMOUIE, JUDY, OD†

Provider ID: N/A

29950 HAUN RD STE 202
MENIFEE, CA 92586

Effective as of 01-NOV-22

HAMOUIE, JUDY, OD†

Provider ID: N/A

29950 HAUN RD STE 202
MENIFEE, CA 92586

Effective as of 01-NOV-22

HAMOUIE, JUDY, OD†

Provider ID: N/A

29950 HAUN RD STE 202
MENIFEE, CA 92586

Effective as of 01-NOV-22

HAMOUIE, JUDY, OD†

Provider ID: N/A

29950 HAUN RD STE 202
MENIFEE, CA 92586

Effective as of 01-NOV-21

HAMOUIE, JUDY, OD†

Provider ID: N/A

29950 HAUN RD STE 202
MENIFEE, CA 92586

Effective as of 01-JUL-23

MCINTYRE, DEBRA, OD†

Provider ID: N/A

29826 HAUN RD STE 100
MENIFEE, CA 92586

Effective as of 01-DEC-17

MCINTYRE, DEBRA, OD†

Provider ID: N/A

29826 HAUN RD STE 100
MENIFEE, CA 92586

Effective as of 01-DEC-17

C1. Lista de proveedores de la red Médico de atención especializada

MCINTYRE, DEBRA, OD†

Provider ID: N/A

29826 HAUN RD STE 100
MENIFEE, CA 92586
Effective as of 01-DEC-17

MILLER, RYAN, OD

Provider ID: N/A

29950 HAUN RD STE 206
MENIFEE, CA 92586
Effective as of 01-APR-14

TO, BRITTANY, OD

Provider ID: N/A

29826 HAUN RD STE 100
MENIFEE, CA 92586
Effective as of 01-JUL-23

ULIBARRI, MATTHEW, OD†

Provider ID: N/A

29826 HAUN RD STE 100
MENIFEE, CA 92586
Effective as of 01-AUG-15

ULIBARRI, MATTHEW, OD†

Provider ID: N/A

29826 HAUN RD STE 100
MENIFEE, CA 92586
Effective as of 01-AUG-15

ULIBARRI, MATTHEW, OD†

Provider ID: N/A

29826 HAUN RD STE 100
MENIFEE, CA 92586
Effective as of 01-JAN-22

ULIBARRI, MATTHEW, OD†

Provider ID: N/A

29826 HAUN RD STE 100
MENIFEE, CA 92586
Effective as of 01-AUG-15

ULIBARRI, MATTHEW, OD†

Provider ID: N/A

29826 HAUN RD STE 100
MENIFEE, CA 92586
Effective as of 01-JUL-23

PHYS MED/ REHAB PAIN MEDICINE

CHEN, HAMILTON, MD†

Provider ID: N/A

27990 SHERMAN RD
MENIFEE, CA 92585
Effective as of 01-JUL-24

PHYSICAL MEDICINE / REHABILITATION

CHEN, HAMILTON, MD†

Provider ID: N/A

27990 SHERMAN RD
MENIFEE, CA 92585
Effective as of 01-MAR-24

PHYSICIANS ASSISTANT

BUSTAMANTE, ANGEL, PA†

Provider ID: N/A

29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-AUG-20

BUSTAMANTE, ANGEL, PA†

Provider ID: N/A

29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-MAR-21

HUNSAKER, NALANI, PA†

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-NOV-23

HUNSAKER, NALANI, PA†

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-DEC-20

HUNSAKER, NALANI, PA†

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-DEC-20

LOPEZ, MARIA, PA†

Provider ID: N/A

26926 CHERRY HILLS
BLVD STE B
MENIFEE, CA 92586
Effective as of 01-AUG-21

PSYCHIATRY

ANDERSEN, CLAIRE, MD

Provider ID: N/A

26926 CHERRY HILLS
BLVD STE B
MENIFEE, CA 92586
Effective as of 01-DEC-20

ANDERSEN, CLAIRE, MD

Provider ID: N/A

26926 CHERRY HILLS
BLVD STE B
MENIFEE, CA 92586
Effective as of 01-DEC-20

PERSAUD, PRIA, MD

Provider ID: N/A

26926 CHERRY HILLS
BLVD STE B
MENIFEE, CA 92586
Effective as of 01-AUG-20

PERSAUD, PRIA, MD

Provider ID: N/A

26926 CHERRY HILLS
BLVD STE B
MENIFEE, CA 92586

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-AUG-20

PERSAUD, PRIA, MD

Provider ID: N/A

📍 26926 CHERRY HILLS
BLVD STE B
MENIFEE, CA 92586

Effective as of 01-AUG-20

PERSAUD, PRIA, MD

Provider ID: N/A

📍 26926 CHERRY HILLS
BLVD STE B
MENIFEE, CA 92586

Effective as of 01-AUG-20

SUNDER, RAJAGOPAL, MD

Provider ID: N/A

📍 28400 MCCALL BLVD
MENIFEE, CA 92585

Effective as of 01-JUL-24

SUNDER, RAJAGOPAL, MD

Provider ID: N/A

📍 28400 MCCALL BLVD
MENIFEE, CA 92585

Effective as of 01-JUL-24

PSYCHIATRY CHILD

ANDERSEN, CLAIRE, MD

Provider ID: N/A

📍 26926 CHERRY HILLS
BLVD STE B
MENIFEE, CA 92586

Effective as of 01-DEC-20

ANDERSEN, CLAIRE, MD

Provider ID: N/A

📍 26926 CHERRY HILLS
BLVD STE B
MENIFEE, CA 92586

Effective as of 01-DEC-20

RADIOLOGY DIAGNOSTIC

BENZL, ROBERT, MD

Provider ID: N/A

📍 27168 NEWPORT RD STE B
MENIFEE, CA 92584

Effective as of 01-JUL-24

REGISTERED PHYSICAL THERAPIST

ALEXANDER, AUSTIN, PT

Provider ID: N/A

📍 29798 HAUN RD STE 201
MENIFEE, CA 92586

Effective as of 01-DEC-20

ALEXANDER, AUSTIN, PT

Provider ID: N/A

📍 29798 HAUN RD STE 201
MENIFEE, CA 92586

Effective as of 01-DEC-20

ALEXANDER, AUSTIN, PT

Provider ID: N/A

📍 30141 ANTELOPE RD STE A
MENIFEE, CA 92584

Effective as of 01-DEC-20

ALEXANDER, AUSTIN, PT

Provider ID: N/A

📍 30141 ANTELOPE RD STE A
MENIFEE, CA 92584

Effective as of 01-DEC-20

BARI, MONICA, PT

Provider ID: N/A

📍 30141 ANTELOPE RD STE A
MENIFEE, CA 92584

Effective as of 01-DEC-23

BARI, MONICA, PT

Provider ID: N/A

📍 30141 ANTELOPE RD STE A
MENIFEE, CA 92584

Effective as of 01-DEC-23

COBURN, PIERRE, PT

Provider ID: N/A

📍 30141 ANTELOPE RD STE A
MENIFEE, CA 92584

Effective as of 01-JAN-24

COBURN, PIERRE, PT

Provider ID: N/A

📍 30141 ANTELOPE RD STE A
MENIFEE, CA 92584

Effective as of 01-JAN-24

FOX, DELANIE, PT

Provider ID: N/A

📍 30141 ANTELOPE RD STE A
MENIFEE, CA 92584

Effective as of 01-OCT-23

FOX, DELANIE, PT

Provider ID: N/A

📍 30141 ANTELOPE RD STE A
MENIFEE, CA 92584

Effective as of 01-OCT-23

GARCIA, JASON, PT†

Provider ID: N/A

📍 29798 HAUN RD STE 201
MENIFEE, CA 92586

Effective as of 01-JAN-23

GARCIA, JASON, PT†

Provider ID: N/A

📍 29798 HAUN RD STE 201
MENIFEE, CA 92586

Effective as of 01-JAN-23

HARMAN, JACY, PT†

Provider ID: N/A

📍 29798 HAUN RD STE 201
MENIFEE, CA 92586

Effective as of 01-JAN-22

HARMAN, JACY, PT†

Provider ID: N/A

📍 29798 HAUN RD STE 201

C1. Lista de proveedores de la red Médico de atención especializada

MENIFEE, CA 92586
Effective as of 01-JAN-22

HARMAN, JACY, PT†

Provider ID: N/A

30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-JAN-22

HARMAN, JACY, PT†

Provider ID: N/A

30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-JAN-22

HIGGINS, DAWN, PT†

Provider ID: N/A

29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-JUL-22

HIGGINS, DAWN, PT†

Provider ID: N/A

29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-JUL-22

KESEL, KELSEY, PT

Provider ID: N/A

29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-MAR-24

KESEL, KELSEY, PT

Provider ID: N/A

29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-MAR-24

KESEL, KELSEY, PT

Provider ID: N/A

30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-MAR-24

KESEL, KELSEY, PT

Provider ID: N/A

30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-MAR-24

PATEL, BINOY, PT†

Provider ID: N/A

29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-SEP-17

PATEL, BINOY, PT†

Provider ID: N/A

29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-SEP-17

REED, SAVONNA, PT†

Provider ID: N/A

29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-JAN-21

REED, SAVONNA, PT†

Provider ID: N/A

29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-JAN-21

REED, SAVONNA, PT†

Provider ID: N/A

30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-JAN-21

REED, SAVONNA, PT†

Provider ID: N/A

30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-JAN-21

SABIN, SCOTT, PT†

Provider ID: N/A

29798 HAUN RD STE 201

MENIFEE, CA 92586
Effective as of 01-FEB-19

SABIN, SCOTT, PT†

Provider ID: N/A

29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-FEB-19

SABIN, SCOTT, PT†

Provider ID: N/A

30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-FEB-19

SABIN, SCOTT, PT†

Provider ID: N/A

30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-FEB-19

SANCHEZ, EMILY, PT

Provider ID: N/A

30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-JUN-23

SANCHEZ, EMILY, PT

Provider ID: N/A

30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-JUN-23

SANCHEZ, EMILY, PT

Provider ID: N/A

29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-JUN-23

SANCHEZ, EMILY, PT

Provider ID: N/A

29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-JUN-23

CI. Lista de proveedores de la red Médico de atención especializada

RHEUMATOLOGY

BRAVO, ARLENE, MD†

Provider ID: N/A

29798 HAUN RD
MENIFEE, CA 92586
Effective as of 01-APR-21

COLBURN, KEITH, MD†

Provider ID: N/A

29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-MAR-21

MEHTA, CHANDRAKANT, MD†

Provider ID: N/A

29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-SEP-18

MEHTA, AMAL, MD†

Provider ID: N/A

29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-SEP-18

MEHTA, AMAL, MD†

Provider ID: N/A

29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-MAR-21

MEHTA, CHANDRAKANT, MD†

Provider ID: N/A

29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-OCT-09

MEHTA, AMAL, MD†

Provider ID: N/A

29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-JUL-23

MEHTA, CHANDRAKANT, MD†

Provider ID: N/A

29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-MAR-21

RAMASWAMY, DHARMARAJAN, MD†

Provider ID: N/A

29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-MAR-21

RAMASWAMY, DHARMARAJAN, MD†

Provider ID: N/A

29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-MAY-21

TRIVEDI, JANKI, MD†

Provider ID: N/A

29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-SEP-18

TRIVEDI, JANKI, MD†

Provider ID: N/A

29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-AUG-20

TRIVEDI, JANKI, MD†

Provider ID: N/A

29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-MAR-21

SURGERY GENERAL

IGWE, DANIEL, MD†

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-NOV-18

IGWE, DANIEL, MD†

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-NOV-18

IGWE, DANIEL, MD†

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-NOV-18

SURGERY ORTHOPEDIC

CHAUDHURI, KALI, MD†

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-AUG-21

CHAUDHURI, KALI, MD†

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-AUG-21

CHAUDHURI, KALI, MD†

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-AUG-21

DAVENPORT, STEPHEN, MD

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-JUL-23

GANDE, ABHIRAM, MD†

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-SEP-22

GANDE, ABHIRAM, MD†

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-JUL-23

GANDE, ABHIRAM, MD†

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-SEP-22

GANDE, ABHIRAM, MD†

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-SEP-22

PANSE, MILIND, MD†

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-NOV-18

PANSE, MILIND, MD†

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-NOV-18

PANSE, MILIND, MD†

Provider ID: N/A

29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-NOV-18

UROLOGY

CRISELL, MONISHA, MD†

Provider ID: N/A

29798 HAUN RD STE 104
MENIFEE, CA 92586*
Effective as of 01-JUL-23

LARSON, BENJAMIN, MD†

Provider ID: N/A

29798 HAUN RD STE 104
MENIFEE, CA 92586
Effective as of 01-JUN-17

LARSON, BENJAMIN, MD†

Provider ID: N/A

29798 HAUN RD STE 104
MENIFEE, CA 92586
Effective as of 01-JUN-17

LUTTGE, SCOTT, MD

Provider ID: N/A

29826 HAUN RD STE 209
MENIFEE, CA 92586
Effective as of 01-MAY-23

ALLERGY IMMUNOLOGY

BASEN, TYLER, MD†

Provider ID: N/A

26691 PLAZA STE 170
MISSION VIEJO, CA 92691
Teleservice

Effective as of 01-DEC-20

BASEN, TYLER, MD†

Provider ID: N/A

26691 PLAZA STE 170
MISSION VIEJO, CA 92691
Teleservice

Effective as of 01-SEP-22

BASEN, TYLER, MD†

Provider ID: N/A

26691 PLAZA STE 170
MISSION VIEJO, CA 92691
Teleservice

Effective as of 01-DEC-20

BASEN, TYLER, MD†

Provider ID: N/A

26691 PLAZA STE 170
MISSION VIEJO, CA 92691
Teleservice

Effective as of 01-SEP-22

CARR, WARNER, MD

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

CARR, WARNER, MD

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-MAR-21

CARR, WARNER, MD

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-MAR-21

CARR, WARNER, MD

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-JUN-08

CARR, WARNER, MD

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

CARR, WARNER, MD

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

CARR, WARNER, MD

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-DEC-13

LEE-KIM, CHRISTINE, DO†

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

LEE-KIM, CHRISTINE, DO†

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

LEE-KIM, CHRISTINE, DO†

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-JUL-21

LEE-KIM, CHRISTINE, DO†

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-MAY-22

LEE-KIM, CHRISTINE, DO†

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-MAY-22

LEE-KIM, CHRISTINE, DO†

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244

MISSION VIEJO, CA 92691
Effective as of 01-MAY-22

LEE-KIM, CHRISTINE, DO†

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-MAY-22

MEHTA, VINAY, MD

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

MEHTA, VINAY, MD

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

MEHTA, VINAY, MD

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

MEHTA, VINAY, MD

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

MEHTA, VINAY, MD

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

MEHTA, VINAY, MD

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

VENKAT, GEETA, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-OCT-17

VENKAT, GEETA, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-OCT-17

ANESTHESIOLOGY

GERAYLI, AFSHIN, MD†

Provider ID: N/A

25982 PALA STE 280
MISSION VIEJO, CA 92691
Teleservice
Effective as of 01-AUG-22

GERAYLI, AFSHIN, MD†

Provider ID: N/A

25982 PALA STE 280
MISSION VIEJO, CA 92691
Teleservice
Effective as of 01-AUG-22

ANESTHESIOLOGY PAIN MANAGEMENT

BESHAI, ALFRED, MD

Provider ID: N/A

26691 PLAZA STE 170
MISSION VIEJO, CA 92691

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-MAY-16

GERAYLI, AFSHIN, MD†

Provider ID: N/A

25982 PALA STE 280
MISSION VIEJO, CA 92691

Teleservice

Effective as of 01-JAN-16

GERAYLI, AFSHIN, MD†

Provider ID: N/A

25982 PALA STE 280
MISSION VIEJO, CA 92691

Teleservice

Effective as of 01-OCT-08

MOUSAVI, SHAHRYAR, MD

Provider ID: N/A

25982 PALA STE 280
MISSION VIEJO, CA 92691

Effective as of 01-JUL-22

MOUSAVI, SHAHRYAR, MD

Provider ID: N/A

25982 PALA STE 280
MISSION VIEJO, CA 92691

Effective as of 01-OCT-16

MOUSAVI, SHAHRYAR, MD

Provider ID: N/A

25982 PALA STE 280
MISSION VIEJO, CA 92691

Effective as of 01-OCT-16

MOUSAVI, SHAHRYAR, MD

Provider ID: N/A

25982 PALA STE 280
MISSION VIEJO, CA 92691

Effective as of 01-AUG-20

SHAHBAZIAN, MICHAEL, MD†

Provider ID: N/A

25982 PALA STE 280
MISSION VIEJO, CA 92691

Effective as of 01-JUL-22

SHAHBAZIAN, MICHAEL, MD†

Provider ID: N/A

25982 PALA STE 280
MISSION VIEJO, CA 92691

Effective as of 01-JAN-18

AUDIOLOGIST

NIAVARANY, PIRAYEH, AuD

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691

Effective as of 01-NOV-22

NIAVARANY, PIRAYEH, AuD

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691

Effective as of 01-NOV-22

PANEK, KRISTI, AuD

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691

Effective as of 01-NOV-22

PANEK, KRISTI, AuD

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691

Effective as of 01-NOV-22

CARDIAC

ELECTROPHYSIOLOGY

DESAI, ASEEM, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691

Effective as of 01-SEP-10

HUNG, LYNNE, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691

Effective as of 01-NOV-12

TIONGSON, JAY, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 103
MISSION VIEJO, CA 92691

Effective as of 01-OCT-13

TIONGSON, JAY, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 103
MISSION VIEJO, CA 92691

Effective as of 01-OCT-13

CARDIOVASCULAR DISEASE

ALOMARI, IHAB, MD

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691

Effective as of 01-SEP-23

ALOMARI, IHAB, MD

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691

Effective as of 01-SEP-23

CUA, BENNETT, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691

**C1. Lista de proveedores de la red
Médico de atención especializada**

Effective as of 01-AUG-18

CUA, BENNETT, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691

Effective as of 01-AUG-18

DESAI, ASEEM, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691

Effective as of 01-NOV-05

EUBANY, JACQUELINE, MD†

Provider ID: N/A

27525 PUERTA REAL STE
300
MISSION VIEJO, CA 92691

Effective as of 01-OCT-20

EUBANY, JACQUELINE, MD†

Provider ID: N/A

27525 PUERTA REAL STE
300
MISSION VIEJO, CA 92691

Effective as of 01-OCT-20

HEPNER, ABSALOM, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691

Effective as of 01-NOV-12

HEPNER, ABSALOM, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691

Effective as of 01-DEC-14

KULICK, DANIEL, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 120
MISSION VIEJO, CA 92691

Effective as of 01-JAN-15

KULICK, DANIEL, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691

Effective as of 01-MAY-12

KULICK, DANIEL, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691

Effective as of 01-NOV-12

KULICK, DANIEL, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691

Effective as of 01-OCT-99

**LOUSSARARIAN, ARTHUR,
MD†**

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691

Effective as of 01-OCT-99

**LOUSSARARIAN, ARTHUR,
MD†**

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691

Effective as of 01-NOV-12

**LOUSSARARIAN, ARTHUR,
MD†**

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 161
MISSION VIEJO, CA 92691

Effective as of 01-NOV-12

REDIKER, DONALD, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691

Effective as of 01-OCT-12

REDIKER, DONALD, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691

Effective as of 01-MAY-12

REDIKER, DONALD, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 161
MISSION VIEJO, CA 92691

Effective as of 01-SEP-10

REDIKER, DONALD, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691

Effective as of 01-OCT-99

***CERTIFIED NURSE
PRACTITIONER***

CARR, CHERYL, NP

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691

Effective as of 01-APR-23

CARR, CHERYL, NP

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

CARR, CHERYL, NP

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

CARR, CHERYL, NP

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

CARR, CHERYL, NP

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

CHAN, JUDY, NPF

Provider ID: N/A

30492 GATEWAY PL
STE 200
MISSION VIEJO, CA 92694
Effective as of 01-JAN-24

CHAN, JUDY, NPF

Provider ID: N/A

30492 GATEWAY PL
STE 200
MISSION VIEJO, CA 92694
Effective as of 01-JAN-24

DAVID, MARY LOU, NP†

Provider ID: N/A

23512 MADERO
MISSION VIEJO, CA 92691

Effective as of 01-AUG-21

PARK, SE, NP

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JUL-23

PARK, SE, NP

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JUL-23

PARK, SE, NP

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JUL-23

PARK, SE, NP

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

PARK, SE, NP

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JUL-23

PASICOLAN, MARI, NP

Provider ID: N/A

26012 MARGUERITE PKWY
STE H
MISSION VIEJO, CA 92692
Effective as of 01-DEC-22

PASICOLAN, MARI, NP

Provider ID: N/A

26012 MARGUERITE PKWY
STE H
MISSION VIEJO, CA 92692
Effective as of 01-DEC-22

PASICOLAN, MARI, NP

Provider ID: N/A

26012 MARGUERITE PKWY
STE H
MISSION VIEJO, CA 92692
Effective as of 01-DEC-22

PASICOLAN, MARI, NP

Provider ID: N/A

30897 GATEWAY PL STE F
MISSION VIEJO, CA 92694
Effective as of 01-DEC-22

PASICOLAN, MARI, NP

Provider ID: N/A

30897 GATEWAY PL STE F
MISSION VIEJO, CA 92694
Effective as of 01-DEC-22

PASICOLAN, MARI, NP

Provider ID: N/A

30897 GATEWAY PL STE F
MISSION VIEJO, CA 92694
Effective as of 01-DEC-22

CERTIFIED REGISTERED NURSE MIDWIFE

MCDANIEL-DAVIS, SHAYNA, CRNM

Provider ID: N/A

26800 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

MCDANIEL-DAVIS, SHAYNA, CRNM

Provider ID: N/A

26800 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

**C1. Lista de proveedores de la red
Médico de atención especializada**

CLINICAL

NEUROPSYCHOLOGIST

FAHIMI, GOLSHAN, MD

Provider ID: N/A

23512 MADERO
MISSION VIEJO, CA 92691
Effective as of 01-SEP-24

FAHIMI, GOLSHAN, MD

Provider ID: N/A

23512 MADERO
MISSION VIEJO, CA 92691
Effective as of 01-SEP-24

FAHIMI, GOLSHAN, MD

Provider ID: N/A

23512 MADERO
MISSION VIEJO, CA 92691
Effective as of 01-SEP-24

DERMATOLOGY

BISUNA, BLANCA, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 170
MISSION VIEJO, CA 92691*
Effective as of 01-MAR-16

DICESARE, DANIEL, MD

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 440
MISSION VIEJO, CA 92691
Effective as of 01-NOV-19

DICESARE, DANIEL, MD

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 440
MISSION VIEJO, CA 92691
Effective as of 01-NOV-19

LEVIN, JACQUELINE, DO†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 220
MISSION VIEJO, CA 92691
Effective as of 01-NOV-15

LONGBERG, AUSTIN, DO†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 435
MISSION VIEJO, CA 92691
Effective as of 01-NOV-20

LONGBERG, AUSTIN, DO†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 435
MISSION VIEJO, CA 92691
Effective as of 01-NOV-20

NGUYEN, TUYET, MD

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 435
MISSION VIEJO, CA 92691
Effective as of 01-JUN-23

NGUYEN, TUYET, MD

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 435
MISSION VIEJO, CA 92691
Effective as of 01-JUN-23

ZHAN, FRANK, MD†

Provider ID: N/A

26691 PLAZA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

ZHAN, FRANK, MD†

Provider ID: N/A

26691 PLAZA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

ZHAN, FRANK, MD†

Provider ID: N/A

26691 PLAZA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

EMERGENCY MEDICINE

ELPEDES, BERNARD, DO†

Provider ID: N/A

23962 ALICIA PKWY STE 11
MISSION VIEJO, CA 92691
Effective as of 01-JAN-24

ENDOCRINOLOGY

METABOLISM DIABETES

BARRERA, JOSEPH, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 230
MISSION VIEJO, CA 92691*
Effective as of 01-NOV-12

BARRERA, JOSEPH, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 230
MISSION VIEJO, CA 92691
Effective as of 01-DEC-02

BUI, AMY-VAN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 230
MISSION VIEJO, CA 92691
Effective as of 01-FEB-15

BUI, AMY-VAN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 230
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

C1. Lista de proveedores de la red Médico de atención especializada

CHAN, JESSICA, MD†

Provider ID: N/A

📄 26800 CROWN VALLEY
PKWY STE 230
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

CHAN, JESSICA, MD†

Provider ID: N/A

📄 26800 CROWN VALLEY
PKWY STE 230
MISSION VIEJO, CA 92691
Effective as of 01-AUG-22

DAO, LISA, MD

Provider ID: N/A

📄 26800 CROWN VALLEY
PKWY STE 230
MISSION VIEJO, CA 92691
Effective as of 01-SEP-23

FRANKWICH, KAREN, MD†

Provider ID: N/A

📄 26800 CROWN VALLEY
PKWY STE 230
MISSION VIEJO, CA 92691
Effective as of 01-OCT-14

FRANKWICH, KAREN, MD†

Provider ID: N/A

📄 26800 CROWN VALLEY
PKWY STE 230
MISSION VIEJO, CA 92691
Effective as of 01-OCT-14

HOSSEINI, ALIREZA, MD†

Provider ID: N/A

📄 25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-OCT-21

HOSSEINI, ALIREZA, MD†

Provider ID: N/A

📄 25982 PALA STE 140

MISSION VIEJO, CA 92691
Effective as of 01-OCT-21

HOSSEINI, ALIREZA, MD†

Provider ID: N/A

📄 25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-OCT-21

HOSSEINI, ALIREZA, MD†

Provider ID: N/A

📄 25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-MAR-22

HOSSEINI, ALIREZA, MD†

Provider ID: N/A

📄 25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-MAR-22

HOSSEINI, ALIREZA, MD†

Provider ID: N/A

📄 25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-MAR-22

HOSSEINI, ALIREZA, MD†

Provider ID: N/A

📄 25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

HOSSEINI, ALIREZA, MD†

Provider ID: N/A

📄 25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-MAR-22

MULFORD, MIM, MD†

Provider ID: N/A

📄 26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-NOV-12

MULFORD, MIM, MD†

Provider ID: N/A

📄 26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-OCT-99

MULFORD, MIM, MD†

Provider ID: N/A

📄 26732 CROWN VALLEY
PKWY STE 161
MISSION VIEJO, CA 92691
Effective as of 01-NOV-12

TRAN, NEIL, MD†

Provider ID: N/A

📄 26800 CROWN VALLEY
PKWY STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JUL-07

TRAN, NEIL, MD†

Provider ID: N/A

📄 26800 CROWN VALLEY
PKWY STE 230
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

TRAN, NEIL, MD†

Provider ID: N/A

📄 26732 CROWN VALLEY
PKWY STE 161
MISSION VIEJO, CA 92691
Effective as of 01-NOV-12

TRUONG, MICHAEL, MD†

Provider ID: N/A

📄 26800 CROWN VALLEY
PKWY STE 230
MISSION VIEJO, CA 92691
Effective as of 01-OCT-99

TRUONG, MICHAEL, MD†

Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

26800 CROWN VALLEY
PKWY STE 230
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

FAMILY PRACTICE **SPORTS MEDICINE**

CUENCA, ARNOLD, DO[†]

Provider ID: N/A

23512 MADERO
MISSION VIEJO, CA 92691
Effective as of 01-SEP-21

CUENCA, ARNOLD, DO[†]

Provider ID: N/A

23512 MADERO
MISSION VIEJO, CA 92691
Effective as of 01-SEP-21

MARANDOLA, MICHAEL, MD

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-JUL-12

MARANDOLA, MICHAEL, MD

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-APR-12

GASTROENTEROLOGY

BAE, WANJUN, MD[†]

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-APR-21

BAE, WANJUN, MD[†]

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-APR-21

BEMANIAN, SHAHROOZ, MD

Provider ID: N/A

25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

BEMANIAN, SHAHROOZ, MD

Provider ID: N/A

25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

BEMANIAN, SHAHROOZ, MD

Provider ID: N/A

25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

BEMANIAN, SHAHROOZ, MD

Provider ID: N/A

25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

BLOCK, EDWARD, MD[†]

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-APR-21

BLOCK, EDWARD, MD[†]

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 310
MISSION VIEJO, CA 92691

Effective as of 01-APR-21

CHANG, ELMER, MD[†]

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-APR-21

CHANG, ELMER, MD[†]

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-APR-21

CHAURASIA, OM, MD

Provider ID: N/A

26421 CROWN VALLEY
PKWY STE 140A
MISSION VIEJO, CA 92691
Effective as of 01-JAN-17

CHAURASIA, OM, MD

Provider ID: N/A

26421 CROWN VALLEY
PKWY STE 140A
MISSION VIEJO, CA 92691
Effective as of 01-JAN-14

CHAURASIA, OM, MD

Provider ID: N/A

26421 CROWN VALLEY
PKWY STE 140A
MISSION VIEJO, CA 92691
Effective as of 01-APR-11

CHAURASIA, OM, MD

Provider ID: N/A

26421 CROWN VALLEY
PKWY STE 140A
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

**C1. Lista de proveedores de la red
Médico de atención especializada**

CHAURASIA, OM, MD

Provider ID: N/A

26421 CROWN VALLEY
PKWY STE 140A
MISSION VIEJO, CA 92691
Effective as of 01-MAR-99

CHAURASIA, OM, MD

Provider ID: N/A

26421 CROWN VALLEY
PKWY STE 140A
MISSION VIEJO, CA 92691
Effective as of 01-MAY-12

CHAURASIA, OM, MD

Provider ID: N/A

26421 CROWN VALLEY
PKWY STE 140A
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

CHOI, DAVID, DO

Provider ID: N/A

25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

CHOI, DAVID, DO

Provider ID: N/A

25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

CHOI, DAVID, DO

Provider ID: N/A

25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

CHOI, DAVID, DO

Provider ID: N/A

25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

CHU, ERIC, MD†

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 240
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14

CHU, ERIC, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-APR-21

CHU, ERIC, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-APR-21

CHU, ERIC, MD†

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 240
MISSION VIEJO, CA 92691
Effective as of 01-DEC-14

KIM, DANIEL, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

KIM, DANIEL, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

LEE, PAUL, MD

Provider ID: N/A

25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

LEE, PAUL, MD

Provider ID: N/A

25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

LEE, PAUL, MD

Provider ID: N/A

25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

LEE, PAUL, MD

Provider ID: N/A

25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

LEE, PAUL, MD

Provider ID: N/A

25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-AUG-24

LEE, PAUL, MD

Provider ID: N/A

25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-AUG-24

NGUYEN, DOUGLAS, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

**C1. Lista de proveedores de la red
Médico de atención especializada**

NGUYEN, DOUGLAS, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

OMAN, MATTHEW, MD

Provider ID: N/A

25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

OMAN, MATTHEW, MD

Provider ID: N/A

25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

OMAN, MATTHEW, MD

Provider ID: N/A

25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

OMAN, MATTHEW, MD

Provider ID: N/A

25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

RAHMAN, HABIB, MD

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 475
MISSION VIEJO, CA 92691
Effective as of 01-MAY-12

RAHMAN, HABIB, MD

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 475
MISSION VIEJO, CA 92691
Effective as of 01-APR-11

RAHMAN, HABIB, MD

Provider ID: N/A

26691 PLAZA STE 150
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

RODRIGUES, DANIALD, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-APR-21

RODRIGUES, DANIALD, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-APR-21

YU, VICTOR, MD

Provider ID: N/A

25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

YU, VICTOR, MD

Provider ID: N/A

25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

YU, VICTOR, MD

Provider ID: N/A

25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

YU, VICTOR, MD

Provider ID: N/A

25982 PALA STE 140
MISSION VIEJO, CA 92691

Effective as of 01-JUN-24

ZABIHI, RAMIN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 308
MISSION VIEJO, CA 92691
Effective as of 01-JAN-12

ZABIHI, RAMIN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 308
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

ZABIHI, RAMIN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 308
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

ZABIHI, RAMIN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 308
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

ZABIHI, RAMIN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 308
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14

***GYNECOLOGIC
ONCOLOGY***

MENDIVIL, ALBERTO, MD

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 460
MISSION VIEJO, CA 92691

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-MAY-24

GYNECOLOGY

KANALY, KIM, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 327
MISSION VIEJO, CA 92691

Effective as of 01-MAY-12

KANALY, KIM, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 327
MISSION VIEJO, CA 92691

Effective as of 01-APR-11

WALLACE, PATRICIA, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 327
MISSION VIEJO, CA 92691

Effective as of 01-APR-11

WALLACE, PATRICIA, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 327
MISSION VIEJO, CA 92691

Effective as of 01-MAY-12

WALLACE, PATRICIA, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 327
MISSION VIEJO, CA 92691

Effective as of 01-DEC-08

HEMATOLOGY / ONCOLOGY

HU, JOHN, MD†

Provider ID: N/A

27799 MEDICAL CENTER

RD

STE 460

MISSION VIEJO, CA 92691

Effective as of 01-SEP-20

HU, JOHN, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 460

MISSION VIEJO, CA 92691

Effective as of 01-SEP-20

HUANG, DANIEL, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691

Effective as of 01-FEB-21

HUANG, DANIEL, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691

Effective as of 01-JUL-21

HUANG, DANIEL, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691

Effective as of 01-JUL-21

LAZO, NELLY, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691

Effective as of 01-JUL-21

LAZO, NELLY, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 271

MISSION VIEJO, CA 92691

Effective as of 01-NOV-18

LAZO, NELLY, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691

Effective as of 01-NOV-18

LAZO, NELLY, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691

Effective as of 01-JAN-23

LAZO, NELLY, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691

Effective as of 01-OCT-23

LI, MING, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 460

MISSION VIEJO, CA 92691

Effective as of 01-APR-20

LI, MING, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 460
MISSION VIEJO, CA 92691

Effective as of 01-APR-20

INFECTIOUS DISEASE

REDDY, JAGADEESH, MD

Provider ID: N/A


26732 CROWN VALLEY

C1. Lista de proveedores de la red Médico de atención especializada

PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18


REDDY, JAGADEESH, MD

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-JUL-16


REDDY, JAGADEESH, MD

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-JUL-16


WAYNE, EDGAR, MD†

Provider ID: N/A

 26800 CROWN VALLEY
PKWY STE 275
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

WAYNE, EDGAR, MD†


Provider ID: N/A

 26800 CROWN VALLEY
PKWY STE 275
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

INTERNAL MEDICINE

AZAD, HABIB, MD†

Provider ID: N/A

 27800 MEDICAL CENTER
RD STE 220
MISSION VIEJO, CA 92691
Effective as of 01-NOV-12

CASTRO RUEDA, HERNAN, MD†


Provider ID: N/A

 26732 CROWN VALLEY

PKWY STE 151
MISSION VIEJO, CA 92691
Effective as of 01-AUG-17


CHEN, MAY, MD†

Provider ID: N/A

 26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-APR-23


CHEN, MAY, MD†

Provider ID: N/A

 26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-APR-23


GEE, JOEY, DO†

Provider ID: N/A

 26800 CROWN VALLEY
PKWY STE 385
MISSION VIEJO, CA 92691
Effective as of 01-DEC-16


GOLDBERG, ROBERT, MD†

Provider ID: N/A

 26800 CROWN VALLEY
PKWY STE 205
MISSION VIEJO, CA 92691
Effective as of 01-NOV-12


JIANG, FEN, MD†

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 460
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

JIANG, FEN, MD†


Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 460

MISSION VIEJO, CA 92691
Effective as of 01-SEP-22


KOVACS, DAVID, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 151
MISSION VIEJO, CA 92691
Effective as of 01-APR-16


MIEL, RUFINAPAMELA, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691
Effective as of 01-APR-19


MIEL, RUFINAPAMELA, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691
Effective as of 01-APR-19


QURESHI, TAUSEEF, MD†

Provider ID: N/A

 26800 CROWN VALLEY
PKWY STE 205
MISSION VIEJO, CA 92691
Effective as of 01-JUL-15

SCHIFFMAN, GEORGE, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 161
MISSION VIEJO, CA 92691
Effective as of 01-MAY-17

INTERNAL MEDICINE CRITICAL CARE MEDICINE

SCHIFFMAN, GEORGE, MD†

Provider ID: N/A

 26800 CROWN VALLEY
PKWY STE 205

C1. Lista de proveedores de la red Médico de atención especializada

MISSION VIEJO, CA 92691
Effective as of 01-MAY-17

INTERVENTIONAL CARDIOLOGY

DANON, SAAR, MD†

Provider ID: N/A

📍 30492 GATEWAY PL STE
110
MISSION VIEJO, CA 92694
Effective as of 01-AUG-20

DANON, SAAR, MD†

Provider ID: N/A

📍 30492 GATEWAY PL STE
110
MISSION VIEJO, CA 92694
Effective as of 01-MAY-21

DANON, SAAR, MD†

Provider ID: N/A

📍 30492 GATEWAY PL STE
110
MISSION VIEJO, CA 92694
Effective as of 01-MAY-21

HUNG, LYNNE, MD†

Provider ID: N/A

📍 26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAY-12

KOPLIK, SHERI, MD†

Provider ID: N/A

📍 26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAY-16

KOPLIK, SHERI, MD†

Provider ID: N/A

📍 26800 CROWN VALLEY
PKWY STE 250

MISSION VIEJO, CA 92691
Effective as of 01-MAY-16

LOUSSARARIAN, ARTHUR, MD†

Provider ID: N/A

📍 26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAY-12

LOUSSARARIAN, ARTHUR, MD†

Provider ID: N/A

📍 26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-APR-11

LOUSSARARIAN, ARTHUR, MD†

Provider ID: N/A

📍 26800 CROWN VALLEY
PKWY STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JAN-15

SUK, DAVID, MD

Provider ID: N/A

📍 26800 CROWN VALLEY
PKWY STE 120
MISSION VIEJO, CA 92691
Effective as of 01-SEP-23

SUK, DAVID, MD

Provider ID: N/A

📍 26800 CROWN VALLEY
PKWY STE 120
MISSION VIEJO, CA 92691
Effective as of 01-SEP-23

MARRIAGE FAMILY THERAPIST

ORTIZ, TINA, MFT†

Provider ID: N/A

📍 26800 CROWN VALLEY
PKWY STE 325
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

ORTIZ, TINA, MFT†

Provider ID: N/A

📍 26800 CROWN VALLEY
PKWY STE 325
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

MEDICAL ONCOLOGY

BENDER, RICHARD, MD†

Provider ID: N/A

📍 26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

BENDER, RICHARD, MD†

Provider ID: N/A

📍 26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

MIEL, RUFINAPAMELA, MD†

Provider ID: N/A

📍 26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691
Effective as of 01-AUG-24

NEPHROLOGY

ALLAMEHZADEH, REZA, MD†

Provider ID: N/A

📍 25982 PALA STE 170
MISSION VIEJO, CA 92691*
Effective as of 01-JAN-18

ALLAMEHZADEH, REZA, MD†

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

25982 PALA STE 170
MISSION VIEJO, CA 92691
Effective as of 01-AUG-22

ALLAMEHZADEH, REZA, MD†

Provider ID: N/A

25982 PALA STE 170
MISSION VIEJO, CA 92691
Effective as of 01-AUG-22

ALLAMEHZADEH, REZA, MD†

Provider ID: N/A

25982 PALA STE 170
MISSION VIEJO, CA 92691
Effective as of 01-AUG-22

ALLAMEHZADEH, REZA, MD†

Provider ID: N/A

25982 PALA STE 170
MISSION VIEJO, CA 92691
Effective as of 01-AUG-22

ALLAMEHZADEH, REZA, MD†

Provider ID: N/A

25982 PALA
MISSION VIEJO, CA 92691
Effective as of 01-AUG-16

ALLAMEHZADEH, REZA, MD†

Provider ID: N/A

25982 PALA
MISSION VIEJO, CA 92691
Effective as of 01-AUG-16

AZAD, HABIB, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-JAN-15

AZAD, HABIB, MD†

Provider ID: N/A

26800 CROWN VALLEY

PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-DEC-14

AZAD, HABIB, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-JAN-15

CHEN, MAY, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-JAN-15

CHEN, MAY, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-JAN-15

DORRIZ, PARSHAW, MD

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 320
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

NAWAR, MAGDY, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 485
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14

NAWAR, MAGDY, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 485
MISSION VIEJO, CA 92691
Effective as of 01-MAR-99

NAWAR, MAGDY, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 485
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

RAVIKUMAR, ASHA, MD†

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 250
MISSION VIEJO, CA 92691
Effective as of 01-JAN-14

TEACHER, THEODORE, MD†

Provider ID: N/A

26691 PLAZA STE 235
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

TEACHER, THEODORE, MD†

Provider ID: N/A

26691 PLAZA STE 235
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

TRAN, STEVE, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-JAN-15

TRAN, STEVE, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-JAN-15

TRAN, STEVE, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250

C1. Lista de proveedores de la red Médico de atención especializada

MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

TRAN, STEVE, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

NEUROLOGY

DORRIZ, PARSHAW, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 385
MISSION VIEJO, CA 92691
Effective as of 01-SEP-18

FAHIMI, GOLSHAN, MD

Provider ID: N/A

23512 MADERO
MISSION VIEJO, CA 92691
Effective as of 01-SEP-24

GEE, JOEY, DO†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 385
MISSION VIEJO, CA 92691
Effective as of 01-DEC-16

GEE, JOEY, DO†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 385
MISSION VIEJO, CA 92691
Effective as of 01-DEC-16

GEE, JOEY, DO†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 385
MISSION VIEJO, CA 92691
Effective as of 01-DEC-16

KESARI, SANTOSH, MD

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 110
MISSION VIEJO, CA 92691
Effective as of 01-MAR-24

LOPEZ VIZCARRA, MARCO, MD

Provider ID: N/A

26991 CROWN VALLEY
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUN-23

NIK, ANDREW, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 385
MISSION VIEJO, CA 92691
Effective as of 01-DEC-16

NIK, ANDREW, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 385
MISSION VIEJO, CA 92691
Effective as of 01-DEC-16

RAHIM, BASIT, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 385
MISSION VIEJO, CA 92691
Effective as of 01-AUG-19

RAHIM, BASIT, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 385
MISSION VIEJO, CA 92691
Effective as of 01-AUG-19

SALEHI, HAMID, MD†

Provider ID: N/A

26691 PLAZA STE 235
MISSION VIEJO, CA 92691
Teleservice
Effective as of 01-DEC-14

SALEHI, HAMID, MD†

Provider ID: N/A

26691 PLAZA STE 235
MISSION VIEJO, CA 92691
Teleservice
Effective as of 01-DEC-20

SALEHI, HAMID, MD†

Provider ID: N/A

26691 PLAZA STE 235
MISSION VIEJO, CA 92691
Teleservice
Effective as of 01-AUG-11

SALEHI, HAMID, MD†

Provider ID: N/A

26691 PLAZA STE 235
MISSION VIEJO, CA 92691
Teleservice
Effective as of 01-NOV-14

SALEHI, HAMID, MD†

Provider ID: N/A

26691 PLAZA STE 235
MISSION VIEJO, CA 92691
Teleservice
Effective as of 01-JAN-18

SPOKOYNY, ELEONORA, MD†

Provider ID: N/A

25982 PALA STE 150
MISSION VIEJO, CA 92691
Effective as of 01-JAN-14

SPOKOYNY, ELEONORA, MD†

Provider ID: N/A

25982 PALA STE 150
MISSION VIEJO, CA 92691
Effective as of 01-DEC-08

C1. Lista de proveedores de la red Médico de atención especializada

SPOKOYNY, ELEONORA, MD†

Provider ID: N/A

25982 PALA STE 150
MISSION VIEJO, CA 92691
Effective as of 01-JUN-18

SPOKOYNY, ELEONORA, MD†

Provider ID: N/A

25982 PALA STE 150
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

SPOKOYNY, ELEONORA, MD†

Provider ID: N/A

25982 PALA STE 150
MISSION VIEJO, CA 92691
Effective as of 01-JUN-18

TEACHER, THEODORE, MD†

Provider ID: N/A

26691 PLAZA STE 235
MISSION VIEJO, CA 92691
Effective as of 01-JAN-15

TEACHER, THEODORE, MD†

Provider ID: N/A

26691 PLAZA STE 235
MISSION VIEJO, CA 92691
Effective as of 01-JAN-15

VORA, RONAK, DO

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 320
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

VORA, RONAK, DO

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 320
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

NEUROLOGY CHILD

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 510
MISSION VIEJO, CA 92691

Effective as of 01-JAN-20

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 460
MISSION VIEJO, CA 92691

Effective as of 01-DEC-16

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 460
MISSION VIEJO, CA 92691

Effective as of 01-DEC-16

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 460
MISSION VIEJO, CA 92691

Effective as of 01-DEC-16

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 460
MISSION VIEJO, CA 92691

Effective as of 01-DEC-16

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 460
MISSION VIEJO, CA 92691

Effective as of 01-DEC-16

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 510
MISSION VIEJO, CA 92691
Effective as of 01-MAR-19

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 510
MISSION VIEJO, CA 92691

Effective as of 01-MAR-19

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 460
MISSION VIEJO, CA 92691

Effective as of 01-MAR-19

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 460
MISSION VIEJO, CA 92691

Effective as of 01-MAR-19

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 510
MISSION VIEJO, CA 92691

Effective as of 01-MAR-19

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 460
MISSION VIEJO, CA 92691

Effective as of 01-SEP-18

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 510
MISSION VIEJO, CA 92691

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-MAR-19

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 510
MISSION VIEJO, CA 92691

Effective as of 01-MAR-19

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 460
MISSION VIEJO, CA 92691

Effective as of 01-MAR-19

ELBALALESY, NASER, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 510
MISSION VIEJO, CA 92691

Effective as of 01-MAR-19

KAYYAL, SIMON, MD

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691

Effective as of 01-MAY-24

MEGERIAN, JONATHAN, MD

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691

Effective as of 01-MAY-24

PEARSON, RACHEL, MD

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691

Effective as of 01-MAY-24

SHREY, DANIEL, MD

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691

Effective as of 01-MAY-24

THOMAS, JULIAN, MD

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691

Effective as of 01-MAY-24

OBSTETRICS / GYNECOLOGY

ABRAVESH, SOODABEH, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 310
MISSION VIEJO, CA 92691

Effective as of 01-JAN-18

BAGINSKI, LEON, MD†

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 310
MISSION VIEJO, CA 92691

Effective as of 01-JUL-20

BAGINSKI, LEON, MD†

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 310
MISSION VIEJO, CA 92691

Effective as of 01-AUG-20

BAGINSKI, LEON, MD†

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 310
MISSION VIEJO, CA 92691

Effective as of 01-JUL-20

BAILEY, THOMAS, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 525
MISSION VIEJO, CA 92691

Effective as of 01-JUL-14

BAILEY, THOMAS, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 525
MISSION VIEJO, CA 92691

Effective as of 01-MAR-99

BENZL, JERRY, MD†

Provider ID: N/A

26902 OSO PKWY STE 180
MISSION VIEJO, CA 92691

Effective as of 01-JUL-03

BENZL, JERRY, MD†

Provider ID: N/A

26902 OSO PKWY STE 180
MISSION VIEJO, CA 92691

Effective as of 01-SEP-10

BENZL, JERRY, MD†

Provider ID: N/A

26902 OSO PKWY STE 180
MISSION VIEJO, CA 92691

Effective as of 01-JUN-11

BENZL, JERRY, MD†

Provider ID: N/A

26902 OSO PKWY STE 180
MISSION VIEJO, CA 92691

Effective as of 01-MAY-12

CHANG, JEREMY, MD

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 545
MISSION VIEJO, CA 92691

Effective as of 01-JUL-24

CHANG, JEREMY, MD

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 545
MISSION VIEJO, CA 92691

Effective as of 01-JUL-24

C1. Lista de proveedores de la red Médico de atención especializada

CVAR, KATHRYN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 525
MISSION VIEJO, CA 92691
Effective as of 01-MAR-99

CVAR, KATHRYN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 525
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

CVAR, KATHRYN, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 443
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

EDMUNDSON, MORIAH, DO†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 525
MISSION VIEJO, CA 92691
Effective as of 01-SEP-21

EDMUNDSON, MORIAH, DO†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 525
MISSION VIEJO, CA 92691
Effective as of 01-SEP-21

FARAZ ESLAMI, PARASTOO, MD†

Provider ID: N/A

30492 GATEWAY PL STE
110
MISSION VIEJO, CA 92694
Effective as of 01-JUL-20

FARAZ ESLAMI, PARASTOO, MD†

Provider ID: N/A

30492 GATEWAY PL STE
110
MISSION VIEJO, CA 92694
Effective as of 01-JUL-20

FARAZ ESLAMI, PARASTOO, MD

Provider ID: N/A

30492 GATEWAY PL
STE 200
MISSION VIEJO, CA 92694
Effective as of 01-JAN-24

FARAZ ESLAMI, PARASTOO, MD

Provider ID: N/A

30492 GATEWAY PL
STE 200
MISSION VIEJO, CA 92694
Effective as of 01-FEB-24

FARAZ ESLAMI, PARASTOO, MD

Provider ID: N/A

30492 GATEWAY PL
STE 200
MISSION VIEJO, CA 92694
Effective as of 01-FEB-24

GRANESE, MARSHA, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 545
MISSION VIEJO, CA 92691
Effective as of 01-JUL-18

GRANESE, MARSHA, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 545
MISSION VIEJO, CA 92691
Effective as of 01-JUL-18

KANALY, KIM, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 381
MISSION VIEJO, CA 92691
Effective as of 01-FEB-24

KANALY, KIM, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 381
MISSION VIEJO, CA 92691
Effective as of 01-FEB-24

LEAVITT, JAMIE, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 525
MISSION VIEJO, CA 92691
Effective as of 01-SEP-18

LEAVITT, JAMIE, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 525
MISSION VIEJO, CA 92691
Effective as of 01-SEP-18

MELKONIAN, VIKEN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 440
MISSION VIEJO, CA 92691
Effective as of 01-SEP-19

MELKONIAN, VIKEN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 440
MISSION VIEJO, CA 92691
Effective as of 01-SEP-19

MELKONIAN, VIKEN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 440

C1. Lista de proveedores de la red Médico de atención especializada

MISSION VIEJO, CA 92691
Effective as of 01-SEP-19

MILLER, KURT, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 525
MISSION VIEJO, CA 92691
Effective as of 01-MAR-99

MILLER, KURT, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 525
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

POLLOCK, KATHLEEN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-JUN-05

POLLOCK, KATHLEEN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

RAMIREZ, SARA, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 545
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

RAMIREZ, SARA, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 545
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

SALCIDO, CRAIG, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 525
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14

SALCIDO, CRAIG, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 525
MISSION VIEJO, CA 92691
Effective as of 01-DEC-07

STADLER, EDWARD, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 525
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

STADLER, EDWARD, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 525
MISSION VIEJO, CA 92691
Effective as of 01-MAR-99

TRAN, TIFFANY, MD

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 144
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

TRAN, TIFFANY, MD

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 144
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

TRAN, BRYAN, MD

Provider ID: N/A

27800 MEDICAL CENTER

RD STE 144
MISSION VIEJO, CA 92691
Teleservice
Effective as of 01-SEP-22

OPHTHALMOLOGY

AHMED, SARAH, MD†

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-NOV-21

AHMED, SARAH, MD†

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-NOV-21

AHMED, SARAH, MD†

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-NOV-21

AHMED, SARAH, MD†

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-OCT-21

AHMED, SARAH, MD†

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

AHMED, SARAH, MD†

Provider ID: N/A

26701 CROWN VALLEY

C1. Lista de proveedores de la red Médico de atención especializada

PKWY
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

AMRA, NOOR, MD†

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

AMRA, NOOR, MD†

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-DEC-22

AMRA, NOOR, MD†

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-DEC-22

AMRA, NOOR, MD†

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-MAY-22

AMRA, NOOR, MD†

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-MAY-22

BANUELOS, LYDIA, MD†

Provider ID: N/A

26691 PLAZA STE 250
MISSION VIEJO, CA 92691
Effective as of 01-DEC-22

BANUELOS, LYDIA, MD†

Provider ID: N/A

26691 PLAZA STE 250
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

CUNNINGHAM-AHUMADA, ROSE, DO†

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-MAY-22

CUNNINGHAM-AHUMADA, ROSE, DO†

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14

CUNNINGHAM-AHUMADA, ROSE, DO†

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JUN-16

CUNNINGHAM-AHUMADA, ROSE, DO†

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-DEC-11

CUNNINGHAM-AHUMADA, ROSE, DO†

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691

Effective as of 01-AUG-19

CUNNINGHAM-AHUMADA, ROSE, DO†

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-DEC-14

CUNNINGHAM-AHUMADA, ROSE, DO†

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

GHOSHEH, FARIS, MD

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-MAY-12

GHOSHEH, FARIS, MD

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14

GHOSHEH, FARIS, MD

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-APR-11

GHOSHEH, FARIS, MD

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-FEB-08

**C1. Lista de proveedores de la red
Médico de atención especializada**

GHOSHEH, FARIS, MD

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

JOSON, PETER, MD

Provider ID: N/A

26691 PLAZA STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

JOSON, PETER, MD

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 220
MISSION VIEJO, CA 92691
Effective as of 01-OCT-17

JOSON, PETER, MD

Provider ID: N/A

26691 PLAZA STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

JOSON, PETER, MD

Provider ID: N/A

26691 PLAZA STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

KRAD, OMAR, MD†

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-MAY-22

KRAD, OMAR, MD†

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691

Effective as of 01-NOV-14

KRAD, OMAR, MD†

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-AUG-19

KRAD, OMAR, MD†

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-DEC-14

KRAD, OMAR, MD†

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JUN-23

KRAD, OMAR, MD†

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

KRAD, OMAR, MD†

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-MAR-12

SALEHI-HAD, HANI, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 220
MISSION VIEJO, CA 92691

SALEHI-HAD, HANI, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 220
MISSION VIEJO, CA 92691

Effective as of 01-JUN-21

SALEHI-HAD, HANI, MD

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691

Effective as of 01-DEC-23

TAI, AUDREY, DO†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691

Effective as of 01-SEP-22

TAI, AUDREY, DO†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691

Effective as of 01-SEP-22

TAYANI, RAMIN, MD

Provider ID: N/A

26691 PLAZA STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

TAYANI, RAMIN, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691

Effective as of 01-SEP-12

TAYANI, RAMIN, MD

Provider ID: N/A

26691 PLAZA STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

**C1. Lista de proveedores de la red
Médico de atención especializada**

TAYANI, RAMIN, MD

Provider ID: N/A

26691 PLAZA STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

OPTOMETRIST

ANSARI, SHORA, OD

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

HWANG, DONNA, OD

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-APR-11

KHAN, CEMONE, OD

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

NG, REBECCA, OD

Provider ID: N/A

26691 PLAZA STE 250
MISSION VIEJO, CA 92691
Effective as of 01-SEP-23

NG, REBECCA, OD

Provider ID: N/A

26691 PLAZA STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

SAKO, AARON, OD

Provider ID: N/A

27724 SANTA MARGARITA

PKWY
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

WONG, RANDALL, OD

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

WONG, RANDALL, OD

Provider ID: N/A

26701 CROWN VALLEY
PKWY
MISSION VIEJO, CA 92691
Effective as of 01-FEB-04

OTOLARYNGOLOGY

BHATT, JAY, MD

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

BREDENKAMP, JAMES, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

BREDENKAMP, JAMES, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

BREDENKAMP, JAMES, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691

Effective as of 01-APR-16

BREDENKAMP, JAMES, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-OCT-14

BREDENKAMP, JAMES, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-SEP-99

CHO, MICHAEL, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

CHO, MICHAEL, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

CHO, MICHAEL, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

CHO, MICHAEL, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-MAR-08

CROCKETT, DENNIS, MD†

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-MAR-08

CROCKETT, DENNIS, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-MAY-12

CROCKETT, DENNIS, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

CROCKETT, DENNIS, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14

CROCKETT, DENNIS, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

CROCKETT, DENNIS, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-APR-11

FEINBERG, STEVEN, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200

MISSION VIEJO, CA 92691
Effective as of 01-JAN-21

HEINRICH, JAMES, MD

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAY-12

HEINRICH, JAMES, MD

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

HEINRICH, JAMES, MD

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAR-24

HEINRICH, JAMES, MD

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-SEP-99

HEINRICH, JAMES, MD

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-APR-11

HEINRICH, JAMES, MD

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

HUOH, KEVIN, MD

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

JAKOBSEN, MICHAEL, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-MAY-12

JAKOBSEN, MICHAEL, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

JAKOBSEN, MICHAEL, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

JAKOBSEN, MICHAEL, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-MAR-04

JAKOBSEN, MICHAEL, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-APR-11

JAKOBSEN, MICHAEL, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200

C1. Lista de proveedores de la red Médico de atención especializada

MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

LUU, QUANG, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-OCT-18

LUU, QUANG, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-OCT-18

LUU, QUANG, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

LUU, QUANG, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-NOV-18

MUNDI, JAGMEET, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

MUNDI, JAGMEET, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-OCT-14

MUNDI, JAGMEET, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-OCT-14

MUNDI, JAGMEET, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-OCT-13

MUNDI, JAGMEET, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-OCT-13

MUNDI, JAGMEET, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

PHAM, NGUYEN, MD

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

THOMPSON, CHRISTOPHER, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

THOMPSON, CHRISTOPHER, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

THOMPSON, CHRISTOPHER, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-FEB-16

THOMPSON, CHRISTOPHER, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-FEB-16

THOMPSON, CHRISTOPHER, MD†

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-FEB-16

ZHONG, QIU, MD

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

PEDIATRIC CARDIOLOGY

CHUN, DAVID, MD†


Provider ID: N/A

26691 PLAZA STE 210
MISSION VIEJO, CA 92691
Effective as of 01-MAY-15

CHUN, DAVID, MD†


Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

 26691 PLAZA STE 210
MISSION VIEJO, CA 92691
Effective as of 01-FEB-15


DOSHI, NITA, MD

Provider ID: N/A

 26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24


ELLINI, AHMAD, MD†

Provider ID: N/A

 26691 PLAZA STE 120A
MISSION VIEJO, CA 92691
Effective as of 01-OCT-18


GANDY, JODIE, MD†

Provider ID: N/A

 26691 PLAZA STE 210
MISSION VIEJO, CA 92691
Effective as of 01-MAR-21


GANDY, JODIE, MD†

Provider ID: N/A

 26691 PLAZA STE 210
MISSION VIEJO, CA 92691
Effective as of 01-JAN-21


GANDY, JODIE, MD†

Provider ID: N/A

 26691 PLAZA STE 210
MISSION VIEJO, CA 92691
Effective as of 01-SEP-15


GANDY, JODIE, MD†

Provider ID: N/A

 26691 PLAZA STE 210
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14


GANDY, JODIE, MD†

Provider ID: N/A

 26691 PLAZA STE 210
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14


GANDY, JODIE, MD†

Provider ID: N/A

 26691 PLAZA STE 210
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14


GANDY, JODIE, MD†

Provider ID: N/A

 26691 PLAZA STE 210
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14


GANDY, JODIE, MD

Provider ID: N/A

 26691 PLAZA STE 160
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

GANDY, JODIE, MD

Provider ID: N/A

 26691 PLAZA STE 160
MISSION VIEJO, CA 92691
Effective as of 01-APR-23


GANDY, JODIE, MD

Provider ID: N/A

 26691 PLAZA STE 160
MISSION VIEJO, CA 92691
Effective as of 01-APR-23


GANDY, JODIE, MD

Provider ID: N/A

 26691 PLAZA STE 160
MISSION VIEJO, CA 92691
Effective as of 01-APR-23


HORENSTEIN, MARIA, MD

Provider ID: N/A

 26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24


LAI, WYMAN, MD

Provider ID: N/A

 26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24


MORCHI, GIRA, MD

Provider ID: N/A

 26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24


MUHONEN, LINDA, MD

Provider ID: N/A

 26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23


RAHIMI, MOHAMMAD, MD†

Provider ID: N/A

 30492 GATEWAY PL STE
110
MISSION VIEJO, CA 92694
Effective as of 01-DEC-20


RAHIMI, MOHAMMAD, MD†

Provider ID: N/A

 30492 GATEWAY PL STE
110
MISSION VIEJO, CA 92694
Effective as of 01-JAN-21


RAHIMI, MOHAMMAD, MD†

Provider ID: N/A

 30492 GATEWAY PL STE
110
MISSION VIEJO, CA 92694
Effective as of 01-DEC-20

RAHIMI, MOHAMMAD, MD†

Provider ID: N/A

 30492 GATEWAY PL STE
110
MISSION VIEJO, CA 92694
Effective as of 01-DEC-20

RAHIMI, MOHAMMAD, MD†

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

30492 GATEWAY PL STE
110
MISSION VIEJO, CA 92694
Effective as of 01-JAN-21

RAHIMI, MOHAMMAD, MD†

Provider ID: N/A

30492 GATEWAY PL STE
110
MISSION VIEJO, CA 92694
Effective as of 01-JAN-21

RECTO, MICHAEL, MD

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

RENELLA, PIERANGELO, MD

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

WEINER, KEITH, MD†

Provider ID: N/A

26691 PLAZA STE 210
MISSION VIEJO, CA 92691
Effective as of 01-JAN-21

WEINER, KEITH, MD†

Provider ID: N/A

26691 PLAZA STE 210
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14

WEINER, KEITH, MD†

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 264
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14

WEINER, KEITH, MD

Provider ID: N/A

26691 PLAZA STE 160
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

WEINER, KEITH, MD

Provider ID: N/A

26691 PLAZA STE 160
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

WEINER, KEITH, MD

Provider ID: N/A

26691 PLAZA STE 160
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

WEINER, KEITH, MD

Provider ID: N/A

26691 PLAZA STE 160
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

PEDIATRIC ENDOCRINOLOGY

BHANGOO, AMRIT, MD

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

PEDIATRIC GASTROENTEROLOGY

WANG, MICHAEL, DO

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

YOUNES, BASSAM, MD

Provider ID: N/A

26691 PLAZA STE 130

MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

PEDIATRIC INFECTIOUS DISEASES

ARRIETA, ANTONIO, MD†

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 138 BLDG 2
MISSION VIEJO, CA 92691
Effective as of 01-FEB-17

ARRIETA, ANTONIO, MD†

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 138 BLDG 2
MISSION VIEJO, CA 92691
Effective as of 01-FEB-17

ARRIETA, ANTONIO, MD†

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 138 BLDG 2
MISSION VIEJO, CA 92691
Effective as of 01-SEP-19

PEDIATRIC NEPHROLOGY

NGUYEN, JOHN, MD

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

ZAMAN, RUMINA, MD

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

PEDIATRIC PULMONOLOGY

CHIN, CHANA, MD

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

GAGE, SUSAN, MD

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

HONG, HANNA, MD

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

KAMATH, SUNIL, MD

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

TIRAKITSOONTORN,

PORNCHAI, MD

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

PEDIATRIC SPORTS MEDICINE

DAVIS, KELLY, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-APR-18

DAVIS, KELLY, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-SEP-19

DAVIS, KELLY, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-OCT-18

DAVIS, KELLY, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-OCT-18

DAVIS, KELLY, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-DEC-20

DAVIS, KELLY, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-APR-18

PEDIATRIC SURGERY ORTHOPEDIC

AMINIAN, AFSHIN, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JUL-05

AMINIAN, AFSHIN, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JAN-14

AMINIAN, AFSHIN, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-OCT-12

AMINIAN, AFSHIN, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JUN-16

CAO, LISA, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JUL-23

CAO, LISA, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-OCT-22

CAO, LISA, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-OCT-22

DAVIS, KELLY, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-OCT-18

DOBYNS, JEFFREY, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-SEP-15

DOBYNS, JEFFREY, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-SEP-15

DOBYNS, JEFFREY, MD†

Provider ID: N/A

25982 PALA STE 230

C1. Lista de proveedores de la red Médico de atención especializada

MISSION VIEJO, CA 92691
Effective as of 01-JAN-21

LALONDE, FRANCOIS, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-MAR-10

MCMICHAEL, JESSICA, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-OCT-20

MISAGHI, AMIRHOSSEIN, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JAN-20

ROSENFELD, SAMUEL, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JUL-05

SCHLECHTER, JOHN, DO†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-FEB-09

WEINERT, CARL, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JUL-05

PEDIATRICS

CHAMBERLIN, JOSHUA, MD†

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 110

MISSION VIEJO, CA 92691
Effective as of 01-FEB-21

PHYS MED/ REHAB PAIN MEDICINE

DEDES, HOWARD, MD

Provider ID: N/A

26137 LA PAZ RD STE 140
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

DEDES, HOWARD, MD

Provider ID: N/A

26137 LA PAZ RD STE 140
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

DEDES, HOWARD, MD

Provider ID: N/A

26137 LA PAZ RD STE 140
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

DEDES, HOWARD, MD

Provider ID: N/A

26137 LA PAZ RD STE 140
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

DEDES, HOWARD, MD

Provider ID: N/A

26137 LA PAZ RD STE 140
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

DEDES, HOWARD, MD

Provider ID: N/A

26137 LA PAZ RD STE 140
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

PHYSICAL MEDICINE / REHABILITATION

CUSHING, JAMES, MD

Provider ID: N/A

27700 MEDICAL CENTER
RD
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

CUSHING, JAMES, MD

Provider ID: N/A

27700 MEDICAL CENTER
RD
MISSION VIEJO, CA 92691
Effective as of 01-MAR-99

CUSHING, JAMES, MD

Provider ID: N/A

27700 MEDICAL CENTER
RD
MISSION VIEJO, CA 92691
Effective as of 01-APR-11

FADAVI, HAMID, DO

Provider ID: N/A

26932 OSO PKWY STE 275
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14

FADAVI, HAMID, DO

Provider ID: N/A

26932 OSO PKWY STE 275
MISSION VIEJO, CA 92691
Effective as of 01-NOV-21

FADAVI, HAMID, DO

Provider ID: N/A

26932 OSO PKWY STE 275
MISSION VIEJO, CA 92691
Effective as of 01-NOV-21

FADAVI, HAMID, DO

Provider ID: N/A

26932 OSO PKWY STE 275
MISSION VIEJO, CA 92691
Effective as of 01-DEC-21

CI. Lista de proveedores de la red Médico de atención especializada

FADAVI, HAMID, DO

Provider ID: N/A

26932 OSO PKWY STE 275
MISSION VIEJO, CA 92691

Effective as of 01-DEC-14

HANJAN, TIVA, MD†

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691

Effective as of 01-FEB-18

KIM, BONNIE, MD†

Provider ID: N/A

26302 LA PAZ RD STE 106
MISSION VIEJO, CA 92691

Effective as of 01-OCT-21

KIM, BONNIE, MD†

Provider ID: N/A

26302 LA PAZ RD STE 106
MISSION VIEJO, CA 92691

Effective as of 01-SEP-21

KIM, BONNIE, MD†

Provider ID: N/A

26302 LA PAZ RD STE 106
MISSION VIEJO, CA 92691

Effective as of 01-SEP-21

KING, FRANK, MD

Provider ID: N/A

26932 OSO PKWY STE 275
MISSION VIEJO, CA 92691

Teleservice

Effective as of 01-APR-23

KING, FRANK, MD

Provider ID: N/A

26932 OSO PKWY STE 275
MISSION VIEJO, CA 92691

Teleservice

Effective as of 01-JAN-16

RANJBARAN, ZIBA, MD†

Provider ID: N/A

23512 MADERO
MISSION VIEJO, CA 92691

Effective as of 01-MAY-12

RANJBARAN, ZIBA, MD†

Provider ID: N/A

23512 MADERO
MISSION VIEJO, CA 92691

Effective as of 01-APR-11

WASHBURN, NEAL, DO

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691

Effective as of 01-JAN-24

WASHBURN, NEAL, DO

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691

Effective as of 01-JAN-24

PHYSICIANS ASSISTANT

CARR, OLIVIA, PA

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-APR-24

CARR, OLIVIA, PA

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-APR-24

KENNEDY, KATHRYN, PA

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 205
MISSION VIEJO, CA 92691

Effective as of 01-NOV-22

KISCADEN, LAUREN, PA

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691

Effective as of 01-APR-23

KISCADEN, LAUREN, PA†

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691*

Effective as of 01-FEB-22

KISCADEN, LAUREN, PA†

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691*

Effective as of 01-FEB-22

KISCADEN, LAUREN, PA

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691

Effective as of 01-DEC-23

KISCADEN, LAUREN, PA

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691

Effective as of 01-DEC-23

KISCADEN, LAUREN, PA

Provider ID: N/A

26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691

Effective as of 01-DEC-23

KISCADEN, LAUREN, PA

Provider ID: N/A

26726 CROWN VALLEY

C1. Lista de proveedores de la red Médico de atención especializada

PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

KISCADEN, LAUREN, PA

Provider ID: N/A
26726 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-DEC-23

LONAPPAN, HENA, PA

Provider ID: N/A
26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-JUL-24

LONAPPAN, HENA, PA

Provider ID: N/A
26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-JUL-24

NOJAN, JOSEPH, PA

Provider ID: N/A
26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

NOJAN, JOSEPH, PA

Provider ID: N/A
26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

NOJAN, JOSEPH, PA

Provider ID: N/A
26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

SOBHANIAN, SHAHAB, PA

Provider ID: N/A
26800 CROWN VALLEY
PKWY STE 340

MISSION VIEJO, CA 92691
Effective as of 01-NOV-22

SOBHANIAN, SHAHAB, PA

Provider ID: N/A
26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-NOV-22

SOBHANIAN, SHAHAB, PA

Provider ID: N/A
26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-MAR-24

TAYLOR, ERIC, PA

Provider ID: N/A
26730 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-JUL-24

TAYLOR, ERIC, PA

Provider ID: N/A
26730 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-JUL-24

TERRERI, NATALIE, PA

Provider ID: N/A
26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-JUN-23

PODIATRIST

DAL PORTO-KUJANPAA, STEPHANIE, DPM

Provider ID: N/A
26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691

Effective as of 01-JAN-23

DAL PORTO-KUJANPAA, STEPHANIE, DPM

Provider ID: N/A
26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

GOLSHAHI, BAHAR, DPM†

Provider ID: N/A
26800 CROWN VALLEY
PKWY STE 420
MISSION VIEJO, CA 92691
Effective as of 01-JUN-20

GOLSHAHI, BAHAR, DPM†

Provider ID: N/A
26800 CROWN VALLEY
PKWY STE 420
MISSION VIEJO, CA 92691
Effective as of 01-JUN-20

GOLSHAHI, BAHAR, DPM

Provider ID: N/A
26691 PLAZA STE 201
MISSION VIEJO, CA 92691
Effective as of 01-SEP-23

GOLSHAHI, BAHAR, DPM

Provider ID: N/A
26691 PLAZA STE 201
MISSION VIEJO, CA 92691
Effective as of 01-SEP-23


HAIDER, SANDRA, DPM

Provider ID: N/A
26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-FEB-24

HAIDER, SANDRA, DPM


Provider ID: N/A

**C1. Lista de proveedores de la red
Médico de atención especializada**

 26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-FEB-24


HEHE, KYLE, DPM

Provider ID: N/A

 26691 PLAZA STE 201
MISSION VIEJO, CA 92691
Effective as of 01-AUG-23


HEHE, KYLE, DPM

Provider ID: N/A

 26691 PLAZA STE 201
MISSION VIEJO, CA 92691
Effective as of 01-AUG-23


MCCANN, JAN, DPM

Provider ID: N/A

 26800 CROWN VALLEY
PKWY STE 485
MISSION VIEJO, CA 92691
Effective as of 01-AUG-19


MCGRATH, BENJAMIN, DPM

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23


MCGRATH, BENJAMIN, DPM

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23


MCGRATH, BENJAMIN, DPM

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23


MCGRATH, BENJAMIN, DPM

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23


MCGRATH, BENJAMIN, DPM

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-SEP-23


MCGRATH, BENJAMIN, DPM

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23


MCGRATH, BENJAMIN, DPM

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-SEP-23


NGUYEN, HAN, DPM†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-DEC-20

NGUYEN, HAN, DPM†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-DEC-20

NGUYEN, HAN, DPM†


Provider ID: N/A

 26732 CROWN VALLEY

PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-DEC-20


NOSRATI, SAM, DPM†

Provider ID: N/A

 26800 CROWN VALLEY
PKWY STE 420
MISSION VIEJO, CA 92691
Effective as of 01-NOV-19

NOSRATI, SAM, DPM†

Provider ID: N/A

 26691 PLAZA STE 201
MISSION VIEJO, CA 92691
Effective as of 01-OCT-21


NOSRATI, SAM, DPM†

Provider ID: N/A

 26691 PLAZA STE 201
MISSION VIEJO, CA 92691
Effective as of 01-OCT-21


PENERA, KEITH, DPM†

Provider ID: N/A

 26991 CROWN VALLEY
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-MAY-21


RAMBACHER, THOMAS, DPM†

Provider ID: N/A

 26302 LA PAZ RD STE 101
MISSION VIEJO, CA 92691
Effective as of 01-JUN-19

RAMBACHER, THOMAS, DPM†

Provider ID: N/A

 26302 LA PAZ RD STE 101
MISSION VIEJO, CA 92691
Effective as of 01-MAY-22

RAMBACHER, THOMAS, DPM†

Provider ID: N/A

 26302 LA PAZ RD STE 101

C1. Lista de proveedores de la red Médico de atención especializada

MISSION VIEJO, CA 92691
Effective as of 01-JUN-19

SCHMALHAUS, MONTE, DPM

Provider ID: N/A

 26691 PLAZA STE 201
MISSION VIEJO, CA 92691
Effective as of 01-FEB-24

SCHMALHAUS, MONTE, DPM


Provider ID: N/A

 26691 PLAZA STE 201
MISSION VIEJO, CA 92691
Effective as of 01-FEB-24

PSYCHIATRY


ANOSHIVANI, ARDE, MD†

Provider ID: N/A

 26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUL-22


ANOSHIVANI, ARDE, MD†

Provider ID: N/A

 26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUL-22


BENESCH, ERIN, DO†

Provider ID: N/A

 26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUL-22

BENESCH, ERIN, DO†

Provider ID: N/A

 26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUL-22

DENNIS, TSHEKEDI, MD†

Provider ID: N/A

 26024 ACERO
MISSION VIEJO, CA 92691

Effective as of 01-AUG-24

DENNIS, TSHEKEDI, MD†

Provider ID: N/A

 26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24


DENNIS, TSHEKEDI, MD†

Provider ID: N/A

 26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-AUG-22

DENNIS, TSHEKEDI, MD†

Provider ID: N/A

 26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-AUG-24

DENNIS, TSHEKEDI, MD†

Provider ID: N/A

 26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24


DENNIS, TSHEKEDI, MD†

Provider ID: N/A

 26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-AUG-24

DENNIS, TSHEKEDI, MD†

Provider ID: N/A

 26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-AUG-24

DENNIS, TSHEKEDI, MD†

Provider ID: N/A

 26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-AUG-22


PLOESSER, MARKUS, MD

Provider ID: N/A

 26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

PLOESSER, MARKUS, MD

Provider ID: N/A

 26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24


PLOESSER, MARKUS, MD

Provider ID: N/A

 26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24


PLOESSER, MARKUS, MD

Provider ID: N/A

 26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24


SCOGGIN, MERLYN, MD

Provider ID: N/A

 26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24


SCOGGIN, MERLYN, MD

Provider ID: N/A

 26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-AUG-24

SCOGGIN, MERLYN, MD

Provider ID: N/A

 26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-AUG-24

SCOGGIN, MERLYN, MD

Provider ID: N/A


 26024 ACERO
MISSION VIEJO, CA 92691

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-JUN-24


SCOGGIN, MERLYN, MD

Provider ID: N/A

 26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24


SCOGGIN, MERLYN, MD

Provider ID: N/A

 26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

SCOGGIN, MERLYN, MD

Provider ID: N/A

 26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-AUG-24


SCOGGIN, MERLYN, MD

Provider ID: N/A

 26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-AUG-24


SHREIBA, MOHAMMED, MD†

Provider ID: N/A

 26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-NOV-22


SHREIBA, MOHAMMED, MD†

Provider ID: N/A

 26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24


SHREIBA, MOHAMMED, MD†

Provider ID: N/A

 26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24


SHREIBA, MOHAMMED, MD†

Provider ID: N/A

 26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-NOV-22


SHREIBA, MOHAMMED, MD†

Provider ID: N/A

 26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24


SHREIBA, MOHAMMED, MD†

Provider ID: N/A

 26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24


SHREIBA, MOHAMMED, MD†

Provider ID: N/A

 26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-NOV-22

SHREIBA, MOHAMMED, MD†

Provider ID: N/A

 26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24


SHREIBA, MOHAMMED, MD†

Provider ID: N/A

 26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-NOV-22

SHREIBA, MOHAMMED, MD†


Provider ID: N/A

 26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

PSYCHOLOGIST


FRANCIS, CATHERINE, PSYD

Provider ID: N/A

 26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-AUG-21


FRANCIS, CATHERINE, PSYD

Provider ID: N/A

 26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUN-22


FRANCIS, CATHERINE, PSYD

Provider ID: N/A

 26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUN-22


FRANCIS, CATHERINE, PSYD

Provider ID: N/A

 26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUN-22


FRANCIS, CATHERINE, PSYD

Provider ID: N/A

 26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-AUG-21


FRANCIS, CATHERINE, PSYD

Provider ID: N/A

 26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUN-22

HAMILTON, JOANNE, PhD

Provider ID: N/A

 29122 RANCHO VIEJO RD
STE 102G
MISSION VIEJO, CA 92675
Effective as of 01-MAR-24

HAMILTON, JOANNE, PhD

Provider ID: N/A

 29122 RANCHO VIEJO RD
STE 102G

C1. Lista de proveedores de la red Médico de atención especializada

MISSION VIEJO, CA 92675
Effective as of 01-MAR-24

HAMILTON, JOANNE, PhD

Provider ID: N/A

29122 RANCHO VIEJO RD
STE 102G
MISSION VIEJO, CA 92675
Effective as of 01-MAR-24

HAMILTON, JOANNE, PhD

Provider ID: N/A

29122 RANCHO VIEJO RD
STE 102G
MISSION VIEJO, CA 92675
Effective as of 01-MAR-24

HANDLEY, KAREN, PhD

Provider ID: N/A

26441 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-JUN-19

HANDLEY, KAREN, PhD

Provider ID: N/A

26441 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-JUN-19

HANDLEY, KAREN, PhD

Provider ID: N/A

26441 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-JUN-19

HANDLEY, KAREN, PhD

Provider ID: N/A

26441 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-JUN-19

KIENZLE, HELEN, PhD†

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-FEB-22

KIENZLE, HELEN, PhD†

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-FEB-22

KUECHLE, RALPH, PhD

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-FEB-22

KUECHLE, RALPH, PhD

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-FEB-22

KUECHLE, RALPH, PhD

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-FEB-22

KUECHLE, RALPH, PhD

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-FEB-22

MARCUS, DEKE, PhD

Provider ID: N/A

27201 PUERTA REAL STE
300
MISSION VIEJO, CA 92691
Effective as of 01-AUG-20

MARCUS, DEKE, PhD

Provider ID: N/A

27201 PUERTA REAL STE
300
MISSION VIEJO, CA 92691
Effective as of 01-AUG-20

MELE, ANTHONY, PSYD†

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-AUG-21

MELE, ANTHONY, PSYD†

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUN-22

MELE, ANTHONY, PSYD†

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUN-22

MELE, ANTHONY, PSYD†

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-AUG-21

MELE, ANTHONY, PSYD†

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUN-22

MELE, ANTHONY, PSYD†

Provider ID: N/A

26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUN-22

MONTEL, SEBASTIEN, PhD†

Provider ID: N/A

27201 PUERTA REAL STE
300

C1. Lista de proveedores de la red Médico de atención especializada

MISSION VIEJO, CA 92691
Effective as of 01-AUG-20

MONTEL, SEBASTIEN, PhD†

Provider ID: N/A

📍 27201 PUERTA REAL STE
300
MISSION VIEJO, CA 92691
Effective as of 01-AUG-20

MONTEL, SEBASTIEN, PhD†

Provider ID: N/A

📍 27201 PUERTA REAL STE
300
MISSION VIEJO, CA 92691
Effective as of 01-AUG-20

MONTEL, SEBASTIEN, PhD†

Provider ID: N/A

📍 27201 PUERTA REAL STE
300
MISSION VIEJO, CA 92691
Effective as of 01-AUG-20

REZNICK, HARRELL, PSYD†

Provider ID: N/A

📍 26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUN-22

REZNICK, HARRELL, PSYD†

Provider ID: N/A

📍 26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUN-22

ZAYAT, DINA, PSYD

Provider ID: N/A

📍 26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUL-22

ZAYAT, DINA, PSYD

Provider ID: N/A

📍 26051 ACERO STE 100

MISSION VIEJO, CA 92691
Effective as of 01-JUL-22

ZAYAT, DINA, PSYD

Provider ID: N/A

📍 26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUL-22

ZAYAT, DINA, PSYD

Provider ID: N/A

📍 26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUL-22

PULMONARY DISEASES

GOLDBERG, ROBERT, MD†

Provider ID: N/A

📍 26800 CROWN VALLEY
PKWY STE 205
MISSION VIEJO, CA 92691
Effective as of 01-DEC-14

GOMEZ, GABRIEL, MD†

Provider ID: N/A

📍 26800 CROWN VALLEY
PKWY STE 205
MISSION VIEJO, CA 92691
Effective as of 01-OCT-18

GOMEZ, GABRIEL, MD†

Provider ID: N/A

📍 26800 CROWN VALLEY
PKWY STE 205
MISSION VIEJO, CA 92691
Effective as of 01-OCT-18

QURESHI, TAUSEEF, MD†

Provider ID: N/A

📍 26800 CROWN VALLEY
PKWY STE 205
MISSION VIEJO, CA 92691
Effective as of 01-JUL-15

SCHIFFMAN, GEORGE, MD†

Provider ID: N/A

📍 26800 CROWN VALLEY
PKWY STE 205
MISSION VIEJO, CA 92691
Effective as of 01-APR-11

SCHIFFMAN, GEORGE, MD†

Provider ID: N/A

📍 26800 CROWN VALLEY
PKWY STE 205
MISSION VIEJO, CA 92691
Effective as of 01-OCT-99

SCHIFFMAN, GEORGE, MD†

Provider ID: N/A

📍 26800 CROWN VALLEY
PKWY STE 205
MISSION VIEJO, CA 92691
Effective as of 01-MAY-12

TAMMELIN, BRUCE, MD†

Provider ID: N/A

📍 26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-NOV-12

TAMMELIN, BRUCE, MD†

Provider ID: N/A

📍 26732 CROWN VALLEY
PKWY STE 161
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

TAMMELIN, BRUCE, MD†

Provider ID: N/A

📍 26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAR-08

RADIATION ONCOLOGY

CHOU, WILLIAM, MD†

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-APR-20

CHOU, WILLIAM, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-DEC-19

CHOU, WILLIAM, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-DEC-19

CHOU, WILLIAM, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-DEC-19

CHOU, WILLIAM, MD†

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 160
MISSION VIEJO, CA 92691
Effective as of 01-SEP-19

CHOU, WILLIAM, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

FENG, CHU-PEI, MD†

Provider ID: N/A

27700 MEDICAL CENTER
RD STE 2
MISSION VIEJO, CA 92691
Effective as of 01-JAN-17

FENG, CHU-PEI, MD†

Provider ID: N/A

27700 MEDICAL CENTER
RD STE 2
MISSION VIEJO, CA 92691
Effective as of 01-JAN-17

FENG, CHU-PEI, MD†

Provider ID: N/A

27700 MEDICAL CENTER
RD STE 2
MISSION VIEJO, CA 92691
Effective as of 01-JAN-17

FENG, CHU-PEI, MD†

Provider ID: N/A

27700 MEDICAL CENTER
RD STE 2
MISSION VIEJO, CA 92691
Effective as of 01-SEP-19

LEE, SHARON, MD†

Provider ID: N/A

27700 MEDICAL CENTER
RD
MISSION VIEJO, CA 92691
Effective as of 01-SEP-19

LIU, GENE FU, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-MAR-21

LIU, GENE FU, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-APR-21

LIU, GENE FU, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JAN-21

LIU, GENE FU, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JAN-21

YOUNG, CAROLYN, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

YOUNG, CAROLYN, MD†

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 160
MISSION VIEJO, CA 92691
Effective as of 01-SEP-19

RHEUMATOLOGY

CASTRO RUEDA, HERNAN, MD†

Provider ID: N/A


26732 CROWN VALLEY
PKWY STE 151

C1. Lista de proveedores de la red Médico de atención especializada

MISSION VIEJO, CA 92691
Effective as of 01-AUG-17


DRIVER, CATHERINE, MD

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 151
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23


DRIVER, CATHERINE, MD

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 151
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23


JAFARI FARSHAMI, FATEMEH, MD

Provider ID: N/A

 26991 CROWN VALLEY
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-SEP-23


KOVACS, DAVID, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 151
MISSION VIEJO, CA 92691
Effective as of 01-APR-16


PHILIPOSE, JAYA, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 151
MISSION VIEJO, CA 92691
Effective as of 01-APR-16


PHILIPOSE, JAYA, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 151
MISSION VIEJO, CA 92691
Effective as of 01-APR-16


SINGH, SIMRANJIT, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 151
MISSION VIEJO, CA 92691
Effective as of 01-SEP-19

SINGH, SIMRANJIT, MD†


Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 151
MISSION VIEJO, CA 92691
Effective as of 01-SEP-19

SURGERY COLON SURGERY


BRADY, MATTHEW, MD†

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23


BRADY, MATTHEW, MD†

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

BRADY, MATTHEW, MD†

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

BRADY, MATTHEW, MD†


Provider ID: N/A

 27799 MEDICAL CENTER

RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21


BRADY, MATTHEW, MD†

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21


BRADY, MATTHEW, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 351
MISSION VIEJO, CA 92691
Effective as of 01-MAR-21


BRADY, MATTHEW, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 351
MISSION VIEJO, CA 92691
Effective as of 01-MAR-21

BRADY, MATTHEW, MD†


Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 351
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

SURGERY CRITICAL CARE

YU, PETER, MD

Provider ID: N/A

 26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

SURGERY GENERAL

ABOU ABBASS, AHMAD, MD†

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

ABOU ABBASS, AHMAD, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

ABOU ABBASS, AHMAD, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

ABOU ABBASS, AHMAD, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUL-21

ABOU ABBASS, AHMAD, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JAN-22

ABOU ABBASS, AHMAD, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691

Effective as of 01-JUL-21

ABOU ABBASS, AHMAD, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

ANDERSON, MARLA, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

ANDERSON, MARLA, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUL-21

ANDERSON, MARLA, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

ANDERSON, MARLA, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

ANDERSON, MARLA, MD†

Provider ID: N/A

27799 MEDICAL CENTER

RD

STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

ANDERSON, MARLA, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 351
MISSION VIEJO, CA 92691
Effective as of 01-MAR-19

ANDERSON, MARLA, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 351
MISSION VIEJO, CA 92691
Effective as of 01-MAY-22

ANDERSON, MARLA, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 351
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

BACON, LOUISE, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-AUG-21

BACON, LOUISE, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 351
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

BACON, LOUISE, MD†

Provider ID: N/A


27799 MEDICAL CENTER
RD

C1. Lista de proveedores de la red Médico de atención especializada

STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21


BACON, LOUISE, MD†

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21


BACON, LOUISE, MD†

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23


BACON, LOUISE, MD†

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23


BACON, LOUISE, MD†

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUL-21


BRADY, MATTHEW, MD†

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22


BRADY, MATTHEW, MD†

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUL-21


BRADY, MATTHEW, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 351
MISSION VIEJO, CA 92691
Effective as of 01-JUL-21


KUSHNER, KENNETH, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 351
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18


KUSHNER, KENNETH, MD†

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23


KUSHNER, KENNETH, MD†

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21


KUSHNER, KENNETH, MD†

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21


KUSHNER, KENNETH, MD†

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21


KUSHNER, KENNETH, MD†

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21


KUSHNER, KENNETH, MD†

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23


LAM, VINH, MD†

Provider ID: N/A

 26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-DEC-18


ROBERTSON, ELSIE, MD

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

ROBERTSON, ELSIE, MD

Provider ID: N/A

 27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

**C1. Lista de proveedores de la red
Médico de atención especializada**

ROBERTSON, ELSIE, MD

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

ROBERTSON, ELSIE, MD

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

ROBERTSON, ELSIE, MD

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

SHAVER, JOHN, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUL-21

SHAVER, JOHN, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

SHAVER, JOHN, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD

STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

SHAVER, JOHN, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

SHAVER, JOHN, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUL-21

SHAVER, JOHN, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

SHAVER, JOHN, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

SHAVER, JOHN, MD†

Provider ID: N/A

27799 MEDICAL CENTER
RD
STE 440
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

SHAVER, JOHN, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 351
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

SURGERY

NEUROLOGICAL

KIM, KEUN-YOUNG, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-JUL-15

KIM, KEUN-YOUNG, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-JUL-15

KIM, KEUN-YOUNG, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-JUL-15

KIM, KEUN-YOUNG, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-JUL-15

LIAUW, JASON, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 561
MISSION VIEJO, CA 92691
Effective as of 01-APR-16

MEHTA, VIVEK, MD†

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691

Effective as of 01-AUG-21

MEHTA, VIVEK, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691

Effective as of 01-AUG-21

MEHTA, VIVEK, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691

Effective as of 01-AUG-21

MEHTA, VIVEK, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691

Effective as of 01-AUG-21

MUHONEN, MICHAEL, MD

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691

Effective as of 01-MAR-23

NWAGWU, CHIEDOZIE, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691

Effective as of 01-JUN-24

NWAGWU, CHIEDOZIE, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691

Effective as of 01-AUG-23

NWAGWU, CHIEDOZIE, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691

Effective as of 01-AUG-23

RAO, VIKAS, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691

Effective as of 01-DEC-22

RAO, VIKAS, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691

Effective as of 01-DEC-19

RAO, VIKAS, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691

Effective as of 01-JUL-22

RAO, VIKAS, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691

Effective as of 01-JUL-22

RAO, VIKAS, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691

Effective as of 01-NOV-16

RAO, VIKAS, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691

Effective as of 01-NOV-16

TAGHVA, ALEXANDER, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691

Effective as of 01-AUG-15

TAGHVA, ALEXANDER, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691

Effective as of 01-AUG-15

TSIMPAS, ASTERIOS, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691

Effective as of 01-SEP-23

TSIMPAS, ASTERIOS, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691

Effective as of 01-MAY-21

TSIMPAS, ASTERIOS, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691

Effective as of 01-MAY-21

TSIMPAS, ASTERIOS, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541

C1. Lista de proveedores de la red Médico de atención especializada

MISSION VIEJO, CA 92691
Effective as of 01-MAY-21

TSIMPAS, ASTERIOS, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-MAY-21

TSIMPAS, ASTERIOS, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

TSIMPAS, ASTERIOS, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-MAY-21

TSIMPAS, ASTERIOS, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

TSIMPAS, ASTERIOS, MD

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-SEP-23

SURGERY ORTHOPEDIC

AMINIAN, AFSHIN, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JAN-17

AMINIAN, AFSHIN, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JUN-16

AMINIAN, AFSHIN, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JUN-16

AMINIAN, AFSHIN, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JUN-16

AMINIAN, AFSHIN, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JUN-16

AMINIAN, AFSHIN, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-NOV-07

AMINIAN, AFSHIN, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JAN-21

BURDI, MICHAEL, MD

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14

BURDI, MICHAEL, MD

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-APR-12

CHEN, JAMES, MD†

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

CHEN, JAMES, MD†

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

CLAVERIA, RICHARD, MD

Provider ID: N/A

26921 CROWN VALLEY
PKWY STE 201
MISSION VIEJO, CA 92691
Effective as of 01-MAR-20

CLAVERIA, RICHARD, MD

Provider ID: N/A

26921 CROWN VALLEY
PKWY STE 201
MISSION VIEJO, CA 92691
Effective as of 01-MAR-20

DOBYNS, JEFFREY, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-SEP-15

DUGGAN, DANIEL, DO†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

C1. Lista de proveedores de la red Médico de atención especializada

DUGGAN, DANIEL, DO†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-NOV-20

DUGGAN, DANIEL, DO†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JAN-21

DUGGAN, DANIEL, DO†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JAN-21

DUGGAN, DANIEL, DO†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-SEP-19

DUGGAN, DANIEL, DO†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

ELZIK, MARK, MD

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14

ELZIK, MARK, MD

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-NOV-23

ELZIK, MARK, MD

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-DEC-14

FITZPATRICK, MICHAEL, MD†

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-JUL-07

FITZPATRICK, MICHAEL, MD†

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-DEC-23

FITZPATRICK, MICHAEL, MD†

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-DEC-23

FITZPATRICK, MICHAEL, MD†

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

GARDNER, STEPHEN, MD

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691

Effective as of 01-DEC-14

GARDNER, STEPHEN, MD

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-DEC-14

GUERRERO, EVAN, MD†

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-NOV-21

GUERRERO, EVAN, MD†

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-NOV-21

GVOZDYEV, BORYS, MD†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-AUG-20

GVOZDYEV, BORYS, MD†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-AUG-20

GVOZDYEV, BORYS, MD†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-AUG-20

HANJAN, TIVA, MD†

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691

Effective as of 01-FEB-18

HUO, KEUN-HENG, MD†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691

Effective as of 01-AUG-20

HUO, KEUN-HENG, MD†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691

Effective as of 01-AUG-20

HUO, KEUN-HENG, MD†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691

Effective as of 01-AUG-20

KIM-ORDEN, MICHAEL, MD

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691

Effective as of 01-MAR-23

KIM-ORDEN, MICHAEL, MD

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691

Effective as of 01-OCT-23

LALONDE, FRANCOIS, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691

Effective as of 01-JAN-17

LALONDE, FRANCOIS, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691

Effective as of 01-APR-08

LALONDE, FRANCOIS, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691

Effective as of 01-SEP-19

LALONDE, FRANCOIS, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691

Effective as of 01-OCT-12

LALONDE, FRANCOIS, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691

Effective as of 01-JUL-23

LALONDE, FRANCOIS, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691

Effective as of 01-JUL-23

MAJUMDAR, ADITI, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691

Effective as of 01-MAY-22

MAJUMDAR, ADITI, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691

Effective as of 01-MAY-22

MARANGI, KENT, MD†

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691

Effective as of 01-JUL-12

MARANGI, KENT, MD†

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691

Effective as of 01-APR-12

MISAGHI, AMIRHOSSEIN, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691

Effective as of 01-SEP-19

MISAGHI, AMIRHOSSEIN, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691

Effective as of 01-DEC-19

MISAGHI, AMIRHOSSEIN, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691

Effective as of 01-DEC-19

MORRIS, JOHN, MD†

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691

Effective as of 01-APR-12

MORRIS, JOHN, MD†

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691

Effective as of 01-JUL-12

C1. Lista de proveedores de la red Médico de atención especializada

PARK, SAMUEL, MD

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-DEC-14

PARK, SAMUEL, MD

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-DEC-23

PARK, SAMUEL, MD

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-DEC-23

PARK, SAMUEL, MD

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14

PODOLSKY, ANATOL, MD†

Provider ID: N/A

26921 CROWN VALLEY
PKWY STE 201
MISSION VIEJO, CA 92691
Effective as of 01-DEC-20

PODOLSKY, ANATOL, MD†

Provider ID: N/A

26921 CROWN VALLEY
PKWY STE 201
MISSION VIEJO, CA 92691
Effective as of 01-NOV-20

PODOLSKY, ANATOL, MD†

Provider ID: N/A

26921 CROWN VALLEY

PKWY STE 201
MISSION VIEJO, CA 92691
Effective as of 01-NOV-20

PODOLSKY, ANATOL, MD†

Provider ID: N/A

26921 CROWN VALLEY
PKWY STE 201
MISSION VIEJO, CA 92691
Effective as of 01-DEC-20

PORAT, SHAROUN, MD†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

PORAT, SHAROUN, MD†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-MAR-21

PORAT, SHAROUN, MD†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-SEP-19

PORAT, SHAROUN, MD†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

PORAT, SHAROUN, MD†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

PORAT, SHAROUN, MD†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-NOV-20

PORAT, SHAROUN, MD†

Provider ID: N/A

27725 SANTA MARGARITA
PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

ROSENFELD, SAMUEL, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-APR-08

ROSENFELD, SAMUEL, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-MAR-20

ROSENFELD, SAMUEL, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JAN-21

ROSENFELD, SAMUEL, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-OCT-12

SCHLECHTER, JOHN, DO†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JUL-20

**C1. Lista de proveedores de la red
Médico de atención especializada**

TOCCI, STEPHEN, MD

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

TOCCI, STEPHEN, MD

Provider ID: N/A

26401 CROWN VALLEY
PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

WANG, WILLIAM, MD†

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-MAR-18

WANG, WILLIAM, MD†

Provider ID: N/A

26730 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-MAR-18

WEINERT, CARL, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-APR-08

WEINERT, CARL, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-OCT-12

WEINERT, CARL, MD†

Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JAN-17

SURGERY PEDIATRIC

GERMAN, JOHN, MD†

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-MAR-18

LAM, VINH, MD†

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-JUL-23

LAM, VINH, MD†

Provider ID: N/A

27800 MEDICAL CENTER
RD STE 138
MISSION VIEJO, CA 92691
Effective as of 01-JAN-14

LAM, VINH, MD†

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-SEP-17

LAM, VINH, MD†

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-JUL-17

LAM, VINH, MD†

Provider ID: N/A

26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-SEP-17

SURGERY PLASTIC

LEE, MICHAEL, MD

Provider ID: N/A

26800 CROWN VALLEY

PKWY STE 410
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

SURGERY THORACIC

FOWLER, AARON, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-OCT-20

FOWLER, AARON, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-OCT-20

FOWLER, AARON, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-OCT-20

FOWLER, AARON, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-OCT-20

FOWLER, AARON, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-OCT-20

FOWLER, AARON, MD†

Provider ID: N/A


26732 CROWN VALLEY
PKWY STE 226

C1. Lista de proveedores de la red Médico de atención especializada

MISSION VIEJO, CA 92691
Effective as of 01-OCT-20


SAFFARZADEH, AREO, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-OCT-21


SAFFARZADEH, AREO, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-OCT-21


SAFFARZADEH, AREO, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-APR-23


SAFFARZADEH, AREO, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-APR-23


TANG, TAYLOR, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-NOV-16


TANG, TAYLOR, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-NOV-16


TANG, TAYLOR, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-NOV-16


TANG, TAYLOR, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 461
MISSION VIEJO, CA 92691
Effective as of 01-SEP-19


TANG, TAYLOR, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 461
MISSION VIEJO, CA 92691
Effective as of 01-SEP-19


TANG, TAYLOR, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-NOV-16


THIBAUT, WILLIAM, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-FEB-19

THIBAUT, WILLIAM, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-FEB-19

THIBAUT, WILLIAM, MD†


Provider ID: N/A

 26732 CROWN VALLEY

PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-FEB-21


THIBAUT, WILLIAM, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-FEB-21


THIBAUT, WILLIAM, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-FEB-19


THIBAUT, WILLIAM, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-FEB-19


WON, EUGENE, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-APR-23


WON, EUGENE, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

WON, EUGENE, MD†

Provider ID: N/A

 26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-OCT-22

C1. Lista de proveedores de la red Médico de atención especializada

WON, EUGENE, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-OCT-22

WON, EUGENE, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

WON, EUGENE, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

WON, EUGENE, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

WON, EUGENE, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

WON, EUGENE, MD†

Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

UROLOGY

BUI, DON, MD†

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

BUI, DON, MD†

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

BUI, DON, MD†

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

BUI, DON, MD†

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

BUI, DON, MD†

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

CHAMBERLIN, DAVID, MD

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 140
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

CHAMBERLIN, DAVID, MD

Provider ID: N/A

27871 MEDICAL CENTER RD
STE 140
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

ELKHOURY, FUAD, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

ELKHOURY, FUAD, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

ELKHOURY, FUAD, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

ELKHOURY, FUAD, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

ELKHOURY, FUAD, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

ELKHOURY, FUAD, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

GRUENENFELDER, JENNIFER, MD

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-JAN-21

HO, TAMMY, MD†

Provider ID: N/A

26800 CROWN VALLEY

CI. Lista de proveedores de la red Médico de atención especializada

PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-FEB-22

HO, TAMMY, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-JAN-21

HO, TAMMY, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-DEC-19

HO, TAMMY, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-DEC-19

HO, TAMMY, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

HO, TAMMY, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

HO, TAMMY, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

HO, TAMMY, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

KIM, MOSES, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

KIM, MOSES, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

KIM, MOSES, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

KIM, MOSES, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

KIM, MOSES, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

KIM, MOSES, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-DEC-19

KIM, MOSES, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340

MISSION VIEJO, CA 92691
Effective as of 01-DEC-19

MEAGLIA, JAMES, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-JAN-21

MEAGLIA, JAMES, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-SEP-18

MEAGLIA, JAMES, MD†

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

MEAGLIA, JAMES, MD†

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JUN-22

MEAGLIA, JAMES, MD†

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JUN-22

MEAGLIA, JAMES, MD†

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

MEAGLIA, JAMES, MD†

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-JUN-24

MEAGLIA, JAMES, MD†

Provider ID: N/A

📄 26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691

Effective as of 01-SEP-18

MEAGLIA, JAMES, MD†

Provider ID: N/A

📄 26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691

Effective as of 01-JUN-18

MEAGLIA, JAMES, MD†

Provider ID: N/A

📄 26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691

Effective as of 01-JUN-18

MEAGLIA, JAMES, MD†

Provider ID: N/A

📄 26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-FEB-23

MEAGLIA, JAMES, MD†

Provider ID: N/A

📄 26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-FEB-23

NAKAMURA, LEAH, MD

Provider ID: N/A

📄 26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-APR-23

NAKAMURA, LEAH, MD

Provider ID: N/A

📄 26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-APR-23

NAKAMURA, LEAH, MD

Provider ID: N/A

📄 26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-APR-23

NAKAMURA, LEAH, MD

Provider ID: N/A

📄 26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-APR-23

NAKAMURA, LEAH, MD†

Provider ID: N/A

📄 26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691

Effective as of 01-JUN-18

NAKAMURA, LEAH, MD

Provider ID: N/A

📄 26991 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691

Effective as of 01-JAN-23

NAKAMURA, LEAH, MD

Provider ID: N/A

📄 26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-JUN-24

NAKAMURA, LEAH, MD†

Provider ID: N/A

📄 26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691

Effective as of 01-JUN-24

NAKAMURA, LEAH, MD

Provider ID: N/A

📄 26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-OCT-23

NAKAMURA, LEAH, MD†

Provider ID: N/A

📄 26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691

Effective as of 01-JAN-23

NAKAMURA, LEAH, MD†

Provider ID: N/A

📄 26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691

Effective as of 01-JAN-21

PASIN, ERIK, MD

Provider ID: N/A

📄 26800 CROWN VALLEY
PKWY STE 445
MISSION VIEJO, CA 92691

Effective as of 01-NOV-14

RANDALL, JOSH, MD

Provider ID: N/A

📄 26991 CROWN VALLEY
PKWY STE 120
MISSION VIEJO, CA 92691

Effective as of 01-OCT-23

RANDALL, JOSH, MD†

Provider ID: N/A

📄 26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-MAY-23

RANDALL, JOSH, MD†

Provider ID: N/A

📄 26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-MAY-22

RANDALL, JOSH, MD†

Provider ID: N/A

📄 26691 PLAZA STE 120

C1. Lista de proveedores de la red Médico de atención especializada

MISSION VIEJO, CA 92691
Effective as of 01-MAY-22

RANDALL, JOSH, MD†

Provider ID: N/A
26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

RANDALL, JOSH, MD†

Provider ID: N/A
26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

RANDALL, JOSH, MD†

Provider ID: N/A
26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

SHOURESHI, POONE, MD

Provider ID: N/A
26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-MAR-24

SINGH, KARAN, MD†

Provider ID: N/A
26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

SINGH, KARAN, MD†

Provider ID: N/A
26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

SINGH, KARAN, MD†

Provider ID: N/A
26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

SINGH, KARAN, MD†

Provider ID: N/A
26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-SEP-18

SINGH, KARAN, MD†

Provider ID: N/A
26991 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

SINGH, KARAN, MD†

Provider ID: N/A
26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-JUN-18

SINGH, KARAN, MD†

Provider ID: N/A
26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

SINGH, KARAN, MD†

Provider ID: N/A
26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JUN-22

SINGH, KARAN, MD†

Provider ID: N/A
26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JUN-22

SINGH, KARAN, MD†

Provider ID: N/A
26991 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

SINGH, KARAN, MD†

Provider ID: N/A
26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-SEP-18

SINGH, KARAN, MD†

Provider ID: N/A
26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-JAN-21

SINGH, KARAN, MD†

Provider ID: N/A
26991 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-APR-21

SINGH, KARAN, MD†

Provider ID: N/A
26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-APR-21

SPITZ, AARON, MD†

Provider ID: N/A
26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-APR-21


SPITZ, AARON, MD†

Provider ID: N/A
26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-DEC-19

SPITZ, AARON, MD†


Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

 26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-DEC-19


SPITZ, AARON, MD†

Provider ID: N/A

 26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-OCT-18


SPITZ, AARON, MD

Provider ID: N/A

 26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23


SPITZ, AARON, MD

Provider ID: N/A

 26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23


SPITZ, AARON, MD†

Provider ID: N/A

 26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-JUN-18


SPITZ, AARON, MD†

Provider ID: N/A

 26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-JUN-18


SPITZ, AARON, MD†

Provider ID: N/A

 26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24


STEPHANY, HEIDI, MD

Provider ID: N/A

 26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-JAN-24


SU, DANIEL, MD

Provider ID: N/A

 26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JUN-24

SU, DANIEL, MD

Provider ID: N/A

 26991 CROWN VALLEY
PKWY STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23


SU, DANIEL, MD

Provider ID: N/A

 26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

SU, DANIEL, MD

Provider ID: N/A

 26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23


SU, DANIEL, MD

Provider ID: N/A

 26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23


SU, DANIEL, MD

Provider ID: N/A

 26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23


SU, DANIEL, MD

Provider ID: N/A

 26991 CROWN VALLEY
PKWY STE 120
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23


SU, DANIEL, MD†

Provider ID: N/A

 26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-DEC-19


SU, DANIEL, MD†

Provider ID: N/A

 26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-DEC-19


TEBYANI, NEYSSAN, MD†

Provider ID: N/A

 26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-DEC-19


TEBYANI, NEYSSAN, MD†

Provider ID: N/A

 26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-MAY-21

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

 26991 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-MAY-21

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

 26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-JAN-23

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691

Effective as of 01-DEC-19

TEBYANI, NEYSSAN, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-FEB-23

TEBYANI, NEYSSAN, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-FEB-23

TEBYANI, NEYSSAN, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-FEB-23

TEBYANI, NEYSSAN, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-FEB-23

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

26991 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691

Effective as of 01-JAN-23

TEBYANI, NEYSSAN, MD†

Provider ID: N/A

26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691

Effective as of 01-JUN-18

TEBYANI, NEYSSAN, MD

Provider ID: N/A

26691 PLAZA STE 120
MISSION VIEJO, CA 92691

Effective as of 01-OCT-23

ALLERGY IMMUNOLOGY

IMAM, ASIF, MD

Provider ID: N/A

40680 CALIFORNIA OAKS
RD STE 1A
MURRIETA, CA 92562

Effective as of 01-MAR-23

IMAM, ASIF, MD

Provider ID: N/A

40680 CALIFORNIA OAKS
RD STE 1A
MURRIETA, CA 92562

Effective as of 01-MAR-23

IMAM, ASIF, MD

Provider ID: N/A

40680 CALIFORNIA OAKS
RD STE 1A
MURRIETA, CA 92562

Effective as of 01-MAR-23

ANESTHESIOLOGY

BAKER, BRUCE, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
100
MURRIETA, CA 92562

Effective as of 01-AUG-22

DRUET, JACK, MD

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 102
MURRIETA, CA 92562

Effective as of 01-JUL-23

KRAUSE, MARTIN, MD†

Provider ID: N/A

25500 MEDICAL CENTER
DR
MURRIETA, CA 92562

Effective as of 01-FEB-22

ANESTHESIOLOGY PAIN MANAGEMENT

AUSTIN, MARK, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 102
MURRIETA, CA 92562

Effective as of 01-JUL-23

BETTS, ANDRES, MD

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562

Effective as of 01-NOV-23

BETTS, ANDRES, MD

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562

Effective as of 01-NOV-23

KELLING, JONATHAN, MD†

Provider ID: N/A

38860 SKY CANYON DR
BLDG A
MURRIETA, CA 92563

Effective as of 01-JUL-23

KELLING, JONATHAN, MD†

Provider ID: N/A

38860 SKY CANYON DR
BLDG A
MURRIETA, CA 92563

Effective as of 01-DEC-18

C1. Lista de proveedores de la red Médico de atención especializada

KHATIBI, NIKAN, DO[†]

Provider ID: N/A

24910 LAS BRISAS RD STE
121
MURRIETA, CA 92562
Effective as of 01-SEP-22

CARDIAC ELECTROPHYSIOLOGY

OSHODI, GANIYU, MD[†]

Provider ID: N/A

40700 CALIFORNIA OAKS
RD STE 208
MURRIETA, CA 92562*
Effective as of 01-JUL-23

OSHODI, GANIYU, MD[†]

Provider ID: N/A

40700 CALIFORNIA OAKS
RD STE 208
MURRIETA, CA 92562
Effective as of 01-FEB-19

CARDIOVASCULAR DISEASE

ALTURJUMAN, AHMAD, MD[†]

Provider ID: N/A

40700 CALIFORNIA OAKS
RD STE 208
MURRIETA, CA 92562
Effective as of 01-NOV-22

ALTURJUMAN, AHMAD, MD[†]

Provider ID: N/A

29995 TECHNOLOGY DR
STE 302
MURRIETA, CA 92563
Effective as of 01-MAR-22

ALTURJUMAN, AHMAD, MD[†]

Provider ID: N/A

29995 TECHNOLOGY DR

STE 302
MURRIETA, CA 92563
Effective as of 01-MAR-22

ALTURJUMAN, AHMAD, MD[†]

Provider ID: N/A

29995 TECHNOLOGY DR
STE 302
MURRIETA, CA 92563
Effective as of 01-JUL-22

AMIN, JATIN, MD[†]

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563
Teleservice
Effective as of 01-JUL-24

AMIN, JATIN, MD[†]

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563
Teleservice
Effective as of 01-AUG-20

ATTIA, NADER, DO[†]

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563
Teleservice
Effective as of 01-AUG-24

ATTIA, NADER, DO[†]

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563
Teleservice
Effective as of 01-MAY-21

ATTIA, NADER, DO[†]

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563
Teleservice

Effective as of 01-MAR-20

ATTIA, NADER, DO[†]

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563
Teleservice
Effective as of 01-JUL-22

ATTIA, NADER, DO[†]

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563
Teleservice
Effective as of 01-SEP-18

BISWAS, MIMI, MD[†]

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563
Teleservice
Effective as of 01-FEB-17

BISWAS, MIMI, MD[†]

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563
Teleservice
Effective as of 01-FEB-17

BISWAS, MIMI, MD[†]

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563
Teleservice

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-FEB-17

BISWAS, MIMI, MD†

Provider ID: N/A

☐ 39755 MURRIETA HOT SPRINGS RD BLDG G MURRIETA, CA 92563

Teleservice

Effective as of 01-FEB-17

BISWAS, MIMI, MD†

Provider ID: N/A

☐ 39755 MURRIETA HOT SPRINGS RD BLDG G MURRIETA, CA 92563

Teleservice

Effective as of 01-FEB-17

COLLINS, BRIAN, MD†

Provider ID: N/A

☐ 40700 CALIFORNIA OAKS RD STE 208 MURRIETA, CA 92562

Effective as of 01-NOV-22

MESSENGER, BRADLEY, MD†

Provider ID: N/A

☐ 39755 MURRIETA HOT SPRINGS RD BLDG G MURRIETA, CA 92563

Teleservice

Effective as of 01-AUG-20

MUKHERJEE, ASHIS, MD†

Provider ID: N/A

☐ 28078 BAXTER RD STE 110 MURRIETA, CA 92563*

Effective as of 01-JUL-23

OSHODI, GANIYU, MD

Provider ID: N/A

☐ 40770 CALIFORNIA OAKS RD STE A MURRIETA, CA 92562

Effective as of 01-MAR-23

OSHODI, GANIYU, MD†

Provider ID: N/A

☐ 40700 CALIFORNIA OAKS RD STE 208 MURRIETA, CA 92562

Effective as of 01-JAN-21

PATANKAR, KAUSTUBH, MD†

Provider ID: N/A

☐ 39755 MURRIETA HOT SPRINGS RD BLDG G MURRIETA, CA 92563

Effective as of 01-FEB-22

PATANKAR, KAUSTUBH, MD†

Provider ID: N/A

☐ 39755 MURRIETA HOT SPRINGS RD BLDG G MURRIETA, CA 92563

Effective as of 01-SEP-18

SCHWARZ, ERNST, MD†

Provider ID: N/A

☐ 25470 MEDICAL CENTER DR STE 201 MURRIETA, CA 92562

Effective as of 01-FEB-21

SCHWARZ, ERNST, MD†

Provider ID: N/A

☐ 25470 MEDICAL CENTER DR STE 201 MURRIETA, CA 92562

Effective as of 01-SEP-21

SCHWARZ, ERNST, MD†

Provider ID: N/A

☐ 39755 DATE ST STE 205 MURRIETA, CA 92563

Effective as of 01-AUG-22

SCHWARZ, ERNST, MD†

Provider ID: N/A

☐ 39755 DATE ST STE 205

MURRIETA, CA 92563

Effective as of 01-AUG-22

CERTIFIED NURSE PRACTITIONER

ANDERSON, TRACEY, NP†

Provider ID: N/A

☐ 25150 HANCOCK AVE STE 210 MURRIETA, CA 92562

Effective as of 01-DEC-20

ANDERSON, TRACEY, NP†

Provider ID: N/A

☐ 25150 HANCOCK AVE STE 210 MURRIETA, CA 92562

Effective as of 01-FEB-20

ANDERSON, TRACEY, NP†

Provider ID: N/A

☐ 25150 HANCOCK AVE STE 210 MURRIETA, CA 92562

Effective as of 01-FEB-20

ANDERSON, TRACEY, NP†

Provider ID: N/A

☐ 25150 HANCOCK AVE STE 210 MURRIETA, CA 92562

Effective as of 01-FEB-20

ANDERSON, TRACEY, NP†

Provider ID: N/A

☐ 25150 HANCOCK AVE STE 210 MURRIETA, CA 92562

Effective as of 01-FEB-20

BARBOZA, GEORGE, NP

Provider ID: N/A

☐ 39755 MURRIETA HOT SPRINGS RD

C1. Lista de proveedores de la red Médico de atención especializada

MURRIETA, CA 92563
Effective as of 01-SEP-22

BARBOZA, GEORGE, NP

Provider ID: N/A

☒ 39755 MURRIETA HOT
SPRINGS RD

MURRIETA, CA 92563
Effective as of 01-SEP-22

BASA, GRACIOUS, NPF

Provider ID: N/A

☒ 41670 IVY ST STE B
MURRIETA, CA 92562

Effective as of 01-JUN-24

BEDFORD, RONALD, NP†

Provider ID: N/A

☒ 25405 HANCOCK AVE STE
200

MURRIETA, CA 92562
Effective as of 01-SEP-22

BEDFORD, RONALD, NP†

Provider ID: N/A

☒ 25405 HANCOCK AVE STE
200

MURRIETA, CA 92562
Effective as of 01-SEP-22

BEDFORD, RONALD, NP†

Provider ID: N/A

☒ 25405 HANCOCK AVE STE
200

MURRIETA, CA 92562
Effective as of 01-MAY-22

BEDFORD, RONALD, NP†

Provider ID: N/A

☒ 25405 HANCOCK AVE STE
200

MURRIETA, CA 92562
Effective as of 01-MAY-22

BEDFORD, RONALD, NP†

Provider ID: N/A

☒ 25405 HANCOCK AVE STE
200

MURRIETA, CA 92562
Effective as of 01-MAY-22

CAMPBELL, AMBER, NP

Provider ID: N/A

☒ 25470 MEDICAL CENTER
DR STE 102

MURRIETA, CA 92562
Effective as of 01-JAN-22

CORCORAN, KIMBERLY, NP

Provider ID: N/A

☒ 24910 LAS BRISAS RD STE
105

MURRIETA, CA 92562
Effective as of 01-OCT-19

DAO, NU, NP†

Provider ID: N/A

☒ 28078 BAXTER RD STE 450
MURRIETA, CA 92563

Effective as of 01-MAR-21

DONLON, RYAN, NPF

Provider ID: N/A

☒ 24400 JACKSON AVE STE B
MURRIETA, CA 92562

Effective as of 01-MAR-24

DONLON, RYAN, NPF

Provider ID: N/A

☒ 24400 JACKSON AVE STE B
MURRIETA, CA 92562

Effective as of 01-MAR-24

DONLON, RYAN, NPF

Provider ID: N/A

☒ 24400 JACKSON AVE STE B
MURRIETA, CA 92562

Effective as of 01-MAR-24

DONLON, RYAN, NPF

Provider ID: N/A

☒ 24400 JACKSON AVE STE B
MURRIETA, CA 92562

Effective as of 01-MAR-24

FAIQ, JAMILA, NP†

Provider ID: N/A

☒ 25405 HANCOCK AVE STE
206

MURRIETA, CA 92562
Teleservice

Effective as of 01-NOV-22

GUTIERREZ, CRYSTAL, NP†

Provider ID: N/A

☒ 25109 JEFFERSON AVE STE
100

MURRIETA, CA 92562
Effective as of 01-AUG-20

HARTMAN, JULIE, NPF

Provider ID: N/A

☒ 25470 MEDICAL CENTER
DR STE 102

MURRIETA, CA 92562
Effective as of 01-SEP-23

HASAN, BUSHRA, NP

Provider ID: N/A

☒ 25470 MEDICAL CENTER
DR STE 102

MURRIETA, CA 92562
Effective as of 01-OCT-22

HUERTA, CARMEN, NP†

Provider ID: N/A

☒ 25405 HANCOCK AVE STE
200

MURRIETA, CA 92562
Effective as of 01-OCT-22

HUERTA, CARMEN, NP†

Provider ID: N/A

☒ 25405 HANCOCK AVE STE
200

C1. Lista de proveedores de la red Médico de atención especializada

MURRIETA, CA 92562
Effective as of 01-DEC-22

KLEWEIN, CRYSTAL, NPF

Provider ID: N/A
40770 CALIFORNIA OAKS
RD STE A
MURRIETA, CA 92562
Effective as of 01-MAY-23

KULJIAN, NANCY, NP

Provider ID: N/A
39755 MURRIETA HOT
SPRINGS RD STE E
MURRIETA, CA 92563
Effective as of 01-AUG-21

MOONEY, PATRICIA, NP†

Provider ID: N/A
25405 HANCOCK AVE STE
206
MURRIETA, CA 92562
Teleservice
Effective as of 01-MAY-21

MWAURA, WAIRIMU, NP†

Provider ID: N/A
25405 HANCOCK AVE STE
206
MURRIETA, CA 92562
Teleservice
Effective as of 01-JUN-21

PIZZIFRED, TIFFINY, NP†

Provider ID: N/A
25405 HANCOCK AVE STE
217
MURRIETA, CA 92562
Effective as of 01-JAN-18

PIZZIFRED, TIFFINY, NP†

Provider ID: N/A
25405 HANCOCK AVE STE
217
MURRIETA, CA 92562

Effective as of 01-JAN-18

SHEIKH, SARAH, NP

Provider ID: N/A
41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-MAY-23

SHEIKH, SARAH, NP

Provider ID: N/A
41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-OCT-16

SHEIKH, SARAH, NP

Provider ID: N/A
41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-MAY-23

SICKELS, JENNIFER, NP

Provider ID: N/A
24910 LAS BRISAS RD STE
105
MURRIETA, CA 92562
Effective as of 01-NOV-19

VIERA, LIANA, NP†

Provider ID: N/A
39755 MURRIETA HOT
SPRINGS RD
MURRIETA, CA 92563
Effective as of 01-JAN-22

VIERA, LIANA, NP†

Provider ID: N/A
39755 MURRIETA HOT
SPRINGS RD
MURRIETA, CA 92563
Effective as of 01-JAN-22

WILLEY, MARTI, NP†

Provider ID: N/A
25405 HANCOCK AVE STE
206

MURRIETA, CA 92562
Teleservice
Effective as of 01-JUN-21

DERMATOLOGY

AWADALLA, FARAH, MD†

Provider ID: N/A
40663 MURRIETA HOT
SPRINGS RD STE C3
MURRIETA, CA 92562
Effective as of 01-JUL-24

BROWN, REGINA, MD

Provider ID: N/A
25495 MEDICAL CENTER
DR STE 200
MURRIETA, CA 92562
Effective as of 01-AUG-24

FOWLER, VINCENT, MD†

Provider ID: N/A
25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-FEB-24

FOWLER, VINCENT, MD†

Provider ID: N/A
25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-FEB-24

KHERADMAND, SHIVA, DO†

Provider ID: N/A
25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-MAY-22

KHERADMAND, SHIVA, DO†

Provider ID: N/A
25405 HANCOCK AVE STE
200

**C1. Lista de proveedores de la red
Médico de atención especializada**

MURRIETA, CA 92562
Effective as of 01-MAY-22

KHERADMAND, SHIVA, DO†

Provider ID: N/A

25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-MAY-23

KHERADMAND, SHIVA, DO†

Provider ID: N/A

25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-DEC-21

KHERADMAND, SHIVA, DO†

Provider ID: N/A

25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-DEC-21

KHERADMAND, SHIVA, DO†

Provider ID: N/A

25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-DEC-21

KOUPAIE, JAFAR, MD

Provider ID: N/A

24400 JACKSON AVE STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

KOUPAIE, JAFAR, MD

Provider ID: N/A

24400 JACKSON AVE STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

KOUPAIE, JAFAR, MD

Provider ID: N/A

24400 JACKSON AVE STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

KOUPAIE, JAFAR, MD

Provider ID: N/A

24400 JACKSON AVE STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

MEHDI, RAZA, MD

Provider ID: N/A

40663 MURRIETA HOT
SPRINGS RD STE C3
MURRIETA, CA 92562
Effective as of 01-JUL-24

MITCHELL, JESSE, MD

Provider ID: N/A

24400 JACKSON AVE STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

MITCHELL, JESSE, MD

Provider ID: N/A

24400 JACKSON AVE STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

MITCHELL, JESSE, MD

Provider ID: N/A

24400 JACKSON AVE STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

MITCHELL, JESSE, MD

Provider ID: N/A

24400 JACKSON AVE STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

ROSHDIEH, BABAK, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
200

MURRIETA, CA 92562
Effective as of 01-MAY-23

ROSHDIEH, BABAK, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-JUL-23

SAIED, NAGI, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Teleservice
Effective as of 01-DEC-19

SAIED, NAGI, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Teleservice
Effective as of 01-MAY-23

SAIED, NAGI, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Teleservice
Effective as of 01-NOV-21

SAIED, NAGI, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
217
MURRIETA, CA 92562
Teleservice
Effective as of 01-NOV-18

SHAPIRO, STEVEN, MD

Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

40663 MURRIETA HOT
SPRINGS RD STE C3
MURRIETA, CA 92562
Effective as of 01-JUL-24

SHAPIRO, STEVEN, MD

Provider ID: N/A

40663 MURRIETA HOT
SPRINGS RD STE C3
MURRIETA, CA 92562
Effective as of 01-MAR-24

SHAPIRO, STEVEN, MD

Provider ID: N/A

40663 MURRIETA HOT
SPRINGS RD STE C3
MURRIETA, CA 92562
Effective as of 01-MAR-24

SIRICHOTIRATANA, MELISSA, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 200
MURRIETA, CA 92562
Effective as of 01-JUL-22

TAHERI, DANIEL, MD†

Provider ID: N/A

40663 MURRIETA HOT
SPRINGS RD STE C3
MURRIETA, CA 92562
Teleservice
Effective as of 01-APR-21

TAHERI, DANIEL, MD†

Provider ID: N/A

40663 MURRIETA HOT
SPRINGS RD STE C3
MURRIETA, CA 92562
Teleservice
Effective as of 01-APR-21

TAHERI, DANIEL, MD†

Provider ID: N/A

40663 MURRIETA HOT
SPRINGS RD STE C3
MURRIETA, CA 92562

Teleservice

Effective as of 01-DEC-21

TANG, NIKKI, MD

Provider ID: N/A

40663 MURRIETA HOT
SPRINGS RD STE C3
MURRIETA, CA 92562
Effective as of 01-JUL-24

THIELE, JENS, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 200
MURRIETA, CA 92562
Effective as of 01-JUL-22

VENKAT, ARUN, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 200
MURRIETA, CA 92562
Effective as of 01-FEB-21

WILLETT, MATTHEW, MD

Provider ID: N/A

25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-AUG-24

WILLETT, MATTHEW, MD

Provider ID: N/A

25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-AUG-24

WILLETT, MATTHEW, MD

Provider ID: N/A

25405 HANCOCK AVE STE
200

MURRIETA, CA 92562
Effective as of 01-AUG-24

WILLETT, MATTHEW, MD

Provider ID: N/A

25405 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-JUL-24

WINKELMANN, RICHARD, DO

Provider ID: N/A

40663 MURRIETA HOT
SPRINGS RD STE C3
MURRIETA, CA 92562
Effective as of 01-JUL-24

ENDOCRINOLOGY

METABOLISM DIABETES

BUI, AMY-VAN, MD†

Provider ID: N/A

39765 DATE ST STE 102
MURRIETA, CA 92563
Effective as of 01-NOV-13

FAMILY PRACTICE

FARZIN, ABDUL, MD

Provider ID: N/A

40690 CALIFORNIA OAKS
RD STE A
MURRIETA, CA 92562
Effective as of 01-MAR-24

MEMON, TALHA, MD†

Provider ID: N/A

39755 DATE ST STE 101
MURRIETA, CA 92563
Effective as of 01-OCT-18

MEMON, TALHA, MD†

Provider ID: N/A

39755 DATE ST STE 101
MURRIETA, CA 92563

**C1. Lista de proveedores de la red
Médico de atención especializada**

Effective as of 01-OCT-18

GASTROENTEROLOGY

ANYADIKE, CYRIL, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562

Effective as of 01-MAR-21

ANYADIKE, CYRIL, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562

Effective as of 01-JUL-23

ANYADIKE, CYRIL, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562

Effective as of 01-APR-20

ANYADIKE, CYRIL, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 101
MURRIETA, CA 92562

Effective as of 01-AUG-20

ANYADIKE, CYRIL, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562

Effective as of 01-FEB-18

ANYADIKE, CYRIL, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562

Effective as of 01-APR-17

ANYADIKE, CYRIL, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562

Effective as of 01-SEP-15

ARDIGO, GREGORY, MD†

Provider ID: N/A

40404 CALIFORNIA OAKS
RD STE C
MURRIETA, CA 92562

Effective as of 01-DEC-08

ARDIGO, GREGORY, MD†

Provider ID: N/A

40404 CALIFORNIA OAKS
RD STE C
MURRIETA, CA 92562

Effective as of 01-JUL-23

DINH, JACK, MD†

Provider ID: N/A

40404 CALIFORNIA OAKS
RD STE C
MURRIETA, CA 92562

Effective as of 01-DEC-08

DINH, JACK, MD†

Provider ID: N/A

40404 CALIFORNIA OAKS
RD STE C
MURRIETA, CA 92562

Effective as of 01-OCT-07

FAN, ROBERT, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562

Teleservice

Effective as of 01-MAR-21

FAN, ROBERT, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562

Teleservice

Effective as of 01-APR-20

FAN, ROBERT, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562

Teleservice

Effective as of 01-APR-17

FAN, ROBERT, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562

Teleservice

Effective as of 01-JUL-23

FAN, ROBERT, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562

Teleservice

Effective as of 01-AUG-15

FAN, ROBERT, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562

Teleservice

Effective as of 01-JUL-15

**FLANNERY, CHRISTOPHER,
MD**

Provider ID: N/A

40663 MURRIETA HOT
SPRINGS RD STE C1
MURRIETA, CA 92562

**C1. Lista de proveedores de la red
Médico de atención especializada**

Effective as of 01-APR-23

**FLANNERY, CHRISTOPHER,
MD**

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562

Effective as of 01-APR-23

**FLANNERY, CHRISTOPHER,
MD**

Provider ID: N/A

28078 BAXTER RD STE 530
MURRIETA, CA 92563

Effective as of 01-APR-23

**FLANNERY, CHRISTOPHER,
MD**

Provider ID: N/A

28078 BAXTER RD STE 530
MURRIETA, CA 92563

Effective as of 01-APR-23

NAKKA, SREENIVASA, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 306
MURRIETA, CA 92562

Effective as of 01-OCT-16

NAKKA, SREENIVASA, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 306
MURRIETA, CA 92562

Effective as of 01-OCT-16

NAKKA, SREENIVASA, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 306
MURRIETA, CA 92562

Effective as of 01-OCT-16

OJURI, ADEBAMBO, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562

Teleservice

Effective as of 01-APR-17

OJURI, ADEBAMBO, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562

Teleservice

Effective as of 01-JUL-24

OJURI, ADEBAMBO, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562

Teleservice

Effective as of 01-MAY-21

OJURI, ADEBAMBO, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562

Teleservice

Effective as of 01-MAY-15

OJURI, ADEBAMBO, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562

Teleservice

Effective as of 01-MAY-15

OJURI, ADEBAMBO, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 302

MURRIETA, CA 92562

Teleservice

Effective as of 01-MAR-21

OJURI, ADEBAMBO, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562

Teleservice

Effective as of 01-JUL-23

**RAGHUWANSHI, NAISHADH,
MD†**

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 306
MURRIETA, CA 92562

Effective as of 01-MAY-18

**RAGHUWANSHI, NAISHADH,
MD†**

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 306
MURRIETA, CA 92562

Effective as of 01-OCT-16

**RAGHUWANSHI, NAISHADH,
MD†**

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 306
MURRIETA, CA 92562

Effective as of 01-OCT-16

TEYMOORIAN, ARIAN, MD†

Provider ID: N/A

40404 CALIFORNIA OAKS
RD STE C
MURRIETA, CA 92562

Effective as of 01-SEP-19

TEYMOORIAN, ARIAN, MD†

C1. Lista de proveedores de la red
Médico de atención especializada

Provider ID: N/A

40404 CALIFORNIA OAKS
RD STE C
MURRIETA, CA 92562
Effective as of 01-FEB-20

GENETICS CLINICAL

BRAR, HARBINDER, MD†

Provider ID: N/A

25109 JEFFERSON AVE STE
210
MURRIETA, CA 92562
Effective as of 01-JUL-19

**HEMATOLOGY /
ONCOLOGY**

AGAJANIAN, RICHY, MD

Provider ID: N/A

25405 HANCOCK AVE STE
101
MURRIETA, CA 92562
Effective as of 01-JUL-23

ANDREY, JEFFREY, MD

Provider ID: N/A

25405 HANCOCK AVE STE
101
MURRIETA, CA 92562
Effective as of 01-JUL-23

ANDREY, JEFFREY, MD

Provider ID: N/A

25405 HANCOCK AVE STE
101
MURRIETA, CA 92562
Effective as of 01-JUL-24

BASERI, BABAK, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
203
MURRIETA, CA 92562
Effective as of 01-JUL-24

BASERI, BABAK, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
203
MURRIETA, CA 92562
Effective as of 01-JUL-21

BASERI, BABAK, MD

Provider ID: N/A

25405 HANCOCK AVE STE
101
MURRIETA, CA 92562
Effective as of 01-JAN-24

BASERI, BABAK, MD

Provider ID: N/A

25405 HANCOCK AVE STE
101
MURRIETA, CA 92562
Effective as of 01-AUG-24

BASERI, BABAK, MD

Provider ID: N/A

25405 HANCOCK AVE STE
101
MURRIETA, CA 92562
Effective as of 01-APR-23

BASERI, BABAK, MD

Provider ID: N/A

25405 HANCOCK AVE STE
101
MURRIETA, CA 92562
Effective as of 01-FEB-24

BASERI, BABAK, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
203
MURRIETA, CA 92562
Effective as of 01-JUL-21

BASERI, BABAK, MD

Provider ID: N/A

25405 HANCOCK AVE STE
101
MURRIETA, CA 92562
Effective as of 01-APR-24

BELLO, OSAGIE, MD

Provider ID: N/A

25405 HANCOCK AVE STE
211
MURRIETA, CA 92562
Effective as of 01-OCT-23

BELLO, OSAGIE, MD

Provider ID: N/A

25405 HANCOCK AVE STE
211
MURRIETA, CA 92562
Effective as of 01-OCT-23

BELLO, OSAGIE, MD

Provider ID: N/A

25405 HANCOCK AVE STE
211
MURRIETA, CA 92562
Effective as of 01-OCT-23

BESSUDO, ALBERTO, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
206
MURRIETA, CA 92562
Teleservice
Effective as of 01-NOV-21

LEE, BYUNG, DO†

Provider ID: N/A

25405 HANCOCK AVE STE
211
MURRIETA, CA 92562
Effective as of 01-JUL-21

LEE, BYUNG, DO†

Provider ID: N/A

25405 HANCOCK AVE STE
211

**C1. Lista de proveedores de la red
Médico de atención especializada**

MURRIETA, CA 92562
Effective as of 01-JUL-21

LEE, BYUNG, DO†

Provider ID: N/A
25405 HANCOCK AVE STE
211
MURRIETA, CA 92562
Effective as of 01-JUL-21

MARJON, PHILIP, MD

Provider ID: N/A
25405 HANCOCK AVE STE
101
MURRIETA, CA 92562
Effective as of 01-APR-23

MASIELLO, DAVID, MD†

Provider ID: N/A
25405 HANCOCK AVE STE
211
MURRIETA, CA 92562
Effective as of 01-MAR-21

MOST, CAROLE, MD†

Provider ID: N/A
25405 HANCOCK AVE STE
211
MURRIETA, CA 92562
Effective as of 01-MAR-21

MOST, CAROLE, MD†

Provider ID: N/A
25405 HANCOCK AVE STE
211
MURRIETA, CA 92562
Effective as of 01-SEP-18

MOST, CAROLE, MD†

Provider ID: N/A
25405 HANCOCK AVE STE
211
MURRIETA, CA 92562
Effective as of 01-SEP-18

MOST, CAROLE, MD†

Provider ID: N/A
25405 HANCOCK AVE STE
211
MURRIETA, CA 92562
Effective as of 01-SEP-18

NAIK, RAHUL, MD†

Provider ID: N/A
25405 HANCOCK AVE STE
211
MURRIETA, CA 92562
Effective as of 01-MAR-21

SARWARI, NAWID, MD

Provider ID: N/A
25405 HANCOCK AVE STE
101
MURRIETA, CA 92562*
Effective as of 01-APR-23

SAUNDERS, PHILLIP, DO

Provider ID: N/A
25405 HANCOCK AVE STE
101
MURRIETA, CA 92562
Effective as of 01-APR-23

SAUNDERS, PHILLIP, DO†

Provider ID: N/A
25405 HANCOCK AVE STE
203
MURRIETA, CA 92562
Effective as of 01-DEC-20

SCHWERKOSKE, JOHN, MD

Provider ID: N/A
25405 HANCOCK AVE STE
101
MURRIETA, CA 92562
Effective as of 01-JUL-24

SCHWERKOSKE, JOHN, MD

Provider ID: N/A
25405 HANCOCK AVE STE

101
MURRIETA, CA 92562
Effective as of 01-JUL-23

SHUM, MERRILL, MD†

Provider ID: N/A
25405 HANCOCK AVE STE
203
MURRIETA, CA 92562
Effective as of 01-JUL-23

TSANG, WALTER, MD†

Provider ID: N/A
25404 HANCOCK AVE STE
211
MURRIETA, CA 92562
Effective as of 01-FEB-20

TSANG, WALTER, MD†

Provider ID: N/A
25404 HANCOCK AVE STE
211
MURRIETA, CA 92562
Effective as of 01-FEB-20

TSANG, WALTER, MD†

Provider ID: N/A
25404 HANCOCK AVE STE
211
MURRIETA, CA 92562
Effective as of 01-FEB-20

WANG, AMY, MD†

Provider ID: N/A
25405 HANCOCK AVE STE
211
MURRIETA, CA 92562
Effective as of 01-JUN-21

WANG, AMY, MD†

Provider ID: N/A
25405 HANCOCK AVE STE
211
MURRIETA, CA 92562
Effective as of 01-JUN-21

C1. Lista de proveedores de la red Médico de atención especializada

WANG, AMY, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
211
MURRIETA, CA 92562
Effective as of 01-JUN-21

WANG, AMY, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
211
MURRIETA, CA 92562
Effective as of 01-JUN-21

INFECTIOUS DISEASE

HARFOUCH, CHAWKI, MD†

Provider ID: N/A

28078 BAXTER RD STE 320
MURRIETA, CA 92563
Effective as of 01-MAY-13

HARFOUCH, CHAWKI, MD†

Provider ID: N/A

28078 BAXTER RD STE 320
MURRIETA, CA 92563
Effective as of 01-JUL-23

KIM, EMILY, MD

Provider ID: N/A

28078 BAXTER RD STE 320
MURRIETA, CA 92563
Effective as of 01-MAR-24

KIM, EMILY, MD

Provider ID: N/A

28078 BAXTER RD STE 320
MURRIETA, CA 92563
Effective as of 01-MAR-24

KIM, EMILY, MD

Provider ID: N/A

28078 BAXTER RD STE 320
MURRIETA, CA 92563

Effective as of 01-MAR-24

LE, THUAN, MD†

Provider ID: N/A

28078 BAXTER RD STE 320
MURRIETA, CA 92563
Effective as of 01-MAY-09

LE, THUAN, MD†

Provider ID: N/A

28078 BAXTER RD STE 320
MURRIETA, CA 92563
Effective as of 01-SEP-09

LE, THUAN, MD†

Provider ID: N/A

28078 BAXTER RD STE 320
MURRIETA, CA 92563
Effective as of 01-MAY-13

LE, THUAN, MD†

Provider ID: N/A

28078 BAXTER RD STE 320
MURRIETA, CA 92563
Effective as of 01-JAN-11

LE, THUAN, MD†

Provider ID: N/A

28078 BAXTER RD STE 320
MURRIETA, CA 92563
Effective as of 01-SEP-09

INTERNAL MEDICINE

BASERI, BABAK, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
203
MURRIETA, CA 92562
Effective as of 01-APR-24

HADDADIN, HASSAN, MD†

Provider ID: N/A

28078 BAXTER RD STE 324
MURRIETA, CA 92563

Effective as of 01-SEP-22

HADDADIN, HASSAN, MD†

Provider ID: N/A

28078 BAXTER RD STE 324
MURRIETA, CA 92563
Effective as of 01-SEP-22

HADDADIN, HASSAN, MD†

Provider ID: N/A

28078 BAXTER RD STE 324
MURRIETA, CA 92563
Effective as of 01-SEP-22

HARFOUCH, CHAWKI, MD†

Provider ID: N/A

28078 BAXTER RD STE 320
MURRIETA, CA 92563
Effective as of 01-JUN-17

MONTANA, WILBUR, DO†

Provider ID: N/A

25405 HANCOCK AVE STE
203
MURRIETA, CA 92562
Effective as of 01-NOV-18

INTERNAL MEDICINE CRITICAL CARE MEDICINE

PATEL, SAGAR, MD†

Provider ID: N/A

25500 MEDICAL CENTER
DR
MURRIETA, CA 92562
Effective as of 01-AUG-21

INTERVENTIONAL CARDIOLOGY

AL KHIAMI, BELAL, MD†

Provider ID: N/A

28062 BAXTER RD
MURRIETA, CA 92563

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-JAN-21

AMIN, JATIN, MD†

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563

Teleservice

Effective as of 01-JAN-19

ATTIA, NADER, DO†

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563

Teleservice

Effective as of 01-JAN-19

ATTIA, NADER, DO†

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563

Teleservice

Effective as of 01-APR-17

GAGLANI, RAHUL, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
230
MURRIETA, CA 92562

Effective as of 01-AUG-21

MESSINGER, BRADLEY, MD†

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563

Teleservice

Effective as of 01-FEB-22

MESSINGER, BRADLEY, MD†

Provider ID: N/A

39755 MURRIETA HOT

SPRINGS RD BLDG G
MURRIETA, CA 92563

Teleservice

Effective as of 01-JAN-19

PATANKAR, KAUSTUBH, MD†

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563

Effective as of 01-JAN-19

SCHWARZ, ERNST, MD†

Provider ID: N/A

39755 DATE ST STE 205
MURRIETA, CA 92563

Effective as of 01-SEP-22

SCHWARZ, ERNST, MD†

Provider ID: N/A

39755 DATE ST STE 205
MURRIETA, CA 92563

Effective as of 01-SEP-22

MATERNAL AND FETAL MEDICINE

BRAR, HARBINDER, MD†

Provider ID: N/A

25109 JEFFERSON AVE STE
210
MURRIETA, CA 92562

Effective as of 01-DEC-10

MEDICAL ONCOLOGY

PARSI, HOOMAN, MD

Provider ID: N/A

25405 HANCOCK AVE STE
101
MURRIETA, CA 92562

Effective as of 01-MAY-23

SHAIKH, ANWER, MD

Provider ID: N/A

25405 HANCOCK AVE STE
101

MURRIETA, CA 92562

Effective as of 01-JUL-23

NEPHROLOGY

UDDIN, MOHAMMAD, MD†

Provider ID: N/A

24910 LAS BRISAS RD STE
108

MURRIETA, CA 92562

Effective as of 01-JUL-20

NEUROLOGY

ALVAREZ, PAMELA, MD†

Provider ID: N/A

24910 LAS BRISAS RD STE
115

MURRIETA, CA 92562

Effective as of 01-MAY-14

ALVAREZ, PAMELA, MD†

Provider ID: N/A

24910 LAS BRISAS RD STE
115

MURRIETA, CA 92562

Effective as of 01-MAR-15

NUNE, SUNITHA, MD†

Provider ID: N/A

39755 DATE ST STE 101
MURRIETA, CA 92563

Effective as of 01-FEB-22

TALANKI, VARUN, MD

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204

MURRIETA, CA 92562

Effective as of 01-DEC-22

UDDIN, MOHAMMAD, MD†

Provider ID: N/A

**C1. Lista de proveedores de la red
Médico de atención especializada**

24910 LAS BRISAS RD STE 108
MURRIETA, CA 92562
Effective as of 01-JUL-20

UDDIN, MOHAMMAD, MD†
Provider ID: N/A

24910 LAS BRISAS RD STE 108
MURRIETA, CA 92562
Effective as of 01-JUL-20

UDDIN, MOHAMMAD, MD†
Provider ID: N/A

24910 LAS BRISAS RD STE 108
MURRIETA, CA 92562
Effective as of 01-AUG-20

UDDIN, MOHAMMAD, MD†
Provider ID: N/A

24910 LAS BRISAS RD STE 108
MURRIETA, CA 92562
Effective as of 01-JUL-20

UDDIN, MOHAMMAD, MD†
Provider ID: N/A

24910 LAS BRISAS RD STE 108
MURRIETA, CA 92562
Effective as of 01-JUL-20

UDDIN, MOHAMMAD, MD†
Provider ID: N/A

24910 LAS BRISAS RD STE 108
MURRIETA, CA 92562
Effective as of 01-JUL-20

UDDIN, MOHAMMAD, MD†
Provider ID: N/A

24910 LAS BRISAS RD STE 108
MURRIETA, CA 92562

Effective as of 01-JUL-20

UDDIN, MOHAMMAD, MD†

Provider ID: N/A

24910 LAS BRISAS RD STE 108
MURRIETA, CA 92562
Effective as of 01-JUL-20

UDDIN, MOHAMMAD, MD†

Provider ID: N/A

24910 LAS BRISAS RD STE 108
MURRIETA, CA 92562
Effective as of 01-JUL-20

NEUROLOGY CHILD

NUNE, SUNITHA, MD†

Provider ID: N/A

39755 DATE ST STE 101
MURRIETA, CA 92563
Effective as of 01-APR-21

**OBSTETRICS /
GYNECOLOGY**

ANDERSEN, MICHAEL, MD†

Provider ID: N/A

24619 WASHINGTON AVE STE 104
MURRIETA, CA 92562
Effective as of 01-JAN-21

BINDER, PRATIBHA, MD†

Provider ID: N/A

25405 HANCOCK AVE STE 217
MURRIETA, CA 92562
Effective as of 01-JUL-21

BRAR, HARBINDER, MD†

Provider ID: N/A

25109 JEFFERSON AVE STE 210

MURRIETA, CA 92562
Effective as of 01-JUL-11

BRAR, HARBINDER, MD†

Provider ID: N/A

25109 JEFFERSON AVE STE 210
MURRIETA, CA 92562
Effective as of 01-SEP-23

BRAR, HARBINDER, MD†

Provider ID: N/A

25109 JEFFERSON AVE STE 210
MURRIETA, CA 92562
Effective as of 01-NOV-08

BRAR, HARBINDER, MD†

Provider ID: N/A

25109 JEFFERSON AVE STE 210
MURRIETA, CA 92562
Effective as of 01-SEP-23

BRAR, HARBINDER, MD†

Provider ID: N/A

25109 JEFFERSON AVE STE 210
MURRIETA, CA 92562
Effective as of 01-SEP-23

CHIODI, MARTINA, MD†

Provider ID: N/A

24910 LAS BRISAS RD STE 113
MURRIETA, CA 92562
Effective as of 01-MAR-20

DIMMETTE, PATTIE, MD

Provider ID: N/A

25405 HANCOCK AVE STE 203
MURRIETA, CA 92562
Effective as of 01-SEP-23

C1. Lista de proveedores de la red Médico de atención especializada

ELFELT, TIMOTHY, MD†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 100
MURRIETA, CA 92562
Effective as of 01-AUG-10

HAYTON, TAMMY, MD†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 100
MURRIETA, CA 92562
Teleservice
Effective as of 01-AUG-10

HAYTON, TAMMY, MD†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 100
MURRIETA, CA 92562
Teleservice
Effective as of 01-SEP-22

JONES, KENDRA, MD†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 100
MURRIETA, CA 92562
Teleservice
Effective as of 01-SEP-22

JONES, KENDRA, MD†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 100
MURRIETA, CA 92562
Teleservice
Effective as of 01-SEP-22

LEBO, DEBRA, DO†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 100
MURRIETA, CA 92562

Effective as of 01-SEP-22

LEBO, DEBRA, DO†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 100
MURRIETA, CA 92562
Effective as of 01-AUG-10

LOCASCIO, ELIZABETH, DO†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 100
MURRIETA, CA 92562
Teleservice
Effective as of 01-SEP-22

LOCASCIO, ELIZABETH, DO†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 100
MURRIETA, CA 92562
Teleservice
Effective as of 01-FEB-18

NEAL, JAMES, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 300
MURRIETA, CA 92562
Effective as of 01-JUL-23

QUINATA, FLORENCE, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 300
MURRIETA, CA 92562
Effective as of 01-JUL-23

SHAH, NEMI, MD

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Teleservice

Effective as of 01-FEB-24

SHEHATA, HANNAH, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-OCT-21

THOMSON, EMILY, DO

Provider ID: N/A

25460 MEDICAL CENTER
DR
MURRIETA, CA 92562
Teleservice
Effective as of 01-SEP-22

THOMSON, EMILY, DO

Provider ID: N/A

25460 MEDICAL CENTER
DR
MURRIETA, CA 92562
Teleservice
Effective as of 01-SEP-22

TODD, CHRISTINE, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 300
MURRIETA, CA 92562
Effective as of 01-JUL-23

TRAN, THERESA, DO

Provider ID: N/A

24910 LAS BRISAS RD STE
113
MURRIETA, CA 92562
Effective as of 01-MAR-20

YANG, CHARLES, MD†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 100
MURRIETA, CA 92562
Teleservice

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-SEP-22

YANG, CHARLES, MD†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 100
MURRIETA, CA 92562

Teleservice

Effective as of 01-AUG-10

OCCUPATIONAL THERAPIST

BAST, SIDNEY, OT†

Provider ID: N/A

24671 MONROE AVE STE
101
MURRIETA, CA 92562

Effective as of 01-OCT-19

BAST, SIDNEY, OT†

Provider ID: N/A

24671 MONROE AVE STE
101
MURRIETA, CA 92562

Effective as of 01-OCT-19

CATIPON, GABRIELLE, OT

Provider ID: N/A

24671 MONROE AVE STE
C101
MURRIETA, CA 92562

Effective as of 01-MAY-23

CATIPON, GABRIELLE, OT

Provider ID: N/A

24671 MONROE AVE STE
C101
MURRIETA, CA 92562

Effective as of 01-MAY-23

DIMEGLIO, PAUL, OT†

Provider ID: N/A

24671 MONROE AVE STE
101

MURRIETA, CA 92562

Effective as of 01-FEB-21

DIMEGLIO, PAUL, OT†

Provider ID: N/A

24671 MONROE AVE STE
101

MURRIETA, CA 92562

Effective as of 01-FEB-21

MERCADO, ROBIN, MD

Provider ID: N/A

24671 MONROE AVE BLDG
C101
MURRIETA, CA 92562

Effective as of 01-MAY-24

MERCADO, ROBIN, MD

Provider ID: N/A

24671 MONROE AVE BLDG
C101
MURRIETA, CA 92562

Effective as of 01-MAY-24

STOTLER, APRIL, OT

Provider ID: N/A

24671 MONROE AVE STE
C201
MURRIETA, CA 92562

Effective as of 01-JAN-24

STOTLER, APRIL, OT

Provider ID: N/A

24671 MONROE AVE STE
C201
MURRIETA, CA 92562

Effective as of 01-JAN-24

ZECHA, RICHARD, OT†

Provider ID: N/A

24671 MONROE AVE STE
101 BLDG C
MURRIETA, CA 92562

Effective as of 01-JAN-21

ZECHA, RICHARD, OT†

Provider ID: N/A

24671 MONROE AVE STE
101 BLDG C
MURRIETA, CA 92562

Effective as of 01-JAN-21

OPHTHALMOLOGY

ABBOUD, JEAN-PAUL, MD†

Provider ID: N/A

40700 CALIFORNIA OAKS
RD STE 106
MURRIETA, CA 92562

Effective as of 01-MAR-18

CARLSON, JOHN, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
100
MURRIETA, CA 92562

Effective as of 01-FEB-21

CARLSON, JOHN, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
100
MURRIETA, CA 92562

Effective as of 01-FEB-21

CHAWLA, ANUJ, MD†

Provider ID: N/A

40690 CALIFORNIA OAKS
RD STE B
MURRIETA, CA 92562

Effective as of 01-JUL-23

CHIN, ERIC, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
100
MURRIETA, CA 92562

Effective as of 01-FEB-21

CHIN, ERIC, MD†

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-FEB-21

CHIN, ERIC, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-JAN-22

CHIN, ERIC, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-JUN-23

CHIN, ERIC, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-JUL-19

CHOW, JASON, MD†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 103
MURRIETA, CA 92562
Effective as of 01-JUL-23

CHOW, JASON, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-JUL-23

CHOW, JASON, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
100

MURRIETA, CA 92562
Effective as of 01-FEB-24

CHOW, JASON, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-SEP-22

CHOW, JASON, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-OCT-22

CULOTTA, ANTHONY, MD†

Provider ID: N/A

40690 CALIFORNIA OAKS
RD STE B
MURRIETA, CA 92562
Teleservice
Effective as of 01-SEP-18

CULOTTA, ANTHONY, MD†

Provider ID: N/A

40690 CALIFORNIA OAKS
RD STE B
MURRIETA, CA 92562
Teleservice
Effective as of 01-SEP-18

CULOTTA, ANTHONY, MD†

Provider ID: N/A

40690 CALIFORNIA OAKS
RD STE B
MURRIETA, CA 92562
Teleservice
Effective as of 01-SEP-18

CULOTTA, ANTHONY, MD†

Provider ID: N/A

40690 CALIFORNIA OAKS
RD STE B

MURRIETA, CA 92562
Teleservice
Effective as of 01-SEP-18

CULOTTA, ANTHONY, MD†

Provider ID: N/A

40690 CALIFORNIA OAKS
RD STE B
MURRIETA, CA 92562
Teleservice
Effective as of 01-MAY-21

CULOTTA, ANTHONY, MD†

Provider ID: N/A

40690 CALIFORNIA OAKS
RD STE B
MURRIETA, CA 92562
Teleservice
Effective as of 01-NOV-20

DAVIS, MICHAEL, MD†

Provider ID: N/A

40690 CALIFORNIA OAKS
RD STE B
MURRIETA, CA 92562
Teleservice
Effective as of 01-SEP-24

DONALDSON, JARED, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-SEP-22

DONALDSON, JARED, MD†


Provider ID: N/A

25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-MAY-21


DONALDSON, JARED, MD†

Provider ID: N/A


**C1. Lista de proveedores de la red
Médico de atención especializada**

 25395 HANCOCK AVE
MURRIETA, CA 92562
Effective as of 01-DEC-22


DONALDSON, JARED, MD†
Provider ID: N/A

 25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-JUL-21


DONALDSON, JARED, MD†
Provider ID: N/A

 25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-JUL-21


DONALDSON, JARED, MD†
Provider ID: N/A

 25395 HANCOCK AVE
MURRIETA, CA 92562
Effective as of 01-JAN-23


GOLLOGLY, HEIDRUN, MD†
Provider ID: N/A

 40690 CALIFORNIA OAKS
RD STE B
MURRIETA, CA 92562
Effective as of 01-OCT-17


JOHNSON, ROGER, MD†
Provider ID: N/A

 25460 MEDICAL CENTER
DR STE 103
MURRIETA, CA 92562
Effective as of 01-JUL-23


JOHNSON, ROGER, MD†
Provider ID: N/A

 25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-JAN-22


JOHNSON, ROGER, MD†
Provider ID: N/A

 25460 MEDICAL CENTER
DR STE 103
MURRIETA, CA 92562
Effective as of 01-JAN-22


JOHNSON, ROGER, MD†
Provider ID: N/A

 25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-FEB-22


JOHNSON, ROGER, MD†
Provider ID: N/A

 25460 MEDICAL CENTER
DR STE 103
MURRIETA, CA 92562
Effective as of 01-FEB-22


JOHNSON, ROGER, MD†
Provider ID: N/A

 25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-JAN-17

JOSEPH, JEFFREY, MD†
Provider ID: N/A

 25460 MEDICAL CENTER
DR STE 103
MURRIETA, CA 92562
Effective as of 01-AUG-19

JOSEPH, JEFFREY, MD†
Provider ID: N/A


 25460 MEDICAL CENTER
DR STE 103
MURRIETA, CA 92562
Effective as of 01-JAN-22

JOSEPH, JEFFREY, MD†
Provider ID: N/A


 25395 HANCOCK AVE STE

100
MURRIETA, CA 92562
Effective as of 01-AUG-18


JOSEPH, JEFFREY, MD†
Provider ID: N/A

 25460 MEDICAL CENTER
DR STE 103
MURRIETA, CA 92562
Effective as of 01-DEC-21


JOSEPH, JEFFREY, MD†
Provider ID: N/A

 25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-AUG-19


JOSEPH, JEFFREY, MD†
Provider ID: N/A

 25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-JUL-23


LOBUE, THOMAS, MD
Provider ID: N/A

 40700 CALIFORNIA OAKS
RD STE 106
MURRIETA, CA 92562
Effective as of 01-OCT-09

NAWAZISH, SABA, MD†
Provider ID: N/A

 40690 CALIFORNIA OAKS
RD STE B
MURRIETA, CA 92562
Effective as of 01-JUL-23

PHILLIPS, BARRATT, MD†
Provider ID: N/A

 25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-AUG-18

**C1. Lista de proveedores de la red
Médico de atención especializada**

PHILLIPS, BARRATT, MD†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 103
MURRIETA, CA 92562
Effective as of 01-JAN-22

PHILLIPS, BARRATT, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-JAN-22

PHILLIPS, BARRATT, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-JAN-22

PHILLIPS, BARRATT, MD†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 103
MURRIETA, CA 92562
Effective as of 01-JAN-22

PHILLIPS, BARRATT, MD†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 103
MURRIETA, CA 92562
Effective as of 01-MAY-17

SORENSEN, ROBERT, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-JAN-22

SORENSEN, ROBERT, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-DEC-21

VIDOR, IRA, MD†

Provider ID: N/A

40700 CALIFORNIA OAKS
RD
MURRIETA, CA 92562
Effective as of 01-JUL-19

OPTOMETRIST

ARCHIBALD, JOHN, OD†

Provider ID: N/A

25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-JUL-23

ARCHIBALD, JOHN, OD†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 103
MURRIETA, CA 92562
Effective as of 01-JUL-23

ARCHIBALD, JOHN, OD†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 103
MURRIETA, CA 92562
Effective as of 01-DEC-23

ARCHIBALD, JOHN, OD†

Provider ID: N/A

25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-DEC-23

COLEMAN, BROOKE, OD†

Provider ID: N/A

25395 HANCOCK AVE STE

100
MURRIETA, CA 92562
Effective as of 01-AUG-20

COOPER, MICHAEL, OD†

Provider ID: N/A

25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-SEP-22

COOPER, MICHAEL, OD†

Provider ID: N/A

25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-FEB-22

EVANS, RYAN, OD

Provider ID: N/A

40700 CALIFORNIA OAKS
RD STE 106
MURRIETA, CA 92562
Effective as of 01-APR-14

LARSON, BRETT, OD†

Provider ID: N/A

25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-FEB-22

LARSON, BRETT, OD†

Provider ID: N/A

25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-AUG-20

LARSON, BRETT, OD†

Provider ID: N/A

25460 MEDICAL CENTER
DR STE 103
MURRIETA, CA 92562
Effective as of 01-DEC-21

C1. Lista de proveedores de la red Médico de atención especializada

LARSON, BRETT, OD†

Provider ID: N/A

25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-AUG-18

MC DIARMID, JOHN, OD†

Provider ID: N/A

25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-FEB-22

MC DIARMID, JOHN, OD†

Provider ID: N/A

25395 HANCOCK AVE STE
100
MURRIETA, CA 92562
Effective as of 01-JAN-11

SCOTT, JEFFREY, OD†

Provider ID: N/A

40690 CALIFORNIA OAKS
RD STE B
MURRIETA, CA 92562
Effective as of 01-JAN-23

SCOTT, JEFFREY, OD†

Provider ID: N/A

40690 CALIFORNIA OAKS
RD STE B
MURRIETA, CA 92562
Effective as of 01-JAN-22

OTOLARYNGOLOGY

ABDOU, RAMI, MD†

Provider ID: N/A

39755 DATE ST STE 106
MURRIETA, CA 92563*
Effective as of 01-JUL-23

ABDOU, RAMI, MD†

Provider ID: N/A

39755 DATE ST STE 106
MURRIETA, CA 92563*
Effective as of 01-JUL-23

BANTHIA, VISHAL, MD†

Provider ID: N/A

39755 DATE ST STE 106
MURRIETA, CA 92563*
Teleservice
Effective as of 01-JUL-23

DATE, AMIT, MD

Provider ID: N/A

39755 DATE ST STE 105-106
MURRIETA, CA 92563
Teleservice
Effective as of 01-JUL-23

FORRESTER, MICHAEL, MD†

Provider ID: N/A

25150 HANCOCK AVE STE
204
MURRIETA, CA 92562
Effective as of 01-JUL-23

FORRESTER, MICHAEL, MD†

Provider ID: N/A

25150 HANCOCK AVE STE
204
MURRIETA, CA 92562
Effective as of 01-JUN-05

ROBERTS, BENJAMIN, DO

Provider ID: N/A

25150 HANCOCK AVE STE
204
MURRIETA, CA 92562
Effective as of 01-JUL-23

ROBERTS, TODD, DO

Provider ID: N/A

25150 HANCOCK AVE STE
204
MURRIETA, CA 92562

Effective as of 01-JUL-23

ROBERTS, BENJAMIN, DO

Provider ID: N/A

25150 HANCOCK AVE STE
204
MURRIETA, CA 92562
Effective as of 01-FEB-23

ROBERTS, TODD, DO

Provider ID: N/A

25150 HANCOCK AVE STE
204
MURRIETA, CA 92562
Effective as of 01-DEC-15

TIAN, QING, MD†

Provider ID: N/A

39755 DATE ST STE 105-106
MURRIETA, CA 92563*
Effective as of 01-JUL-23

PEDIATRIC CARDIOLOGY

CHU, JAMES, MD†

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 201
MURRIETA, CA 92562
Effective as of 01-APR-18

CHU, JAMES, MD†

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 201
MURRIETA, CA 92562
Effective as of 01-APR-18

CHU, JAMES, MD

Provider ID: N/A

39755 DATE ST STE 205
MURRIETA, CA 92563
Effective as of 01-JAN-23

CHU, JAMES, MD

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

39755 DATE ST STE 205
MURRIETA, CA 92563
Effective as of 01-JAN-23

CHU, JAMES, MD

Provider ID: N/A

39755 DATE ST STE 205
MURRIETA, CA 92563
Effective as of 01-JAN-23

CHU, JAMES, MD†

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 201
MURRIETA, CA 92562
Effective as of 01-APR-18

ELLINI, AHMAD, MD†

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 201
MURRIETA, CA 92562
Effective as of 01-APR-18

ELLINI, AHMAD, MD†

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 201
MURRIETA, CA 92562
Effective as of 01-APR-18

ELLINI, AHMAD, MD†

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 201
MURRIETA, CA 92562
Effective as of 01-APR-18

ELLINI, AHMAD, MD†

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 201
MURRIETA, CA 92562
Effective as of 01-APR-18

PHYSICIANS ASSISTANT

ARROYO, ARIANNA, PA

Provider ID: N/A

25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-JUN-23

ARROYO, ARIANNA, PA

Provider ID: N/A

25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-JUN-23

ARROYO, ARIANNA, PA

Provider ID: N/A

25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-JUN-23

ARROYO, ARIANNA, PA

Provider ID: N/A

25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-JUN-23

BASIN, NATALIE, PA

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 200
MURRIETA, CA 92562
Teleservice
Effective as of 01-AUG-23

FRYER, KEVIN, PA

Provider ID: N/A

28078 BAXTER RD STE
330-340
MURRIETA, CA 92563
Effective as of 01-AUG-23

GAUSEPOHL, MARY, PA†

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 102
MURRIETA, CA 92562*
Effective as of 01-SEP-21

GAUSEPOHL, MARY, PA†

Provider ID: N/A

24910 LAS BRISAS RD STE
116
MURRIETA, CA 92562*
Effective as of 01-SEP-21

HILLER, ASHLEY, PA

Provider ID: N/A

28078 BAXTER RD STE
300-340
MURRIETA, CA 92563
Effective as of 01-AUG-23

KAUFMAN, TIFFANY, PA†

Provider ID: N/A

24910 LAS BRISAS RD STE
105
MURRIETA, CA 92562
Effective as of 01-NOV-16

KAUFMAN, BRITNEY, PA†

Provider ID: N/A

25405 HANCOCK AVE STE
217
MURRIETA, CA 92562
Effective as of 01-NOV-18

LANCASTER, MICHELLE, PA†

Provider ID: N/A

25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-SEP-22

LANCASTER, MICHELLE, PA†

Provider ID: N/A

25150 HANCOCK AVE STE

**C1. Lista de proveedores de la red
Médico de atención especializada**

210
MURRIETA, CA 92562
Effective as of 01-SEP-22

LANCASTER, MICHELLE, PA†
Provider ID: N/A
25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-SEP-22

LANCASTER, MICHELLE, PA†
Provider ID: N/A
25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-SEP-22

LANCASTER, MICHELLE, PA†
Provider ID: N/A
25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-DEC-22

LEE, WILLIAM, PA†
Provider ID: N/A
40663 MURRIETA HOT
SPRINGS RD STE C3
MURRIETA, CA 92562
Effective as of 01-APR-21

LEE, WILLIAM, PA†
Provider ID: N/A
40663 MURRIETA HOT
SPRINGS RD STE C3
MURRIETA, CA 92562
Effective as of 01-APR-21

LIN, RAY, PA†
Provider ID: N/A
25405 HANCOCK AVE STE
217
MURRIETA, CA 92562
Effective as of 01-AUG-17

LIN, RAY, PA†
Provider ID: N/A
25405 HANCOCK AVE STE
217
MURRIETA, CA 92562
Effective as of 01-AUG-17

LUCATERO, JENNIFER, PA†
Provider ID: N/A
25405 HANCOCK AVE STE
217
MURRIETA, CA 92562
Effective as of 01-JAN-18

LUCATERO, JENNIFER, PA†
Provider ID: N/A
25405 HANCOCK AVE STE
217
MURRIETA, CA 92562
Effective as of 01-JAN-18

LUCATERO, JENNIFER, PA†
Provider ID: N/A
25405 HANCOCK AVE STE
217
MURRIETA, CA 92562
Effective as of 01-NOV-18

PATEL, JENNIE, PA
Provider ID: N/A
28078 BAXTER RD STE 330
MURRIETA, CA 92563
Effective as of 01-AUG-24

QUEROL, CYRUS, PA
Provider ID: N/A
28078 BAXTER RD STE 312
MURRIETA, CA 92563
Effective as of 01-APR-24

QUISMORIO, DEMETRIO, PA†
Provider ID: N/A
28078 BAXTER RD STE 330
MURRIETA, CA 92563

Effective as of 01-NOV-20

QUISMORIO, DEMETRIO, PA†
Provider ID: N/A
28078 BAXTER RD STE 330
MURRIETA, CA 92563
Effective as of 01-DEC-16

RUIZ-FLORES, ROSE, PA
Provider ID: N/A
24703 MONROE AVE
MURRIETA, CA 92562
Effective as of 01-SEP-23

ST JULES, JESSICA, PA†
Provider ID: N/A
25405 HANCOCK AVE STE
217
MURRIETA, CA 92562
Effective as of 01-NOV-18

ST JULES, JESSICA, PA†
Provider ID: N/A
25405 HANCOCK AVE STE
217
MURRIETA, CA 92562
Effective as of 01-AUG-17

TAYLOR, ISHA, PA
Provider ID: N/A
24400 JACKSON AVE STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

TAYLOR, ISHA, PA
Provider ID: N/A
24400 JACKSON AVE STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

TAYLOR, ISHA, PA
Provider ID: N/A
24400 JACKSON AVE STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

C1. Lista de proveedores de la red Médico de atención especializada

TAYLOR, ISHA, PA

Provider ID: N/A

24400 JACKSON AVE STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

WOOLEY, LAURA, PA†

Provider ID: N/A

25405 HANCOCK AVE STE
217
MURRIETA, CA 92562
Effective as of 01-NOV-18

YU, JUDITH, PA

Provider ID: N/A

25405 HANCOCK AVE STE
108
MURRIETA, CA 92562
Effective as of 01-JUL-24

PODIATRIST

EVANS, RICHARD, DPM

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD STE D130
MURRIETA, CA 92563
Effective as of 01-APR-06

EVANS, RICHARD, DPM

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD STE D130
MURRIETA, CA 92563
Effective as of 01-APR-24

EVANS, RICHARD, DPM

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD STE D130
MURRIETA, CA 92563
Effective as of 01-MAR-15

MILLER, JULIE, DPM

Provider ID: N/A

24640 JEFFERSON AVE
STE 109
MURRIETA, CA 92562
Effective as of 01-JUL-24

NGUYEN, THO, DPM†

Provider ID: N/A

24640 JEFFERSON AVE
STE 109
MURRIETA, CA 92562
Effective as of 01-NOV-16

NGUYEN, THO, DPM†

Provider ID: N/A

24640 JEFFERSON AVE
STE 109
MURRIETA, CA 92562
Effective as of 01-AUG-16

SCOTT, SUSAN, DPM†

Provider ID: N/A

24640 JEFFERSON AVE
STE 109
MURRIETA, CA 92562
Effective as of 01-DEC-16

SCOTT, SUSAN, DPM†

Provider ID: N/A

24640 JEFFERSON AVE
STE 109
MURRIETA, CA 92562
Effective as of 01-JUL-23

SCOTT, SUSAN, DPM†

Provider ID: N/A

24640 JEFFERSON AVE
STE 109
MURRIETA, CA 92562
Effective as of 01-DEC-17

SHIN, CHRISTOPHER, DPM†

Provider ID: N/A

24640 JEFFERSON AVE
STE 109

MURRIETA, CA 92562
Effective as of 01-MAY-21

SHIN, CHRISTOPHER, DPM†

Provider ID: N/A

24640 JEFFERSON AVE
STE 109
MURRIETA, CA 92562
Effective as of 01-SEP-22

SHIN, CHRISTOPHER, DPM†

Provider ID: N/A

24640 JEFFERSON AVE
STE 109
MURRIETA, CA 92562
Effective as of 01-JAN-23

TRANSFIGURACION SHIN, CHRISTIANNE, DPM†

Provider ID: N/A

24640 JEFFERSON AVE
STE 109
MURRIETA, CA 92562
Effective as of 01-DEC-16

TRANSFIGURACION SHIN, CHRISTIANNE, DPM†

Provider ID: N/A

24640 JEFFERSON AVE
STE 109
MURRIETA, CA 92562
Effective as of 01-DEC-17

TRANSFIGURACION SHIN, CHRISTIANNE, DPM†

Provider ID: N/A

24640 JEFFERSON AVE
STE 109
MURRIETA, CA 92562
Effective as of 01-JUL-23

WELLS, JOSEPH, DPM†

Provider ID: N/A

24640 JEFFERSON AVE
STE 109

C1. Lista de proveedores de la red Médico de atención especializada

MURRIETA, CA 92562
Effective as of 01-JUL-23

WELLS, JOSEPH, DPM†

Provider ID: N/A

24640 JEFFERSON AVE
STE 109
MURRIETA, CA 92562
Effective as of 01-SEP-16

WELLS, JOSEPH, DPM†

Provider ID: N/A

24640 JEFFERSON AVE
STE 109
MURRIETA, CA 92562
Effective as of 01-NOV-16

PULMONARY DISEASES

HADDADIN, HASSAN, MD†

Provider ID: N/A

28078 BAXTER RD STE 324
MURRIETA, CA 92563
Effective as of 01-APR-22

HADDADIN, HASSAN, MD†

Provider ID: N/A

28078 BAXTER RD STE 324
MURRIETA, CA 92563
Effective as of 01-APR-22

HADDADIN, HASSAN, MD†

Provider ID: N/A

28078 BAXTER RD STE 324
MURRIETA, CA 92563
Effective as of 01-JUL-22

HENNINGER, DELMER, MD

Provider ID: N/A

39755 DATE ST STE 101
MURRIETA, CA 92563
Effective as of 01-SEP-09

HENNINGER, DELMER, MD

Provider ID: N/A

39755 DATE ST STE 101
MURRIETA, CA 92563
Effective as of 01-SEP-09

HENNINGER, DELMER, MD

Provider ID: N/A

39755 DATE ST STE 101
MURRIETA, CA 92563*
Effective as of 01-JUL-23

KUMAR, AVNEE, MD

Provider ID: N/A

25500 MEDICAL CENTER
DR
MURRIETA, CA 92562
Effective as of 01-JUL-23

SALEK, MUNIF, MD†

Provider ID: N/A

28078 BAXTER RD STE 324
MURRIETA, CA 92563
Effective as of 01-SEP-09

SALEK, MUNIF, MD†

Provider ID: N/A

28078 BAXTER RD STE 324
MURRIETA, CA 92563
Effective as of 01-NOV-10

SALEK, MUNIF, MD†

Provider ID: N/A

28078 BAXTER RD STE 324
MURRIETA, CA 92563
Effective as of 01-MAR-06

SALEK, MUNIF, MD†

Provider ID: N/A

28078 BAXTER RD STE 324
MURRIETA, CA 92563
Effective as of 01-SEP-09

SALEK, MUNIF, MD†

Provider ID: N/A

28078 BAXTER RD STE 324
MURRIETA, CA 92563

Effective as of 01-JAN-12

SIEN, STEFAN, DO†

Provider ID: N/A

28078 BAXTER RD STE 324
MURRIETA, CA 92563
Effective as of 01-FEB-15

SIEN, STEFAN, DO†

Provider ID: N/A

28078 BAXTER RD STE 324
MURRIETA, CA 92563
Effective as of 01-NOV-12

SURI, RAJAT, MD†

Provider ID: N/A

25500 MEDICAL CENTER
DR
MURRIETA, CA 92562
Effective as of 01-AUG-21

VEGA, RICARDO, MD†

Provider ID: N/A

28078 BAXTER RD STE 324
MURRIETA, CA 92563
Effective as of 01-AUG-22

VEGA, RICARDO, MD†

Provider ID: N/A

28078 BAXTER RD STE 324
MURRIETA, CA 92563
Effective as of 01-AUG-22

VEGA, RICARDO, MD†

Provider ID: N/A

28078 BAXTER RD STE 324
MURRIETA, CA 92563
Effective as of 01-AUG-22

RADIATION ONCOLOGY

GREENE, DAVID, MD

Provider ID: N/A

40663 MURRIETA HOT
SPRINGS RD STE C3

C1. Lista de proveedores de la red Médico de atención especializada

MURRIETA, CA 92562
Effective as of 01-JUL-24

QUANG, TONY, MD

Provider ID: N/A
25470 MEDICAL CENTER
DR STE 101
MURRIETA, CA 92562
Effective as of 01-OCT-23

RADIOLOGY DIAGNOSTIC

GRIFFETH, BRADLEY, MD

Provider ID: N/A
25470 MEDICAL CENTER
DR STE 101
MURRIETA, CA 92562
Effective as of 01-SEP-24

GRIFFETH, BRADLEY, MD

Provider ID: N/A
25470 MEDICAL CENTER
DR STE 101
MURRIETA, CA 92562
Effective as of 01-SEP-24

GRIFFETH, BRADLEY, MD

Provider ID: N/A
25470 MEDICAL CENTER
DR STE 101
MURRIETA, CA 92562
Effective as of 01-SEP-24

GRIFFETH, BRADLEY, MD

Provider ID: N/A
25470 MEDICAL CENTER
DR STE 101
MURRIETA, CA 92562
Effective as of 01-SEP-24

PATEL, NIKHIL, MD†

Provider ID: N/A
25485 MEDICAL CENTER
DR STE 106
MURRIETA, CA 92562

Effective as of 01-AUG-22

PATEL, NIKHIL, MD†

Provider ID: N/A
25485 MEDICAL CENTER
DR STE 106
MURRIETA, CA 92562
Effective as of 01-AUG-22

PATEL, NIKHIL, MD†

Provider ID: N/A
25485 MEDICAL CENTER
DR STE 106
MURRIETA, CA 92562
Effective as of 01-JAN-24

REGISTERED DIETITIAN / NUTRITIONIST

BLUCHER, CHERI, RD

Provider ID: N/A
29970 TECHNOLOGY DR
STE 105D
MURRIETA, CA 92563
Effective as of 01-JUN-21

BRENDECKE, LORIE, RDN

Provider ID: N/A
29970 TECHNOLOGY DR
STE 105D
MURRIETA, CA 92563
Effective as of 01-JUL-22

BRENDECKE, LORIE, RDN

Provider ID: N/A
29970 TECHNOLOGY DR
STE 105D
MURRIETA, CA 92563
Effective as of 01-JUL-22

BRENDECKE, LORIE, RDN

Provider ID: N/A
29970 TECHNOLOGY DR
STE 105D
MURRIETA, CA 92563

Effective as of 01-FEB-22

JACKSON, ALLYSON, RD

Provider ID: N/A
29970 TECHNOLOGY DR
STE 105D
MURRIETA, CA 92563
Effective as of 01-JUL-21

JACKSON, ALLYSON, RD

Provider ID: N/A
29970 TECHNOLOGY DR
STE 105D
MURRIETA, CA 92563
Effective as of 01-JUN-21

ROBERTS, LISA, RD

Provider ID: N/A
29970 TECHNOLOGY DR
STE 105D
MURRIETA, CA 92563
Effective as of 01-JUN-21

WAYNE, DIANE, RD

Provider ID: N/A
29970 TECHNOLOGY DR
STE 105D
MURRIETA, CA 92563
Teleservice
Effective as of 01-DEC-23

WAYNE, DIANE, RD






















Provider ID: N/A
29970 TECHNOLOGY DR
STE 105D
MURRIETA, CA 92563
Teleservice
Effective as of 01-DEC-23

REGISTERED PHYSICAL THERAPIST

AGENA, CYAN, PT†

Provider ID: N/A

**C1. Lista de proveedores de la red
Médico de atención especializada**

<p> 25136 HANCOCK AVE STE A MURRIETA, CA 92562 Effective as of 01-MAY-22</p> <p>AGENA, CYAN, PT† Provider ID: N/A</p> <p> 25136 HANCOCK AVE STE A MURRIETA, CA 92562 Effective as of 01-MAY-22</p> <p>ALEXANDER, AUSTIN, PT Provider ID: N/A</p> <p> 25495 MEDICAL CENTER DR STE 304 MURRIETA, CA 92562 Effective as of 01-DEC-20</p> <p>ALEXANDER, AUSTIN, PT Provider ID: N/A</p> <p> 25495 MEDICAL CENTER DR STE 304 MURRIETA, CA 92562 Effective as of 01-DEC-20</p> <p>ALY, DILYANA, PT† Provider ID: N/A</p> <p> 27722 CLINTON KEITH RD STE B-C MURRIETA, CA 92562 Effective as of 01-JUL-19</p> <p>ALY, DILYANA, PT† Provider ID: N/A</p> <p> 27722 CLINTON KEITH RD STE B-C MURRIETA, CA 92562 Effective as of 01-JUL-19</p> <p>ATKINS, CHEYENNE, PT† Provider ID: N/A</p> <p> 25495 MEDICAL CENTER DR STE 304 MURRIETA, CA 92562 Effective as of 01-NOV-18</p>	<p>ATKINS, CHEYENNE, PT† Provider ID: N/A</p> <p> 25495 MEDICAL CENTER DR STE 304 MURRIETA, CA 92562 Effective as of 01-NOV-18</p> <p>ATKINS, WILLIAM, PT Provider ID: N/A</p> <p> 25136 HANCOCK AVE STE A MURRIETA, CA 92562 Effective as of 01-JUN-23</p> <p>ATKINS, WILLIAM, PT Provider ID: N/A</p> <p> 25136 HANCOCK AVE STE A MURRIETA, CA 92562 Effective as of 01-JUN-23</p> <p>BARI, MONICA, PT Provider ID: N/A</p> <p> 24671 MONROE AVE BLDG C201 MURRIETA, CA 92562 Effective as of 01-DEC-23</p> <p>BARI, MONICA, PT Provider ID: N/A</p> <p> 24671 MONROE AVE BLDG C201 MURRIETA, CA 92562 Effective as of 01-DEC-23</p> <p>COBURN, PIERRE, PT Provider ID: N/A</p> <p> 24671 MONROE AVE BLDG C201 MURRIETA, CA 92562 Effective as of 01-JAN-24</p> <p>COBURN, PIERRE, PT Provider ID: N/A</p> <p> 24671 MONROE AVE BLDG C201 MURRIETA, CA 92562</p>	<p>Effective as of 01-JAN-24</p> <p>COBURN, PIERRE, PT Provider ID: N/A</p> <p> 25136 HANCOCK AVE STE A MURRIETA, CA 92562 Effective as of 01-JAN-24</p> <p>COBURN, PIERRE, PT Provider ID: N/A</p> <p> 25136 HANCOCK AVE STE A MURRIETA, CA 92562 Effective as of 01-JAN-24</p> <p>FOX, DELANIE, PT Provider ID: N/A</p> <p> 25136 HANCOCK AVE STE A MURRIETA, CA 92562 Effective as of 01-OCT-23</p> <p>FOX, DELANIE, PT Provider ID: N/A</p> <p> 25136 HANCOCK AVE STE A MURRIETA, CA 92562 Effective as of 01-OCT-23</p> <p>FOX, DELANIE, PT Provider ID: N/A</p> <p> 24671 MONROE AVE BLDG C101 MURRIETA, CA 92562 Effective as of 01-OCT-23</p> <p>FOX, DELANIE, PT Provider ID: N/A</p> <p> 24671 MONROE AVE BLDG C101 MURRIETA, CA 92562 Effective as of 01-OCT-23</p> <p>KESEL, KELSEY, PT Provider ID: N/A</p> <p> 24671 MONROE AVE BLDG C101 MURRIETA, CA 92562</p>
---	--	--

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-MAR-24

KESEL, KELSEY, PT

Provider ID: N/A

24671 MONROE AVE BLDG
C101
MURRIETA, CA 92562
Effective as of 01-MAR-24

SABIN, SCOTT, PT†

Provider ID: N/A

24671 MONROE AVE BLDG
C-101
MURRIETA, CA 92562
Effective as of 01-MAY-22

SABIN, SCOTT, PT†

Provider ID: N/A

24671 MONROE AVE BLDG
C-101
MURRIETA, CA 92562
Effective as of 01-MAY-22

RHEUMATOLOGY

FREYNE, BRIGID, MD†

Provider ID: N/A

39755 MURRIETA HT SP
F110
MURRIETA, CA 92563
Effective as of 01-MAY-14

SPEECH PATHOLOGIST

PEDERSEN, ERICA, SP

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD
MURRIETA, CA 92563
Effective as of 01-MAY-23

PEDERSEN, ERICA, SP

Provider ID: N/A

39755 MURRIETA HOT
SPRINGS RD

MURRIETA, CA 92563
Effective as of 01-MAY-23

SURGERY COLON SURGERY

MOORE, PATRICK, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
217
MURRIETA, CA 92562
Effective as of 01-JUN-20

MOORE, PATRICK, MD†

Provider ID: N/A

25405 HANCOCK AVE STE
217
MURRIETA, CA 92562
Effective as of 01-JUL-23

SURGERY GENERAL

BATRA, MUNISH, MD

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 303
MURRIETA, CA 92562
Effective as of 01-SEP-17

BATRA, MUNISH, MD

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 303
MURRIETA, CA 92562
Effective as of 01-SEP-17

BATRA, MUNISH, MD

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 303
MURRIETA, CA 92562
Effective as of 01-SEP-17

BATRA, MUNISH, MD

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 303
MURRIETA, CA 92562
Effective as of 01-SEP-17

BERNSTEIN, DAVID, MD

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-JUL-23

BIANCHI, CHRISTIAN, MD

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-JUL-23

BIANCHI, CHRISTIAN, MD

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-FEB-23

CHIN, MICHAEL, MD†

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-NOV-23

CHIN, MICHAEL, MD†

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-NOV-23

CHIN, MICHAEL, MD†

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-JUL-24

CHIN, MICHAEL, MD†

CI. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

CHIN, MICHAEL, MD†

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

CHIN, MICHAEL, MD†

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

CHIN, MICHAEL, MD†

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

CHIN, MICHAEL, MD†

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

CHIN, MICHAEL, MD†

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

DADA, FESTUS, MD†

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-JUL-23

DADA, FESTUS, MD†

Provider ID: N/A

25470 MEDICAL CENTER

DR STE 203
MURRIETA, CA 92562
Effective as of 01-JUN-17

DADA, FESTUS, MD†

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-AUG-20

DADA, FESTUS, MD†

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-DEC-22

DADA, STEPHEN, MD†

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-JUL-18

DADA, STEPHEN, MD†

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-MAY-14

IGWE, DANIEL, MD†

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-DEC-22

KRAHN, DOUGLAS, MD

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-MAR-23

LIEN, CHRISTINA, DO

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-OCT-22

LIEN, CHRISTINA, DO

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-MAR-23

MARTIN, DAVID, MD

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-MAR-23

MARTIN, DAVID, MD

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-JUL-23

MEHTA, PRATIK, MD†

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-OCT-22

POLLACK, JAMES, MD†

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-FEB-23

POLLACK, JAMES, MD†

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-NOV-23

C1. Lista de proveedores de la red Médico de atención especializada

POLLACK, JAMES, MD†

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-NOV-22

POLLACK, JAMES, MD†

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-JUL-24

POLLACK, JAMES, MD†

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-JUL-21

SAMIMI, KIAN, MD

Provider ID: N/A

25405 HANCOCK AVE STE
217
MURRIETA, CA 92562
Effective as of 01-APR-23

SUH, DAVID, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 303
MURRIETA, CA 92562
Effective as of 01-DEC-12

SUH, DAVID, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 303
MURRIETA, CA 92562
Effective as of 01-DEC-12

TRAN, MICHAEL, MD

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-JUN-23

TRAN, MICHAEL, MD

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-JUN-23

VEGA, FRANCISCO, MD

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-MAR-23

WANG, SHIN CHERN, MD

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-FEB-23

WANG, SHIN CHERN, MD

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-MAR-23

SURGERY GENERAL VASCULAR

CHIN, MICHAEL, MD†

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-APR-20

CHIRIANO, JASON, DO

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-MAR-23

VEGA, FRANCISCO, MD

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562

Effective as of 01-NOV-23

VEGA, FRANCISCO, MD

Provider ID: N/A

41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-NOV-23

SURGERY HAND PLASTIC

KUPFER, DAVID, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 303
MURRIETA, CA 92562
Effective as of 01-SEP-09

SURGERY

NEUROLOGICAL

ABSHIRE, BRET, MD†

Provider ID: N/A

25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-SEP-17

ABSHIRE, BRET, MD†

Provider ID: N/A

25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-SEP-17

ABSHIRE, BRET, MD†

Provider ID: N/A

25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-SEP-17

ABSHIRE, BRET, MD†

Provider ID: N/A

25150 HANCOCK AVE STE
210

**C1. Lista de proveedores de la red
Médico de atención especializada**

MURRIETA, CA 92562
Effective as of 01-OCT-15

ABSHIRE, BRET, MD†

Provider ID: N/A
25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-SEP-17

ABSHIRE, BRET, MD†

Provider ID: N/A
25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-MAR-17

ABSHIRE, BRET, MD†

Provider ID: N/A
25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-FEB-18

ABSHIRE, BRET, MD†

Provider ID: N/A
25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-FEB-20

ABSHIRE, BRET, MD†

Provider ID: N/A
25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-FEB-20

FRIEDLICH, DANIEL, MD†

Provider ID: N/A
25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-MAR-14

FRIEDLICH, DANIEL, MD†

Provider ID: N/A
25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-MAY-15

FRIEDLICH, DANIEL, MD†

Provider ID: N/A
25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-MAY-15

OH, GERALD, MD†

Provider ID: N/A
25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-FEB-19

OH, GERALD, MD†

Provider ID: N/A
25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-AUG-17

OH, GERALD, MD†

Provider ID: N/A
25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-AUG-17

OH, GERALD, MD†

Provider ID: N/A
25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-AUG-17

OH, GERALD, MD†

Provider ID: N/A
25150 HANCOCK AVE STE

210
MURRIETA, CA 92562
Effective as of 01-AUG-17

OH, GERALD, MD†

Provider ID: N/A
25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-OCT-17

SURGERY ORTHOPEDIC

AGYEMAN, KOFI, MD†

Provider ID: N/A
25395 HANCOCK AVE STE
250
MURRIETA, CA 92562
Effective as of 01-MAR-22

AGYEMAN, KOFI, MD†

Provider ID: N/A
25395 HANCOCK AVE STE
240
MURRIETA, CA 92562
Effective as of 01-MAR-22

BIAMA, RICHARD, MD

Provider ID: N/A
28078 BAXTER RD STE
330-340
MURRIETA, CA 92563
Effective as of 01-MAY-24

CHENG, WAYNE, MD†

Provider ID: N/A
28078 BAXTER RD STE 340
MURRIETA, CA 92563
Effective as of 01-JUL-21

CHENG, WAYNE, MD†

Provider ID: N/A
28078 BAXTER RD STE 340
MURRIETA, CA 92563
Effective as of 01-JUL-21

**C1. Lista de proveedores de la red
Médico de atención especializada**

DRINHAUS, ROLF, MD†

Provider ID: N/A

25150 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-APR-08

ERWTEMAN, ANDREW, MD†

Provider ID: N/A

25150 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-AUG-20

ERWTEMAN, ANDREW, MD†

Provider ID: N/A

25150 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-NOV-16

GARGULINSKI, MATTHEW, DO†

Provider ID: N/A

25150 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-SEP-23

GARGULINSKI, MATTHEW, DO†

Provider ID: N/A

25150 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-AUG-22

GARGULINSKI, MATTHEW, DO†

Provider ID: N/A

25150 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-AUG-22

GARGULINSKI, MATTHEW, DO†

Provider ID: N/A

25150 HANCOCK AVE STE

200
MURRIETA, CA 92562
Effective as of 01-AUG-23

GHAYOUMI, POURIYA, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
250
MURRIETA, CA 92562
Effective as of 01-JUL-24

GHAYOUMI, POURIYA, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
250
MURRIETA, CA 92562
Effective as of 01-DEC-22

GHAYOUMI, POURIYA, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
240
MURRIETA, CA 92562
Effective as of 01-MAY-24

GHAYOUMI, POURIYA, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
250
MURRIETA, CA 92562
Effective as of 01-MAY-24

GHAYOUMI, POURIYA, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
250
MURRIETA, CA 92562
Effective as of 01-AUG-22

GHAYOUMI, POURIYA, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
240
MURRIETA, CA 92562
Effective as of 01-DEC-22

GHAYOUMI, POURIYA, MD†

Provider ID: N/A

25395 HANCOCK AVE STE
240
MURRIETA, CA 92562
Effective as of 01-AUG-22

JERCINOVICH, IGOR, MD

Provider ID: N/A

25150 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-OCT-20

JERCINOVICH, IGOR, MD

Provider ID: N/A

25150 HANCOCK AVE STE
200
MURRIETA, CA 92562
Effective as of 01-APR-07

KIMBALL, JEFF, MD

Provider ID: N/A

28078 BAXTER RD STE 330
MURRIETA, CA 92563
Effective as of 01-NOV-23

KIMBALL, JEFF, MD

Provider ID: N/A

28078 BAXTER RD STE 330
MURRIETA, CA 92563
Effective as of 01-DEC-23

LOCKE, JOHN, MD†

Provider ID: N/A

28078 BAXTER RD STE 340
MURRIETA, CA 92563
Effective as of 01-AUG-22

LOCKE, JOHN, MD†

Provider ID: N/A

28078 BAXTER RD STE 330
MURRIETA, CA 92563
Effective as of 01-AUG-22

CI. Lista de proveedores de la red Médico de atención especializada

LUNA, MARIO, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 101
MURRIETA, CA 92562
Effective as of 01-AUG-20

LUNA, MARIO, MD

Provider ID: N/A

39755 DATE ST STE 104
MURRIETA, CA 92563
Effective as of 01-MAR-23

ODA, NINOS, MD

Provider ID: N/A

25395 HANCOCK AVE STE
240
MURRIETA, CA 92562
Effective as of 01-MAY-23

ODA, NINOS, MD

Provider ID: N/A

25395 HANCOCK AVE STE
250
MURRIETA, CA 92562
Effective as of 01-MAY-23

SAYEGH, ELI, MD

Provider ID: N/A

28078 BAXTER RD STE 340
MURRIETA, CA 92563
Effective as of 01-AUG-22

SAYEGH, ELI, MD

Provider ID: N/A

28078 BAXTER RD STE 330
MURRIETA, CA 92563
Effective as of 01-AUG-22

SAYEGH, ELI, MD

Provider ID: N/A

28078 BAXTER RD STE 330
MURRIETA, CA 92563
Effective as of 01-JAN-22

SAYEGH, ELI, MD

Provider ID: N/A

28078 BAXTER RD STE 340
MURRIETA, CA 92563
Effective as of 01-JAN-22

SAYEGH, ELI, MD

Provider ID: N/A

28078 BAXTER RD STE 340
MURRIETA, CA 92563
Effective as of 01-DEC-22

SAYEGH, ELI, MD

Provider ID: N/A

28078 BAXTER RD STE 330
MURRIETA, CA 92563
Effective as of 01-DEC-22

TOOMA, GHASSAN, MD†

Provider ID: N/A

28078 BAXTER RD STE 340
MURRIETA, CA 92563
Effective as of 01-DEC-22

TOOMA, GHASSAN, MD†

Provider ID: N/A

28078 BAXTER RD STE 330
MURRIETA, CA 92563
Effective as of 01-APR-03

TOOMA, GHASSAN, MD†

Provider ID: N/A

28078 BAXTER RD STE 330
MURRIETA, CA 92563
Effective as of 01-DEC-23

SURGERY PLASTIC

BATRA, MUNISH, MD

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 303
MURRIETA, CA 92562*
Effective as of 01-JUL-23

KUPFER, DAVID, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 303
MURRIETA, CA 92562
Effective as of 01-SEP-09

NEWMAN, DAVID, MD

Provider ID: N/A

25150 HANCOCK AVE STE
110
MURRIETA, CA 92562
Effective as of 01-SEP-13

NEWMAN, DAVID, MD

Provider ID: N/A

25150 HANCOCK AVE STE
110
MURRIETA, CA 92562
Effective as of 01-JAN-06

SURGERY THORACIC

KOUMJIAN, MICHAEL, MD†

Provider ID: N/A

28078 BAXTER RD STE 510
MURRIETA, CA 92563
Effective as of 01-JUN-21

VO, QUANG, MD†

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-DEC-22

VO, QUANG, MD†

Provider ID: N/A

25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-JUL-23

UROLOGY

C1. Lista de proveedores de la red
Médico de atención especializada

BRODAK, PHILIP, MD

Provider ID: N/A

28078 BAXTER RD STE 430
MURRIETA, CA 92563
Effective as of 01-AUG-24

BRODAK, PHILIP, MD

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 304
MURRIETA, CA 92562
Effective as of 01-AUG-24

BRODAK, PHILIP, MD

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 305
MURRIETA, CA 92562
Effective as of 01-AUG-24

CONNER, RICHARD, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-SEP-14

CONNER, RICHARD, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-MAY-20

CRISELL, MONISHA, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-MAY-15

CRISELL, MONISHA, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204

MURRIETA, CA 92562
Effective as of 01-MAY-20

CRISELL, MONISHA, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-JUN-15

CRISELL, MONISHA, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-SEP-14

CRISELL, MONISHA, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-FEB-15

CRISELL, MONISHA, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-JAN-04

KIM, FRANK, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-JUL-24

KIM, FRANK, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-JAN-24

KIM, FRANK, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-APR-21

KIM, FRANK, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-DEC-20

KIM, FRANK, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-DEC-20

KIM, FRANK, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-DEC-20

KIM, FRANK, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-DEC-20

KIM, FRANK, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-DEC-20

KIM, FRANK, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-DEC-20

KIM, FRANK, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-NOV-20

**C1. Lista de proveedores de la red
Médico de atención especializada**

KIM, FRANK, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563

Effective as of 01-NOV-20

KIM, FRANK, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563

Effective as of 01-NOV-20

KIM, FRANK, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563

Effective as of 01-DEC-20

LARSON, BENJAMIN, MD

Provider ID: N/A

28078 BAXTER RD STE 430
MURRIETA, CA 92563

Effective as of 01-MAY-23

LARSON, BENJAMIN, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562

Effective as of 01-JUL-23

LARSON, BENJAMIN, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562

Effective as of 01-MAY-20

LARSON, BENJAMIN, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562

Effective as of 01-AUG-15

LARSON, BENJAMIN, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562

Effective as of 01-AUG-15

LARSON, BENJAMIN, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562

Effective as of 01-AUG-15

LARSON, BENJAMIN, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562

Effective as of 01-OCT-15

LOUIE, BRANDON, MD

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563

Effective as of 01-JAN-24

LOUIE, BRANDON, MD

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563

Effective as of 01-JUL-24

LUTTGE, SCOTT, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562

Effective as of 01-MAY-23

LUTTGE, SCOTT, MD†

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562

Effective as of 01-MAY-23

REDDY, MADHUMITHA, DO†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563

Effective as of 01-JUL-24

REDDY, MADHUMITHA, DO†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563

Effective as of 01-MAR-21

REDDY, MADHUMITHA, DO†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563

Effective as of 01-FEB-22

REDDY, MADHUMITHA, DO†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563

Effective as of 01-MAY-21

REDDY, MADHUMITHA, DO†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563

Effective as of 01-AUG-19

SHAH, NEMI, MD

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562

Teleservice

Effective as of 01-FEB-24

SHAH, NEMI, MD

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562

Effective as of 01-FEB-24

**C1. Lista de proveedores de la red
Médico de atención especializada**

Teleservice

Effective as of 01-FEB-24

TAKESITA, KEN, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-NOV-15

TAKESITA, KEN, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-NOV-15

TALANKI, VARUN, MD

Provider ID: N/A

28078 BAXTER RD STE 430
MURRIETA, CA 92563
Effective as of 01-MAY-23

TALANKI, VARUN, MD

Provider ID: N/A

28078 BAXTER RD STE 430
MURRIETA, CA 92563
Effective as of 01-MAY-23

TALANKI, VARUN, MD

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-JAN-22

TALANKI, VARUN, MD

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-MAY-22

TALANKI, VARUN, MD

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204

MURRIETA, CA 92562

Effective as of 01-MAY-22

TSI, SY, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563*
Effective as of 01-JUL-23

TSI, SY, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-APR-22

TSI, SY, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-AUG-16

TSI, SY, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-JUL-24

**VEMULAPALLI, SREENIVAS,
MD†**

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-MAY-15

**VEMULAPALLI, SREENIVAS,
MD†**

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-MAY-20

**VEMULAPALLI, SREENIVAS,
MD†**

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-JUL-13

**VEMULAPALLI, SREENIVAS,
MD†**

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-JUN-15

**VEMULAPALLI, SREENIVAS,
MD**

Provider ID: N/A

28078 BAXTER RD STE 430
MURRIETA, CA 92563
Effective as of 01-MAY-23

**VEMULAPALLI, SREENIVAS,
MD†**

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-OCT-14

**VEMULAPALLI, SREENIVAS,
MD†**

Provider ID: N/A

25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-DEC-23

YUN, EDWARD, MD†

Provider ID: N/A

28078 BAXTER RD STE 450
MURRIETA, CA 92563*
Effective as of 01-NOV-15

YUN, EDWARD, MD†

**C1. Lista de proveedores de la red
Médico de atención especializada**

Provider ID: N/A
 28078 BAXTER RD STE 450
 MURRIETA, CA 92563*
 Effective as of 01-AUG-16

YUN, EDWARD, MD†
 Provider ID: N/A
 28078 BAXTER RD STE 450
 MURRIETA, CA 92563*
 Effective as of 01-APR-16

YUN, EDWARD, MD†
 Provider ID: N/A
 28078 BAXTER RD STE 450
 MURRIETA, CA 92563
 Effective as of 01-JAN-23

YUN, EDWARD, MD†
 Provider ID: N/A
 28078 BAXTER RD STE 450
 MURRIETA, CA 92563*
 Effective as of 01-JUL-23

YUN, EDWARD, MD†
 Provider ID: N/A
 28078 BAXTER RD STE 450
 MURRIETA, CA 92563
 Effective as of 01-JAN-23

**CARDIAC
ELECTROPHYSIOLOGY**

OVIEDO-LINARES, RAUL, MD
 Provider ID: N/A
 1415 E 8TH ST STE 5
 NATIONAL CITY, CA 91950
 Effective as of 01-JUL-24

**CARDIOVASCULAR
DISEASE**

DAMANI, SAMIR, MD
 Provider ID: N/A
 655 EUCLID AVE STE 401

NATIONAL CITY, CA 91950
 Effective as of 01-NOV-23

KIM, JAMES, MD
 Provider ID: N/A
 1415 E 8TH ST
 NATIONAL CITY, CA 91950
 Effective as of 01-JUN-23

KIM, JAMES, MD
 Provider ID: N/A
 1415 E 8TH ST STE 3
 NATIONAL CITY, CA 91950
 Teleservice
 Effective as of 01-AUG-23

LY, NANCY, MD
 Provider ID: N/A
 1415 E 8TH ST
 NATIONAL CITY, CA 91950
 Effective as of 01-JUN-23

LY, NANCY, MD
 Provider ID: N/A
 1415 E 8TH ST STE 4
 NATIONAL CITY, CA 91950
 Effective as of 01-NOV-23

LY, NANCY, MD
 Provider ID: N/A
 1415 E 8TH ST
 NATIONAL CITY, CA 91950
 Effective as of 01-JUN-23

NANAVATI, VIMAL, MD†
 Provider ID: N/A
 2345 E 8TH ST STE 111
 NATIONAL CITY, CA 91950
 Teleservice
 Effective as of 01-AUG-24

NANAVATI, VIMAL, MD†
 Provider ID: N/A
 2345 E 8TH ST STE 111
 NATIONAL CITY, CA 91950

Teleservice
 Effective as of 01-JAN-21

OVIEDO-LINARES, RAUL, MD
 Provider ID: N/A
 1415 E 8TH ST STE 5
 NATIONAL CITY, CA 91950
 Effective as of 01-JUN-23

OVIEDO-LINARES, RAUL, MD
 Provider ID: N/A
 1415 E 8TH ST STE 5
 NATIONAL CITY, CA 91950
 Effective as of 01-AUG-23

OVIEDO-LINARES, RAUL, MD
 Provider ID: N/A
 1415 E 8TH ST STE 5
 NATIONAL CITY, CA 91950
 Effective as of 01-AUG-23

PANDHI, JAY, MD†
 Provider ID: N/A
 655 EUCLID AVE STE 208
 NATIONAL CITY, CA 91950
 Effective as of 01-JAN-21

PANDHI, JAY, MD†
 Provider ID: N/A
 655 EUCLID AVE STE 208
 NATIONAL CITY, CA 91950
 Effective as of 01-MAR-18

PATEL, PRASHANT, MD
 Provider ID: N/A
 1845 E 12TH ST
 NATIONAL CITY, CA 91950
 Effective as of 01-JUL-24

ROUGH, STEVEN, MD
 Provider ID: N/A
 1415 E 8TH ST STE 6
 NATIONAL CITY, CA 91950
 Teleservice
 Effective as of 01-AUG-23

C1. Lista de proveedores de la red Médico de atención especializada

SHARF, ALBERT, MD

Provider ID: N/A

1845 E 12TH ST
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-JUN-24

SHEREV, DIMITRI, MD

Provider ID: N/A

655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950

Effective as of 01-SEP-23

WYSOCZANSKI, MARIUSZ, MD

Provider ID: N/A

1415 E 8TH ST STE 8
NATIONAL CITY, CA 91950

Effective as of 01-JUN-23

WYSOCZANSKI, MARIUSZ, MD

Provider ID: N/A

1415 E 8TH ST STE 8
NATIONAL CITY, CA 91950

Effective as of 01-AUG-23

CERTIFIED NURSE PRACTITIONER

AQUINO, FELINO, NP

Provider ID: N/A

2743 HIGHLAND AVE
NATIONAL CITY, CA 91950

Effective as of 01-JAN-21

CARDENAS, MIRIAM, NPF

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-OCT-23

DHARKAR-SURBER, SAPNA, NP

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-OCT-23

DRISCOLL, SUSAN, NP

Provider ID: N/A

340 E 8TH ST
NATIONAL CITY, CA 91950

Effective as of 01-OCT-23

DRISCOLL, SUSAN, NP

Provider ID: N/A

330 E 8TH ST
NATIONAL CITY, CA 91950

Effective as of 01-OCT-23

KYI, MYA, NP

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-MAR-24

LIM, IMELDA, NP

Provider ID: N/A

2743 HIGHLAND AVE
NATIONAL CITY, CA 91950

Effective as of 01-OCT-22

OLESCO, JENNIFER, NP

Provider ID: N/A

655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950

Effective as of 01-AUG-23

REAL, MARIA, NP

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-OCT-23

REDDY, PRIYA, NP

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Effective as of 01-NOV-22

RENZAS, JENNIFER, NP

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-JUL-21

SWEENEY, ZSAZSA, NP

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-JUL-21

VILLANUEVADEGUTIE, BERENICE, NP

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-MAY-21

WILLIAMS, BREAHA, NP

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Effective as of 01-DEC-21

CERTIFIED REGISTERED NURSE MIDWIFE

MAST, ASHLEY, CRNM

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-OCT-23

CHIROPRACTOR

C1. Lista de proveedores de la red Médico de atención especializada

DORADO, SUE, DC

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-OCT-23

GILIBERTO, JOSEPH, DC†

Provider ID: N/A

2835 HIGHLAND AVE
NATIONAL CITY, CA 91950

Effective as of 01-AUG-22

HALEY, STEVEN, DC

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-OCT-23

DERMATOLOGY

BARRIO, VICTORIA, MD

Provider ID: N/A

655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-MAR-24

BARRIO, VICTORIA, MD

Provider ID: N/A

655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-APR-24

BROGAN, JACQUELINE, MD†

Provider ID: N/A

655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950

Effective as of 01-JUL-22

BROGAN, JACQUELINE, MD†

Provider ID: N/A

655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-OCT-21

CELANO, NICHOLAS, MD†

Provider ID: N/A

655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-SEP-22

CELANO, NICHOLAS, MD†

Provider ID: N/A

655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950

Effective as of 01-JAN-21

CELANO, NICHOLAS, MD†

Provider ID: N/A

655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-JUL-24

CELANO, NICHOLAS, MD†

Provider ID: N/A

655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950

Effective as of 01-MAR-18

CELANO, NICHOLAS, MD†

Provider ID: N/A

655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-JUL-22

CHIANG, JENNIFER, MD†

Provider ID: N/A

655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-APR-24

CHIANG, JENNIFER, MD†

Provider ID: N/A

655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950

Effective as of 01-MAR-18

CHIANG, JENNIFER, MD†

Provider ID: N/A

655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-JUL-22

CHIANG, JENNIFER, MD†

Provider ID: N/A

655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950

Effective as of 01-JAN-21

CHIANG, JENNIFER, MD†

Provider ID: N/A

655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-SEP-22

GONZALEZ, JOSE, MD†

Provider ID: N/A

655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-AUG-22

GONZALEZ, JOSE, MD

Provider ID: N/A

655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950

Effective as of 01-MAY-23

GORDON, JUSTIN, MD†

Provider ID: N/A

655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950

Effective as of 01-APR-22

C1. Lista de proveedores de la red Médico de atención especializada

GORDON, JUSTIN, MD†

Provider ID: N/A

655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-AUG-22

LIN, SHINKO, MD

Provider ID: N/A

655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-APR-24

LIN, SHINKO, MD

Provider ID: N/A

655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-APR-24

LIN, SHINKO, MD

Provider ID: N/A

655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-MAR-24

NELSON, AISLYN, MD†

Provider ID: N/A

655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-AUG-22

NELSON, AISLYN, MD†

Provider ID: N/A

655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-OCT-19

SATEESH, BROOKE, MD†

Provider ID: N/A

655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-AUG-22

SATEESH, BROOKE, MD†

Provider ID: N/A

655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-JUL-22

SATEESH, BROOKE, MD†

Provider ID: N/A

655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950

Effective as of 01-MAR-18

TYAGI, ABHILASHA, MD†

Provider ID: N/A

655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950

Effective as of 01-APR-22

TYAGI, ABHILASHA, MD†

Provider ID: N/A

655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-AUG-22

TYAGI, ABHILASHA, MD†

Provider ID: N/A

655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950

Effective as of 01-SEP-22

UEBELHOER, NATHAN, DO†

Provider ID: N/A

655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950

Effective as of 01-FEB-22

UEBELHOER, NATHAN, DO†

Provider ID: N/A

655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-FEB-23

UEBELHOER, NATHAN, DO†

Provider ID: N/A

655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950

Effective as of 01-APR-18

EMERGENCY MEDICINE

TABILA, BRIAN, MD†

Provider ID: N/A

610 EUCLID AVE STE 202
NATIONAL CITY, CA 91950

Effective as of 01-JAN-21

ENDOCRINOLOGY

METABOLISM DIABETES

ROGERS, MEGAN, MD

Provider ID: N/A

22 W 35TH ST STE 101
NATIONAL CITY, CA 91950

Effective as of 01-MAY-24

VALDEZ, KRYSTAL ANGELI, MD

Provider ID: N/A

2743 HIGHLAND AVE
NATIONAL CITY, CA 91950

Effective as of 01-JAN-24

FAMILY PRACTICE

DILLON, MAYRA, MD†

Provider ID: N/A

1136 D AVE
NATIONAL CITY, CA 91950*

Effective as of 01-JUL-24

SNOOK, BRIAN, DO†

Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

2400 E 8TH ST
NATIONAL CITY, CA 91950*
Effective as of 01-JUN-24

THAYER, KARISA, MD

Provider ID: N/A

330 E 8TH ST STE 340
NATIONAL CITY, CA 91950
Effective as of 01-SEP-24

GASTROENTEROLOGY

GISH, ROBERT, MD†

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-JUN-21

INTERNAL MEDICINE

LIM, ROSEMARIE, MD†

Provider ID: N/A

610 EUCLID AVE STE 202
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

LIU, ANDREW, MD

Provider ID: N/A

655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950
Effective as of 01-SEP-23

MAACHIP, FHARAK, MD†

Provider ID: N/A

655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950
Effective as of 01-MAR-15

MAACHIP, FHARAK, MD†

Provider ID: N/A

655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950
Effective as of 01-NOV-23

PANDHI, JAY, MD†

Provider ID: N/A

655 EUCLID AVE STE 208
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

INTERNAL MEDICINE CRITICAL CARE MEDICINE

LIM, ROSEMARIE, MD†

Provider ID: N/A

655 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
Effective as of 01-MAY-21

TABILA, BRIAN, MD†

Provider ID: N/A

655 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
Effective as of 01-MAR-21

INTERVENTIONAL CARDIOLOGY

CAMACHO, BENJAMIN, MD†

Provider ID: N/A

1615 SWEETWATER RD
NATIONAL CITY, CA 91950*
Effective as of 01-AUG-21

CAMACHO, BENJAMIN, MD†

Provider ID: N/A

1615 SWEETWATER RD STE
D
NATIONAL CITY, CA 91950
Effective as of 01-JUL-22

CAMACHO, BENJAMIN, MD†

Provider ID: N/A

1615 SWEETWATER RD
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

DAMANI, SAMIR, MD

Provider ID: N/A

655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950
Effective as of 01-MAR-24

FERNANDEZ, GENARO, MD†

Provider ID: N/A

610 EUCLID AVE STE 201
NATIONAL CITY, CA 91950
Effective as of 01-APR-24

FERNANDEZ, GENARO, MD†

Provider ID: N/A

610 EUCLID AVE STE 201
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

FERNANDEZ, GENARO, MD†

Provider ID: N/A

610 EUCLID AVE STE 201
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

KIM, JAMES, MD

Provider ID: N/A

1415 E 8TH ST STE 3
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-JUL-24

LY, NANCY, MD

Provider ID: N/A

1415 E 8TH ST
NATIONAL CITY, CA 91950
Effective as of 01-JUN-23

LY, NANCY, MD

Provider ID: N/A

1415 E 8TH ST STE 4
NATIONAL CITY, CA 91950
Effective as of 01-AUG-23

OVIEDO-LINARES, RAUL, MD

Provider ID: N/A

1415 E 8TH ST STE 5

C1. Lista de proveedores de la red Médico de atención especializada

NATIONAL CITY, CA 91950
Effective as of 01-AUG-23

OVIEDO-LINARES, RAUL, MD

Provider ID: N/A

1415 E 8TH ST STE 5
NATIONAL CITY, CA 91950
Effective as of 01-JAN-24

PANDHI, JAY, MD†

Provider ID: N/A

655 EUCLID AVE STE 208
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

PANDHI, JAY, MD†

Provider ID: N/A

655 EUCLID AVE STE 208
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

PANDHI, JAY, MD†

Provider ID: N/A

655 EUCLID AVE STE 208
NATIONAL CITY, CA 91950
Effective as of 01-JAN-24

PANDHI, JAY, MD†

Provider ID: N/A

655 EUCLID AVE STE 208
NATIONAL CITY, CA 91950
Effective as of 01-MAR-20

ROUGH, STEVEN, MD

Provider ID: N/A

1415 E 8TH ST STE 6
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-OCT-23

ROUGH, STEVEN, MD

Provider ID: N/A

1415 E 8TH ST STE 6
NATIONAL CITY, CA 91950
Teleservice

Effective as of 01-OCT-23

ROUGH, STEVEN, MD

Provider ID: N/A

1415 E 8TH ST STE 6
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-OCT-23

ROUGH, STEVEN, MD

Provider ID: N/A

1415 E 8TH ST STE 6
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-OCT-23

SHETABI, KAMBIZ, MD

Provider ID: N/A

1415 E 8TH ST
NATIONAL CITY, CA 91950
Effective as of 01-FEB-24

SHETABI, KAMBIZ, MD

Provider ID: N/A

1415 E 8TH ST
NATIONAL CITY, CA 91950
Effective as of 01-FEB-24

SHETABI, KAMBIZ, MD

Provider ID: N/A

1415 E 8TH ST STE 7
NATIONAL CITY, CA 91950
Effective as of 01-APR-24

WYSOCZANSKI, MARIUSZ, MD

Provider ID: N/A

1415 E 8TH ST STE 8
NATIONAL CITY, CA 91950
Effective as of 01-JAN-24

WYSOCZANSKI, MARIUSZ, MD†

Provider ID: N/A

502 EUCLID AVE STE 104
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

WYSOCZANSKI, MARIUSZ, MD†

Provider ID: N/A

502 EUCLID AVE STE 104
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

LICENSED CLINICAL SOCIAL WORKER

ALVAREZ, DIANA, LCSW

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-APR-21

JASSO-RAMIREZ, MARTHA, LCSW

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-SEP-21

SACHS, MELISSA, LCSW†

Provider ID: N/A

2400 E 8TH ST
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-MAR-21

WRIGHT, STEPHANIE, LCSW

Provider ID: N/A

2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
Effective as of 01-JAN-24

MARRIAGE FAMILY THERAPIST

KUEK, JOHN, MFT

Provider ID: N/A

217 HIGHLAND AVE

C1. Lista de proveedores de la red Médico de atención especializada

NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-APR-21

NEPHROLOGY

CALDERONMOLINA, JUAN, MD†

Provider ID: N/A
655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950
Effective as of 01-NOV-23

CALDERONMOLINA, JUAN, MD†

Provider ID: N/A
655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950
Effective as of 01-JUL-22

COMUNALE, RODERICK, MD†

Provider ID: N/A
502 EUCLID AVE STE 205
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-JUL-22

COMUNALE, RODERICK, MD†

Provider ID: N/A
502 EUCLID AVE STE 205
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-FEB-19

COMUNALE, RODERICK, MD†

Provider ID: N/A
502 EUCLID AVE STE 205
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-JAN-21

MAACHIP, FHARAK, MD†

Provider ID: N/A
655 EUCLID AVE STE 303

NATIONAL CITY, CA 91950
Effective as of 01-JUL-22

MAACHIP, FHARAK, MD†

Provider ID: N/A
655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

MAACHIP, FHARAK, MD†

Provider ID: N/A
655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950
Effective as of 01-SEP-20

SACAMAY, TAGUMPAY, MD†

Provider ID: N/A
655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950
Effective as of 01-SEP-20

SACAMAY, TAGUMPAY, MD†

Provider ID: N/A
655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

SACAMAY, TAGUMPAY, MD†

Provider ID: N/A
655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

SACAMAY, TAGUMPAY, MD†

Provider ID: N/A
655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

SACAMAY, TAGUMPAY, MD†

Provider ID: N/A
655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950
Effective as of 01-JUL-22

NEUROLOGY

BOBO, JERRY, MD†

Provider ID: N/A
502 EUCLID AVE STE 204
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

OBSTETRICS / GYNECOLOGY

AL-MSHHDANI, AYSER, MD

Provider ID: N/A
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-OCT-23

ASLIAN, AZITA, MD†

Provider ID: N/A
2400 E 8TH ST
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

ASLIAN, AZITA, MD†

Provider ID: N/A
2400 E 8TH ST
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

ASLIAN, AZITA, MD

Provider ID: N/A
1136 D AVE
NATIONAL CITY, CA 91950*
Effective as of 01-SEP-23

DAVIS, TRACIE, MD

Provider ID: N/A
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-OCT-23

DELROSARIO, GELEN, MD†

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

502 EUCLID AVE STE 300
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

DELROSARIO, GELEN, MD†

Provider ID: N/A

502 EUCLID AVE STE 300
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

FOLCHTORRES-AGUIAR, BEATRIZ, MD†

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-AUG-22

GELLENS, ANDREW, MD†

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-NOV-21

MELLENDEZBERRIOS, IARA, MD

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-AUG-24

MENDEZ, DIEGO, MD

Provider ID: N/A

2400 E 8TH ST
NATIONAL CITY, CA 91950
Effective as of 01-APR-23

OPHTHALMOLOGY

ABDALLAH, WALID, MD†

Provider ID: N/A

1520 E PLAZA BLVD

NATIONAL CITY, CA 91950
Effective as of 01-MAY-24

CARRABY, ARNETT, MD†

Provider ID: N/A

1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

CHANG, TOM, MD†

Provider ID: N/A

2240 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

DELENGOCKY, TAYSON, DO

Provider ID: N/A

1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-FEB-24

FISH, STEVEN, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-NOV-22

FISH, STEVEN, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-APR-23

FISH, STEVEN, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-APR-23

FISH, STEVEN, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-APR-23

FISH, STEVEN, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-APR-23

GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-APR-18

GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-JUN-23

GOLLOGLY, HEIDRUN, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-MAR-18

HAIGHT, BRUCE, MD†

Provider ID: N/A

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

HUDSON, HENRY, MD†

Provider ID: N/A

655 EUCLID AVE STE 302

C1. Lista de proveedores de la red Médico de atención especializada

NATIONAL CITY, CA 91950
Effective as of 01-APR-23

HUDSON, HENRY, MD†

Provider ID: N/A

📍 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-APR-22

MANI, MAJID, MD†

Provider ID: N/A

📍 1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

MCDONNELL, EMMA, MD†

Provider ID: N/A

📍 1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-APR-23

MCGRAW, JOSEPH, MD†

Provider ID: N/A

📍 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-OCT-21

MCGRAW, JOSEPH, MD†

Provider ID: N/A

📍 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-NOV-21

MCGRAW, JOSEPH, MD†

Provider ID: N/A

📍 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-JAN-22

MCGRAW, JOSEPH, MD†

Provider ID: N/A

📍 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-JAN-24

MORRISON-REYES, JOSHUA, MD

Provider ID: N/A

📍 2240 E PLAZA BOULEVARD
STE F AND G
NATIONAL CITY, CA 91950
Effective as of 01-JUL-24

MORRISON-REYES, JOSHUA, MD†

Provider ID: N/A

📍 2240 E PLAZA BLVD STE F
AND G
NATIONAL CITY, CA 91950
Effective as of 01-MAR-23

MORRISON-REYES, JOSHUA, MD†

Provider ID: N/A

📍 2240 E PLAZA BLVD STE F
AND G
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

MORRISON-REYES, JOSHUA, MD†

Provider ID: N/A

📍 2240 E PLAZA BLVD STE F
AND G
NATIONAL CITY, CA 91950
Effective as of 01-APR-22

MORRISON-REYES, JOSHUA, MD

Provider ID: N/A

📍 2240 E PLAZA BOULEVARD
STE F AND G
NATIONAL CITY, CA 91950
Effective as of 01-AUG-24

MORRISON-REYES, JOSHUA, MD†

Provider ID: N/A

📍 2240 E PLAZA BLVD STE F

AND G
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

MORRISON-REYES, JOSHUA, MD

Provider ID: N/A

📍 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-FEB-24

PAPASTERGIOU, GEORGIOS, MD†

Provider ID: N/A

📍 1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

PATEL, SARJAN, MD

Provider ID: N/A

📍 2240 E PLAZA BLVD STE F
AND G
NATIONAL CITY, CA 91950
Effective as of 01-SEP-24

PATEL, SARJAN, MD†

Provider ID: N/A

📍 2240 E PLAZA BLVD STE F
AND G
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

PATEL, GITANE, MD†

Provider ID: N/A

📍 2240 E PLAZA BLVD STE F
AND G
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

PATEL, SARJAN, MD†

Provider ID: N/A

📍 2240 E PLAZA BLVD STE F
AND G
NATIONAL CITY, CA 91950
Effective as of 01-AUG-20

C1. Lista de proveedores de la red Médico de atención especializada

PATEL, SARJAN, MD†

Provider ID: N/A

📍 2240 E PLAZA BLVD STE F
AND G
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

PATEL, SARJAN, MD

Provider ID: N/A

📍 2240 E PLAZA BOULEVARD
STE F AND G
NATIONAL CITY, CA 91950
Effective as of 01-JUL-24

PEAIRS, JAMES, MD†

Provider ID: N/A

📍 1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

PERRY, ARTHUR, MD

Provider ID: N/A

📍 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-APR-23

PRABHU, SUJATA, MD†

Provider ID: N/A

📍 2240 E PLAZA BLVD STE F
AND G
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

RAJSBAUM, MARTIN, MD†

Provider ID: N/A

📍 1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

SASSANI, PATRICK, MD†

Provider ID: N/A

📍 1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

SASSANI, PATRICK, MD†

Provider ID: N/A

📍 1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-APR-24

SKAF, AYHAM, MD†

Provider ID: N/A

📍 1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

ZABANEH, ALEXANDER, MD†

Provider ID: N/A

📍 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

OPTOMETRIST

AOTO, KIM, OD†

Provider ID: N/A

📍 2240 E PLAZA BLVD STE
F-G
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

DYER, SHARON, OD†

Provider ID: N/A

📍 2240 E PLAZA BLVD STE F
AND G
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

EL-MOGHRABI, NANCY, OD†

Provider ID: N/A

📍 1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

EL-MOGHRABI, ROULA, OD†

Provider ID: N/A

📍 1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

KHIEU, TINA, OD

Provider ID: N/A

📍 2240 E PLAZA BLVD STE
F&G
NATIONAL CITY, CA 91950
Effective as of 01-MAY-24

KHIEU, TINA, OD

Provider ID: N/A

📍 2240 E PLAZA BLVD STE
F&G
NATIONAL CITY, CA 91950
Effective as of 01-MAR-24

KHIEU, TINA, OD

Provider ID: N/A

📍 2240 E PLAZA BLVD STE
F&G
NATIONAL CITY, CA 91950
Effective as of 01-DEC-23

KOO, ANITA, OD

Provider ID: N/A

📍 2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
Effective as of 01-MAY-24

KOO, ANITA, OD

Provider ID: N/A

📍 1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-JAN-24

KOO, ANITA, OD

Provider ID: N/A

📍 1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-FEB-24

KOO, ANITA, OD

Provider ID: N/A

📍 1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-JUN-24

C1. Lista de proveedores de la red Médico de atención especializada

MARR, RYAN, OD

Provider ID: N/A

📍 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-DEC-22

MARR, RYAN, OD

Provider ID: N/A

📍 2240 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-JUL-24

MARR, RYAN, OD

Provider ID: N/A

📍 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-JUL-24

THACH, QUEEN, OD

Provider ID: N/A

📍 1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-SEP-24

VINH, JOHN, OD†

Provider ID: N/A

📍 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-SEP-20

PEDIATRIC EMERGENCY MEDICINE

BONSU, BEMA, MD†

Provider ID: N/A

📍 1136 D AVE
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

PEDIATRICS

RANA, DEBORAH, MD†

Provider ID: N/A

📍 2400 E 8TH ST

NATIONAL CITY, CA 91950*
Teleservice
Effective as of 01-AUG-24

PHYSICAL MEDICINE / REHABILITATION

CROWLEY, DONNA, MD†

Provider ID: N/A

📍 655 EUCLID AVE STE 209
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

CROWLEY, DONNA, MD†

Provider ID: N/A

📍 655 EUCLID AVE STE 209
NATIONAL CITY, CA 91950
Effective as of 01-APR-14

PHYSICIANS ASSISTANT

HABBOUSH, RANA, PA

Provider ID: N/A

📍 217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-OCT-23

HIGUERA, EDITH, PA

Provider ID: N/A

📍 217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-OCT-23

LANDON, JEFFREY, PA

Provider ID: N/A

📍 610 EUCLID AVE STE 200
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-NOV-23

MACASADIA, MARITES, PA

Provider ID: N/A

📍 610 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-SEP-20

MERCER, KELLY, PA†

Provider ID: N/A

📍 217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-APR-21

SHAH, SHEENA, PA

Provider ID: N/A

📍 502 EUCLID AVE STE 204
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

SHAH, SHEENA, PA

Provider ID: N/A

📍 502 EUCLID AVE STE 204
NATIONAL CITY, CA 91950
Effective as of 01-SEP-21

UDOH, EKAETE, PA

Provider ID: N/A

📍 610 EUCLID AVE STE 200
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-MAR-24

PODIATRIST

ATMAR, AKMAL, DPM†

Provider ID: N/A

📍 2345 E 8TH ST STE 105
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

ATMAR, AKMAL, DPM†

Provider ID: N/A

📍 2345 E 8TH ST STE 105
NATIONAL CITY, CA 91950
Effective as of 01-JAN-23

CAINE, SAMUEL, DPM

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-JUL-24

CAINE, SAMUEL, DPM

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-DEC-23

CAINE, SAMUEL, DPM

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-APR-24

DAVIDSONIII, JOHN, DPM†

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-JAN-21

DAVIDSONIII, JOHN, DPM†

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-JAN-22

DAVIDSONIII, JOHN, DPM†

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-JAN-21

DAVIDSONIII, JOHN, DPM†

Provider ID: N/A

610 EUCLID AVE STE 301

NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-DEC-23

DAVIDSONIII, JOHN, DPM†

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-FEB-19

DAVIDSONIII, JOHN, DPM†

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-SEP-22

KRIGER, STEPHEN, DPM†

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950

Teleservice

Effective as of 01-JAN-22

NGUYEN, HAN, DPM

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950

Effective as of 01-JAN-24

NGUYEN, HAN, DPM

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950

Effective as of 01-JUL-23

NGUYEN, HAN, DPM

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950

Effective as of 01-JUN-24

NGUYEN, HAN, DPM

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950

Effective as of 01-JUN-23

NGUYEN, HAN, DPM

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950

Effective as of 01-SEP-24

SANICOLAS, MARIA THERESA, DPM†

Provider ID: N/A

610 EUCLID AVE STE 304
NATIONAL CITY, CA 91950

Effective as of 01-SEP-22

SANICOLAS, MARIA THERESA, DPM†

Provider ID: N/A

610 EUCLID AVE STE 304
NATIONAL CITY, CA 91950

Effective as of 01-JAN-21

TSAI, GRACE, DPM

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950

Effective as of 01-APR-23

TSAI, GRACE, DPM

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950

Effective as of 01-FEB-23

TSAI, GRACE, DPM

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950

Effective as of 01-SEP-23

XU, DIXON, DPM†

Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

XU, DIXON, DPM†

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
Effective as of 01-MAR-24

XU, DIXON, DPM†

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
Effective as of 01-MAY-21

XU, DIXON, DPM†

Provider ID: N/A

610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
Effective as of 01-DEC-23

PSYCHIATRY

BOBO, JERRY, MD†

Provider ID: N/A

502 EUCLID AVE STE 204
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

BOBO, JERRY, MD†

Provider ID: N/A

502 EUCLID AVE STE 204
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

CHAUDHRI, YASHWANT, MD†

Provider ID: N/A

3035 E 8TH ST
NATIONAL CITY, CA 91950
Effective as of 01-AUG-22

CHAUDHRI, YASHWANT, MD†

Provider ID: N/A

3035 E 8TH ST

NATIONAL CITY, CA 91950
Effective as of 01-AUG-22

KUGEL, SAMUEL, MD†

Provider ID: N/A

502 EUCLID AVE STE 305
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-JAN-21

KUGEL, SAMUEL, MD†

Provider ID: N/A

502 EUCLID AVE STE 305
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-JAN-21

PSYCHOLOGIST

BAHENA-COLLEY, SANDRA, PSYD†

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-APR-21

BAHENA-COLLEY, SANDRA, PSYD†

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-APR-21

GALANT, DANIEL, PhD

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-APR-21

GALANT, DANIEL, PhD

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice

Effective as of 01-APR-21

MIRANDA, CYNTHIA, PhD†

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-APR-21

MIRANDA, CYNTHIA, PhD†

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-APR-21

REGISTERED PHYSICAL THERAPIST

CHENG, BRANDON, PT

Provider ID: N/A

3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950
Effective as of 01-FEB-24

DORSEY, KYLE, PT†

Provider ID: N/A

3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950
Effective as of 01-JAN-24

HERMAN, RACHEL, PT†

Provider ID: N/A

3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950
Effective as of 01-JAN-24

KARANDE, PRACHI, PT†

Provider ID: N/A

3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-JAN-22

NGUYEN, TIA, PT

Provider ID: N/A

3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950

Effective as of 01-MAR-24

NOVENCIDO, ANDREW, PT†

Provider ID: N/A

3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950

Effective as of 01-SEP-22

SUGGS, SARAH, PT

Provider ID: N/A

3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950

Effective as of 01-MAY-23

RHEUMATOLOGY

CHITKARA, PUJA, MD

Provider ID: N/A

502 EUCLID AVE STE 300
NATIONAL CITY, CA 91950

Effective as of 01-JUN-24

SURGERY GENERAL

ZUBER, SAMUEL, MD

Provider ID: N/A

22 W 35TH ST STE 101
NATIONAL CITY, CA 91950

Effective as of 01-MAY-24

SURGERY PLASTIC

GUTTIKONDA, RAKHESH, DO

Provider ID: N/A

655 EUCLID AVE STE 200
NATIONAL CITY, CA 91950

Effective as of 01-DEC-23

ALLERGY IMMUNOLOGY

SCHWINDT, CHRISTINA, MD†

Provider ID: N/A

400 NEWPORT CENTER
DR STE 401
NEWPORT BEACH, CA
92660

Effective as of 01-JUL-23

SCHWINDT, CHRISTINA, MD†

Provider ID: N/A

400 NEWPORT CENTER
DR STE 401
NEWPORT BEACH, CA
92660

Effective as of 01-JUL-23

CERTIFIED NURSE PRACTITIONER

ANTONYAN, HOLLY, NPF†

Provider ID: N/A

1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-DEC-22

LEE, ALEXANDER, NP

Provider ID: N/A

360 SAN MIGUEL DR STE
300
NEWPORT BEACH, CA
92660

Effective as of 01-APR-24

DERMATOLOGY

BIERMAN, DINA, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
405
NEWPORT BEACH, CA
92660

Effective as of 01-NOV-23

BIERMAN, DINA, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
405
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-23

BREITHAAPT, ANDREW, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-AUG-19

BREITHAAPT, ANDREW, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-DEC-20

BREITHAAPT, ANDREW, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-APR-24

BREITHAAPT, ANDREW, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-APR-24

ETTEFAGH, LELIA, MD

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA

**C1. Lista de proveedores de la red
Médico de atención especializada**

92660
Effective as of 01-JAN-21

ETTEFAGH, LELIA, MD

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-AUG-24

ETTEFAGH, LELIA, MD

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-AUG-24

FARSHIDI, ARTA, MD

Provider ID: N/A

360 SAN MIGUEL DR STE
405
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-23

FARSHIDI, ARTA, MD

Provider ID: N/A

360 SAN MIGUEL DR STE
405
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-23

FARSHIDI, ARTA, MD

Provider ID: N/A

360 SAN MIGUEL DR STE
405
NEWPORT BEACH, CA
92660

Effective as of 01-JUL-23

FAZEL, NASIM, MD

Provider ID: N/A

1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660

Effective as of 01-JUL-23

FAZEL, NASIM, MD

Provider ID: N/A

1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660

Effective as of 01-JUN-24

FAZEL, NASIM, MD

Provider ID: N/A

1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660

Effective as of 01-DEC-23

FAZEL, NASIM, MD

Provider ID: N/A

1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-DEC-23

FAZEL, NASIM, MD

Provider ID: N/A

1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660

Effective as of 01-SEP-23

FAZEL, NASIM, MD

Provider ID: N/A

1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660

Effective as of 01-DEC-23

FAZEL, NASIM, MD

Provider ID: N/A

1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-DEC-23

FAZEL, NASIM, MD

Provider ID: N/A

1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-24

FAZEL, NASIM, MD

Provider ID: N/A

1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-24

FAZEL, NASIM, MD

Provider ID: N/A

1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-23

FAZEL, NASIM, MD

Provider ID: N/A

1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660

Effective as of 01-OCT-23

FOREMAN, TANYA, MD†

Provider ID: N/A

400 NEWPORT CENTER
DR STE 702
NEWPORT BEACH, CA

**C1. Lista de proveedores de la red
Médico de atención especializada**

92660
Effective as of 01-SEP-18

FOREMAN, TANYA, MD†

Provider ID: N/A

📍 400 NEWPORT CENTER
DR STE 702
NEWPORT BEACH, CA
92660

Effective as of 01-OCT-23

FOREMAN, TANYA, MD†

Provider ID: N/A

📍 400 NEWPORT CENTER
DR STE 702
NEWPORT BEACH, CA
92660

Effective as of 01-OCT-15

FOREMAN, TANYA, MD†

Provider ID: N/A

📍 400 NEWPORT CENTER
DR STE 702
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-17

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

📍 360 SAN MIGUEL DR STE
309
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-24

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

📍 1441 AVOCADO AVE STE
409
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-24

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

📍 1441 AVOCADO AVE STE
409
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-24

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

📍 1441 AVOCADO AVE STE
409
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-24

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

📍 1441 AVOCADO AVE STE
409
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-24

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

📍 1441 AVOCADO AVE STE
409
NEWPORT BEACH, CA
92660

Effective as of 01-JUL-24

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

📍 1441 AVOCADO AVE STE
409
NEWPORT BEACH, CA
92660

Effective as of 01-JUL-24

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

📍 360 SAN MIGUEL DR STE
309
NEWPORT BEACH, CA
92660

Effective as of 01-JUL-24

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

📍 1441 AVOCADO AVE STE
409
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-24

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

📍 360 SAN MIGUEL DR STE
309
NEWPORT BEACH, CA
92660

Effective as of 01-JUL-24

HENDERSON, GREGORY, MD

Provider ID: N/A

📍 1441 AVOCADO AVE STE
409
NEWPORT BEACH, CA
92660

Effective as of 01-NOV-23

HENDERSON, GREGORY, MD

Provider ID: N/A

📍 360 SAN MIGUEL DR STE
309
NEWPORT BEACH, CA
92660

Effective as of 01-NOV-23

HENDERSON, GREGORY, MD

Provider ID: N/A

📍 1441 AVOCADO AVE STE
409
NEWPORT BEACH, CA
92660

Effective as of 01-OCT-23

KAMEL, JOSEPH, DO

Provider ID: N/A


📍 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA

CI. Lista de proveedores de la red Médico de atención especializada

92660
Effective as of 01-MAR-24

KAMEL, JOSEPH, DO


Provider ID: N/A

 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-MAR-24

KARAVAN JAHROMI, MAHSA, MD†


Provider ID: N/A

 1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-SEP-19

KHERADMAND, SHIVA, DO†


Provider ID: N/A

 240 NEWPORT CENTER DR
STE 105
NEWPORT BEACH, CA
92660

Effective as of 01-DEC-21

KHERADMAND, SHIVA, DO†


Provider ID: N/A

 240 NEWPORT CENTER DR
STE 105
NEWPORT BEACH, CA
92660

Effective as of 01-DEC-21

LANDER, JEFFREY, MD†


Provider ID: N/A

 1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-DEC-22

LANDER, JEFFREY, MD†


Provider ID: N/A

 1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660

Effective as of 01-DEC-22

LANDER, JEFFREY, MD†


Provider ID: N/A

 1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-DEC-21

LANDER, JEFFREY, MD†


Provider ID: N/A

 1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660

Effective as of 01-AUG-22

LANDER, JEFFREY, MD†


Provider ID: N/A

 1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660

Effective as of 01-AUG-22

LANDER, JEFFREY, MD†


Provider ID: N/A

 400 NEWPORT CENTER
DR STE 602
NEWPORT BEACH, CA
92660

Effective as of 01-DEC-22

LANDER, JEFFREY, MD†


Provider ID: N/A

 1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-DEC-21

LANDER, JEFFREY, MD†


Provider ID: N/A

 1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-23

LANDER, JEFFREY, MD†


Provider ID: N/A

 1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-23

LANDER, JEFFREY, MD†


Provider ID: N/A

 1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660

Effective as of 01-OCT-23

LANDER, JEFFREY, MD†


Provider ID: N/A

 1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-OCT-23

LANGER, ROBERT, MD

Provider ID: N/A

 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-MAR-24

LANGER, ROBERT, MD

Provider ID: N/A

 360 SAN MIGUEL DR STE

**C1. Lista de proveedores de la red
Médico de atención especializada**

501
NEWPORT BEACH, CA
92660
Effective as of 01-MAR-24

LEDON, JENNIFER, MD

Provider ID: N/A
400 NEWPORT CENTER
DR STE 702
NEWPORT BEACH, CA
92660
Effective as of 01-MAY-23

LEDON, JENNIFER, MD†

Provider ID: N/A
1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660
Effective as of 01-MAY-23

LEDON, JENNIFER, MD

Provider ID: N/A
400 NEWPORT CENTER
DR STE 702
NEWPORT BEACH, CA
92660
Effective as of 01-MAY-23

LEDON, JENNIFER, MD†

Provider ID: N/A
1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660
Effective as of 01-MAY-23

LEDON, JENNIFER, MD

Provider ID: N/A
400 NEWPORT CENTER
DR STE 702
NEWPORT BEACH, CA
92660
Effective as of 01-JAN-23

LEDON, JENNIFER, MD†

Provider ID: N/A
1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660
Effective as of 01-AUG-21

LEDON, JENNIFER, MD

Provider ID: N/A
400 NEWPORT CENTER
DR STE 702
NEWPORT BEACH, CA
92660
Effective as of 01-JUL-23

LEDON, JENNIFER, MD†

Provider ID: N/A
1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660
Effective as of 01-JUL-23

LEDON, JENNIFER, MD

Provider ID: N/A
400 NEWPORT CENTER
DR STE 702
NEWPORT BEACH, CA
92660
Effective as of 01-OCT-23

LEDON, JENNIFER, MD†

Provider ID: N/A
1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660
Effective as of 01-OCT-23

LEVIN, JACQUELINE, DO†

Provider ID: N/A
400 NEWPORT CENTER
DR STE 702
NEWPORT BEACH, CA

92660
Effective as of 01-OCT-23

LEVIN, JACQUELINE, DO†

Provider ID: N/A
400 NEWPORT CENTER
DR STE 702
NEWPORT BEACH, CA
92660
Effective as of 01-JAN-23

LIEM, WIEKE, MD†

Provider ID: N/A
1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660
Effective as of 01-JUL-19

LIEM, WIEKE, MD†

Provider ID: N/A
1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660
Effective as of 01-JAN-23

LIEM, WIEKE, MD†

Provider ID: N/A
1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660
Effective as of 01-MAY-19


LIEM, WIEKE, MD†

Provider ID: N/A
1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660
Effective as of 01-OCT-23

LUCERO, RENEE, DO


Provider ID: N/A

**C1. Lista de proveedores de la red
Médico de atención especializada**

 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660
Effective as of 01-AUG-24


LUCERO, RENEE, DO

Provider ID: N/A

 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660
Effective as of 01-JUL-23


MARTIN, STEPHANIE, MD†

Provider ID: N/A

 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660
Effective as of 01-APR-21


MARTIN, STEPHANIE, MD†

Provider ID: N/A

 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660
Effective as of 01-MAY-21


MARTIN, STEPHANIE, MD†

Provider ID: N/A

 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660
Effective as of 01-MAY-21


MESHKINPOUR, AZIN, MD†

Provider ID: N/A

 1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660
Effective as of 01-MAY-19


MESHKINPOUR, AZIN, MD†

Provider ID: N/A

 1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660
Effective as of 01-JAN-23


MESHKINPOUR, AZIN, MD†

Provider ID: N/A

 1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660
Effective as of 01-JUL-19


MESHKINPOUR, AZIN, MD†

Provider ID: N/A

 1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660
Effective as of 01-OCT-23


NAMI, NAVID, DO†

Provider ID: N/A

 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660
Effective as of 01-SEP-19


NAMI, NAVID, DO†

Provider ID: N/A

 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660
Effective as of 01-NOV-23

NAMI, NAVID, DO†


Provider ID: N/A

 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA

92660
Effective as of 01-JAN-23


NAMI, NAVID, DO†

Provider ID: N/A

 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660
Effective as of 01-JAN-23


NAMI, NAVID, DO†

Provider ID: N/A

 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660
Effective as of 01-JAN-23


NAMI, NAVID, DO†

Provider ID: N/A

 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660
Effective as of 01-MAR-23


NAMI, NAVID, DO†

Provider ID: N/A

 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660
Effective as of 01-MAR-23

NAMI, NAVID, DO†


Provider ID: N/A

 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660
Effective as of 01-FEB-23

NAMI, NAVID, DO†

Provider ID: N/A


C1. Lista de proveedores de la red Médico de atención especializada

 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-23

NAMI, NAVID, DO⁺


Provider ID: N/A

 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-23

NAMI, NAVID, DO⁺


Provider ID: N/A

 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-APR-21

NAMI, NAVID, DO⁺


Provider ID: N/A

 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-APR-21

NAMI, NAVID, DO⁺


Provider ID: N/A

 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-17

NAMI, NAVID, DO⁺


Provider ID: N/A

 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-18

NAMI, NAVID, DO⁺


Provider ID: N/A

 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-21

NAMI, NAVID, DO⁺


Provider ID: N/A

 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-12

NAMI, NAVID, DO⁺


Provider ID: N/A

 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-23

NAMI, NAVID, DO⁺


Provider ID: N/A

 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-23

NAMI, NAVID, DO⁺


Provider ID: N/A

 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-23

NAMI, NAVID, DO⁺

Provider ID: N/A


 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA

92660

Effective as of 01-JUN-19

NGUYEN, DENNIS, MD⁺


Provider ID: N/A

 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-23

NGUYEN, DENNIS, MD⁺


Provider ID: N/A

 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-23

NGUYEN, DENNIS, MD⁺


Provider ID: N/A

 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-23

NGUYEN, DENNIS, MD⁺

Provider ID: N/A

 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-23

NGUYEN, DENNIS, MD⁺

Provider ID: N/A

 360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-23

NGUYEN, DENNIS, MD⁺

Provider ID: N/A

**C1. Lista de proveedores de la red
Médico de atención especializada**

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-APR-21

NGUYEN, DENNIS, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-23

NGUYEN, DENNIS, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-23

NGUYEN, DENNIS, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-23

NGUYEN, DENNIS, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-23

NGUYEN, DENNIS, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-21

NGUYEN, DENNIS, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-MAR-23

NGUYEN, DENNIS, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-MAR-23

NGUYEN, DENNIS, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-23

NGUYEN, DENNIS, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-23

NGUYEN, DENNIS, MD†

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-23

ROSHDIEH, BABAK, MD†

Provider ID: N/A

1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA

92660

Effective as of 01-JAN-23

ROSHDIEH, BABAK, MD†

Provider ID: N/A

1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-22

ROSHDIEH, BABAK, MD†

Provider ID: N/A

1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-22

ROSHDIEH, BABAK, MD†

Provider ID: N/A

1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-22

ROSHDIEH, BABAK, MD†

Provider ID: N/A

1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-22

ROSHDIEH, BABAK, MD†

Provider ID: N/A

1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-22

ROSHDIEH, BABAK, MD†

Provider ID: N/A

**C1. Lista de proveedores de la red
Médico de atención especializada**

1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660

Effective as of 01-OCT-23

SHIELL, RONALD, MD†

Provider ID: N/A

400 NEWPORT CENTER
DR STE 702
NEWPORT BEACH, CA
92660

Effective as of 01-SEP-18

SHIELL, RONALD, MD†

Provider ID: N/A

400 NEWPORT CENTER
DR STE 702
NEWPORT BEACH, CA
92660

Effective as of 01-OCT-23

SHIELL, RONALD, MD†

Provider ID: N/A

1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660

Teleservice

Effective as of 01-AUG-21

SHIELL, RONALD, MD†

Provider ID: N/A

1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660

Teleservice

Effective as of 01-AUG-21

SHIELL, RONALD, MD†

Provider ID: N/A

400 NEWPORT CENTER
DR STE 702
NEWPORT BEACH, CA

92660
Effective as of 01-JAN-17

SHIELL, RONALD, MD†

Provider ID: N/A

1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660

Teleservice

Effective as of 01-DEC-21

SHIELL, RONALD, MD†

Provider ID: N/A

400 NEWPORT CENTER
DR STE 702
NEWPORT BEACH, CA
92660

Teleservice

Effective as of 01-DEC-21

***ENDOCRINOLOGY
METABOLISM DIABETES***

MOATTARI, ALI, MD†

Provider ID: N/A

1441 AVOCADO AVE STE
502
NEWPORT BEACH, CA
92660

Effective as of 01-JUL-20

SODHI, SANDEEP, MD†

Provider ID: N/A

369 SAN MIGUEL DR STE
200
NEWPORT BEACH, CA
92660

Effective as of 01-NOV-20

SODHI, SANDEEP, MD†

Provider ID: N/A

369 SAN MIGUEL DR STE
200
NEWPORT BEACH, CA

92660
Effective as of 01-NOV-20

SODHI, SANDEEP, MD†

Provider ID: N/A

369 SAN MIGUEL DR STE
200
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-24

SODHI, SANDEEP, MD†

Provider ID: N/A

369 SAN MIGUEL DR STE
200
NEWPORT BEACH, CA
92660

Effective as of 01-JUN-21

SODHI, SANDEEP, MD†

Provider ID: N/A

369 SAN MIGUEL DR STE
200
NEWPORT BEACH, CA
92660

Effective as of 01-JUN-21

***ENDOCRINOLOGY
REPRODUCTIVE***

MOAYERI, SHARON, MD

Provider ID: N/A

1401 AVOCADO AVE STE
403
NEWPORT BEACH, CA
92660

Effective as of 01-AUG-24

MOAYERI, SHARON, MD

Provider ID: N/A

1401 AVOCADO AVE STE
403
NEWPORT BEACH, CA
92660

Effective as of 01-AUG-24

C1. Lista de proveedores de la red Médico de atención especializada

SACHDEV, NIDHEE, MD

Provider ID: N/A

1401 AVOCADO AVE STE
403
NEWPORT BEACH, CA
92660

Effective as of 01-AUG-24

SACHDEV, NIDHEE, MD

Provider ID: N/A

1401 AVOCADO AVE STE
403
NEWPORT BEACH, CA
92660

Effective as of 01-AUG-24

GASTROENTEROLOGY

SAINI, SURINDER, MD†

Provider ID: N/A

1441 AVOCADO AVE STE
807
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-12

SAINI, SURINDER, MD†

Provider ID: N/A

1441 AVOCADO AVE STE
807
NEWPORT BEACH, CA
92660

Effective as of 01-APR-11

GYNECOLOGY

SUGIHARA, CORINNE, MD

Provider ID: N/A

1401 AVOCADO AVE STE
602
NEWPORT BEACH, CA
92660

Effective as of 01-SEP-24

SUGIHARA, CORINNE, MD

Provider ID: N/A

1401 AVOCADO AVE STE
602
NEWPORT BEACH, CA
92660

Effective as of 01-SEP-24

HEMATOLOGY / ONCOLOGY

PATHAK, BHAVANA, MD†

Provider ID: N/A

1441 AVOCADO AVE STE 301
NEWPORT BEACH, CA
92660

Effective as of 01-SEP-21

PATHAK, BHAVANA, MD†

Provider ID: N/A

1441 AVOCADO AVE STE 301
NEWPORT BEACH, CA
92660

Effective as of 01-SEP-21

SACHELARIÉ, IRINA, MD

Provider ID: N/A

1441 AVOCADO AVE STE 301
NEWPORT BEACH, CA
92660

Effective as of 01-MAR-23

SACHELARIÉ, IRINA, MD

Provider ID: N/A

1441 AVOCADO AVE STE 301
NEWPORT BEACH, CA
92660

Effective as of 01-MAR-23

SACHELARIÉ, IRINA, MD

Provider ID: N/A

1441 AVOCADO AVE STE 301
NEWPORT BEACH, CA
92660

Effective as of 01-MAR-23

SACHELARIÉ, IRINA, MD

Provider ID: N/A

1441 AVOCADO AVE STE 301
NEWPORT BEACH, CA
92660

Effective as of 01-MAR-23

INTERVENTIONAL CARDIOLOGY

SARABI, DENNIS, MD†

Provider ID: N/A

400 NEWPORT CENTER
DR STE 610
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-21

OBSTETRICS / GYNECOLOGY

AL-AZAWI, HIND, MD

Provider ID: N/A

366 SAN MIGUEL DR STE
209
NEWPORT BEACH, CA
92660

Effective as of 01-JUL-23

OPHTHALMOLOGY

AGARWAL, MADHU, MD†

Provider ID: N/A

400 NEWPORT CENTER
DR STE 605
NEWPORT BEACH, CA
92660

Effective as of 01-APR-23

AGARWAL, MADHU, MD†

Provider ID: N/A

400 NEWPORT CENTER
DR STE 605
NEWPORT BEACH, CA

**C1. Lista de proveedores de la red
Médico de atención especializada**

92660
Effective as of 01-APR-23

AGARWAL, MADHU, MD†

Provider ID: N/A
360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-OCT-22

AGARWAL, MADHU, MD†

Provider ID: N/A
400 NEWPORT CENTER
DR STE 605
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-21

AGARWAL, MADHU, MD†

Provider ID: N/A
360 SAN MIGUEL DR STE
307
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-18

CIES, WILLIAM, MD

Provider ID: N/A
400 NEWPORT CENTER
DR STE 404
NEWPORT BEACH, CA
92660

Effective as of 01-JUL-12

**EIFRIG, CHARLES WILLIAM,
MD†**

Provider ID: N/A
360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-NOV-17

EIFRIG, CHARLES WILLIAM,

MD†

Provider ID: N/A
360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-20

**EIFRIG, CHARLES WILLIAM,
MD†**

Provider ID: N/A
360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-DEC-20

**EIFRIG, CHARLES WILLIAM,
MD†**

Provider ID: N/A
360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-OCT-23

**EIFRIG, CHARLES WILLIAM,
MD†**

Provider ID: N/A
360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-SEP-18

**EIFRIG, CHARLES WILLIAM,
MD†**

Provider ID: N/A
360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-NOV-17

GUPTA, MRINALI, MD†

Provider ID: N/A
360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-NOV-20

GUPTA, MRINALI, MD†

Provider ID: N/A
360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-NOV-20

GUPTA, MRINALI, MD†

Provider ID: N/A
360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-NOV-20

HWANG, JOHN, MD†

Provider ID: N/A
360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-OCT-23

HWANG, JOHN, MD†

Provider ID: N/A
360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-NOV-17

HWANG, JOHN, MD†


Provider ID: N/A
360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA

C1. Lista de proveedores de la red Médico de atención especializada

92660
Effective as of 01-NOV-17

HWANG, JOHN, MD†


Provider ID: N/A

 360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-18

HWANG, JOHN, MD†


Provider ID: N/A

 360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-OCT-20

HWANG, JOHN, MD†


Provider ID: N/A

 360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-JUL-18

LIU, WENJING, MD†


Provider ID: N/A

 360 SAN MIGUEL DR STE
410
NEWPORT BEACH, CA
92660

Effective as of 01-OCT-22

LIU, WENJING, MD†


Provider ID: N/A

 360 SAN MIGUEL DR STE
410
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-20

MCGUIRE, DESMOND, MD†


Provider ID: N/A

 360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-DEC-20

MCGUIRE, DESMOND, MD†


Provider ID: N/A

 360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-NOV-17

MCGUIRE, DESMOND, MD†


Provider ID: N/A

 360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-14

MCGUIRE, DESMOND, MD†

Provider ID: N/A


 360 SAN MIGUEL DR STE
407
NEWPORT BEACH, CA
92660

Effective as of 01-NOV-17

OTOLARYNGOLOGY

BERTELSEN, CAITLIN, MD†


Provider ID: N/A

 400 NEWPORT CENTER
DR STE 302
NEWPORT BEACH, CA
92660

Effective as of 01-AUG-21

SCHWARTZ, MARISSA, MD†


Provider ID: N/A

 400 NEWPORT CENTER
DR STE 302
NEWPORT BEACH, CA

92660
Effective as of 01-AUG-21

SCHWARTZ, MARISSA, MD†


Provider ID: N/A

 400 NEWPORT CENTER
DR STE 302
NEWPORT BEACH, CA
92660

Effective as of 01-AUG-21

SCHWARTZ, MARISSA, MD†


Provider ID: N/A

 400 NEWPORT CENTER
DR STE 302
NEWPORT BEACH, CA
92660

Effective as of 01-AUG-21

SCHWARTZ, MARISSA, MD†


Provider ID: N/A

 400 NEWPORT CENTER
DR STE 302
NEWPORT BEACH, CA
92660

Effective as of 01-AUG-21

SCHWARTZ, MARISSA, MD†


Provider ID: N/A

 400 NEWPORT CENTER
DR STE 302
NEWPORT BEACH, CA
92660

Effective as of 01-AUG-21

WILLNER, AYAL, MD†

Provider ID: N/A

 400 NEWPORT CENTER
DR STE 302
NEWPORT BEACH, CA
92660

Effective as of 01-JUL-12

WILLNER, AYAL, MD†

Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

400 NEWPORT CENTER
DR STE 302
NEWPORT BEACH, CA
92660

Effective as of 01-JUL-12

PEDIATRIC PULMONOLOGY

HARRISON, AMY, MD

Provider ID: N/A

369 SAN MIGUEL DR STE
375
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-24

HARRISON, AMY, MD

Provider ID: N/A

369 SAN MIGUEL DR STE
375
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-24

HARRISON, AMY, MD

Provider ID: N/A

369 SAN MIGUEL DR STE
375
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-24

PEDIATRICS

HOLM, WILLIAM, MD†

Provider ID: N/A

1401 AVOCADO AVE STE
802
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-21

SAFER, TERRA, MD

Provider ID: N/A

360 SAN MIGUEL DR STE
105
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-23

PHYSICIANS ASSISTANT

CORTES, ELIZABETH, PA

Provider ID: N/A

360 SAN MIGUEL DR STE
501
NEWPORT BEACH, CA
92660

Effective as of 01-AUG-23

DYKHUIS, KATELYN, PA

Provider ID: N/A

1441 AVOCADO AVE STE
503
NEWPORT BEACH, CA
92660

Effective as of 01-JUN-24

DYKHUIS, KATELYN, PA

Provider ID: N/A

1441 AVOCADO AVE STE
503
NEWPORT BEACH, CA
92660

Effective as of 01-JUN-24

KANE, KARA, PA†

Provider ID: N/A

400 NEWPORT CENTER
DR STE 702
NEWPORT BEACH, CA
92660

Effective as of 01-OCT-22

KANE, KARA, PA†

Provider ID: N/A

1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA

92660

Effective as of 01-OCT-22

KAUFMAN, BRITNEY, PA†

Provider ID: N/A

240 NEWPORT CENTER DR
STE 105
NEWPORT BEACH, CA
92660

Effective as of 01-NOV-15

KLEINSMITH, DARIN, PA†

Provider ID: N/A

1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660

Effective as of 01-NOV-20

LUCATERO, JENNIFER, PA†

Provider ID: N/A

240 NEWPORT CENTER DR
STE 105
NEWPORT BEACH, CA
92660

Effective as of 01-NOV-18

MOUNTAIN, KELLY, PA

Provider ID: N/A

1441 AVOCADO AVE STE
503
NEWPORT BEACH, CA
92660

Effective as of 01-APR-23

NORMAN, STACY, PA

Provider ID: N/A

1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660

Effective as of 01-APR-23

NORMAN, STACY, PA

Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660

Effective as of 01-APR-23

NORMAN, STACY, PA

Provider ID: N/A

1441 AVOCADO AVE STE
806
NEWPORT BEACH, CA
92660

Effective as of 01-APR-23

STANDEL, SARAH, PA†

Provider ID: N/A

1401 AVOCADO AVE STE
703
NEWPORT BEACH, CA
92660*

Effective as of 01-JUL-19

PODIATRIST

HAUPT, DAVID, DPM†

Provider ID: N/A

400 NEWPORT CENTER
DR STE 706
NEWPORT BEACH, CA
92660

Effective as of 01-OCT-19

HAUPT, DAVID, DPM†

Provider ID: N/A

400 NEWPORT CENTER
DR STE 706
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-24

LEAMING, ROBERT, DPM

Provider ID: N/A

366 SAN MIGUEL DR STE
210
NEWPORT BEACH, CA

92660

Teleservice

Effective as of 01-FEB-24

LEAMING, ROBERT, DPM

Provider ID: N/A

366 SAN MIGUEL DR STE
210
NEWPORT BEACH, CA
92660

Teleservice

Effective as of 01-FEB-24

MERCADO, BRYANT, DPM

Provider ID: N/A

400 NEWPORT CENTER
DR STE 706
NEWPORT BEACH, CA
92660

Effective as of 01-AUG-23

PSYCHOLOGIST

KEALEY, TAMMY, PSYD

Provider ID: N/A

250 NEWPORT CENTER DR
STE M106
NEWPORT BEACH, CA
92660

Effective as of 01-JUN-23

KEALEY, TAMMY, PSYD

Provider ID: N/A

250 NEWPORT CENTER DR
STE M106
NEWPORT BEACH, CA
92660

Effective as of 01-JUN-23

KEALEY, TAMMY, PSYD

Provider ID: N/A

250 NEWPORT CENTER DR
STE M106
NEWPORT BEACH, CA
92660

Effective as of 01-JUN-23

KEALEY, TAMMY, PSYD

Provider ID: N/A

250 NEWPORT CENTER DR
STE M106
NEWPORT BEACH, CA
92660

Effective as of 01-JUN-23

LIM, DEAN, PSYD

Provider ID: N/A

250 NEWPORT CENTER DR
STE M106
NEWPORT BEACH, CA
92660

Effective as of 01-JUN-23

LIM, DEAN, PSYD

Provider ID: N/A

250 NEWPORT CENTER DR
STE M106
NEWPORT BEACH, CA
92660

Effective as of 01-JUN-23

LIM, DEAN, PSYD

Provider ID: N/A

250 NEWPORT CENTER DR
STE M106
NEWPORT BEACH, CA
92660

Effective as of 01-JUN-23

LIM, DEAN, PSYD

Provider ID: N/A

250 NEWPORT CENTER DR
STE M106
NEWPORT BEACH, CA
92660

Effective as of 01-JUN-23

RADIATION ONCOLOGY

KINI, VIJAYKUMAR, MD

**C1. Lista de proveedores de la red
Médico de atención especializada**

Provider ID: N/A

1605 AVOCADO AVE
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-24

RASHTIAN, AFSHIN, MD

Provider ID: N/A

1605 AVOCADO AVE
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-24

RASHTIAN, AFSHIN, MD

Provider ID: N/A

1605 AVOCADO AVE
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-24

SURGERY GENERAL

BONEV, VALENTINA, MD

Provider ID: N/A

1441 AVOCADO AVE STE 301
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-21

BONEV, VALENTINA, MD

Provider ID: N/A

1441 AVOCADO AVE STE 301
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-21

BONEV, VALENTINA, MD

Provider ID: N/A

1441 AVOCADO AVE STE 301
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-21

BONEV, VALENTINA, MD

Provider ID: N/A

1441 AVOCADO AVE STE 301
NEWPORT BEACH, CA
92660

Effective as of 01-FEB-21

BURNS, ROBERT, MD

Provider ID: N/A

400 NEWPORT CENTER
DR STE 500
NEWPORT BEACH, CA
92660

Effective as of 01-JUL-12

SURGERY PLASTIC

MUDGE, BRADLEY, MD†

Provider ID: N/A

240 NEWPORT CENTER DR
STE 105
NEWPORT BEACH, CA
92660

Teleservice

Effective as of 01-JUL-12

MUDGE, BRADLEY, MD†

Provider ID: N/A

240 NEWPORT CENTER DR
STE 105
NEWPORT BEACH, CA
92660

Teleservice

Effective as of 01-SEP-21

MUDGE, BRADLEY, MD†

Provider ID: N/A

240 NEWPORT CENTER DR
STE 105
NEWPORT BEACH, CA
92660

Teleservice

Effective as of 01-SEP-21

RICHLAND, BRANDON, MD

Provider ID: N/A

1441 AVOCADO AVE STE 710

NEWPORT BEACH, CA
92660

Effective as of 01-SEP-20

RICHLAND, BRANDON, MD

Provider ID: N/A

1441 AVOCADO AVE STE 710
NEWPORT BEACH, CA
92660

Effective as of 01-SEP-20

RICHLAND, BRANDON, MD

Provider ID: N/A

1441 AVOCADO AVE STE 710
NEWPORT BEACH, CA
92660

Effective as of 01-SEP-20

RICHLAND, BRANDON, MD

Provider ID: N/A

1441 AVOCADO AVE STE 710
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-24

ROSING, JAMES, MD

Provider ID: N/A

1441 AVOCADO AVE STE
708
NEWPORT BEACH, CA
92660

Effective as of 01-MAR-23

ROSING, JAMES, MD

Provider ID: N/A

1441 AVOCADO AVE STE
708
NEWPORT BEACH, CA
92660

Effective as of 01-MAR-23

UROLOGY

PHAN, CU, MD

Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

400 NEWPORT CENTER
DR STE 409
NEWPORT BEACH, CA
92660

Effective as of 01-MAY-12

PHAN, CU, MD

Provider ID: N/A

400 NEWPORT CENTER
DR STE 409
NEWPORT BEACH, CA
92660

Effective as of 01-JUL-12

PHAN, CU, MD

Provider ID: N/A

400 NEWPORT CENTER
DR STE 409
NEWPORT BEACH, CA
92660

Effective as of 01-APR-11

PHAN, CU, MD

Provider ID: N/A

400 NEWPORT CENTER
DR STE 409
NEWPORT BEACH, CA
92660

Effective as of 01-JAN-18

FAMILY PRACTICE

SPORTS MEDICINE

YIM, EUGENE, MD†

Provider ID: N/A

21115 NEWPORT COAST DR
NEWPORT COAST, CA
92657

Effective as of 01-JAN-21

ANESTHESIOLOGY

TOWNE, BROOKE, MD

Provider ID: N/A

3998 VISTA WAY STE C

OCEANSIDE, CA 92056

Effective as of 01-JAN-24

ANESTHESIOLOGY PAIN MANAGEMENT

BROWNLOW, ROY, MD

Provider ID: N/A

2125 S EL CAMINO REAL
STE 103
OCEANSIDE, CA 92054

Effective as of 01-JUL-24

COHEN, ZACHARY, MD

Provider ID: N/A

2125 S EL CAMINO REAL
STE 103
OCEANSIDE, CA 92054

Effective as of 01-SEP-24

COHEN, ZACHARY, MD†

Provider ID: N/A

3142 VISTA WAY STE 207
OCEANSIDE, CA 92056

Effective as of 01-OCT-21

COHEN, ZACHARY, MD†

Provider ID: N/A

3142 VISTA WAY STE 207
OCEANSIDE, CA 92056

Effective as of 01-NOV-21

COHEN, ZACHARY, MD†

Provider ID: N/A

3142 VISTA WAY STE 207
OCEANSIDE, CA 92056

Effective as of 01-OCT-21

DAIRO, BRANDON, MD†

Provider ID: N/A

3231 WARING CT STE K
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-JAN-23

FISHER, CASEY, MD

Provider ID: N/A

3142 VISTA WAY STE 207
OCEANSIDE, CA 92056

Effective as of 01-JUN-19

FISHER, CASEY, MD

Provider ID: N/A

2125 S EL CAMINO REAL
STE 103
OCEANSIDE, CA 92054

Effective as of 01-APR-24

FISHER, CASEY, MD

Provider ID: N/A

3142 VISTA WAY STE 207
OCEANSIDE, CA 92056

Effective as of 01-JUL-21

GUPTA, PRAGYA, MD

Provider ID: N/A

3231 WARING CT STE K
OCEANSIDE, CA 92056

Effective as of 01-AUG-24

LAWSON, ERIN, MD

Provider ID: N/A

3142 VISTA WAY STE 207
OCEANSIDE, CA 92056

Effective as of 01-JUL-23

LAWSON, ERIN, MD

Provider ID: N/A

3142 VISTA WAY STE 207
OCEANSIDE, CA 92056

Effective as of 01-DEC-23

PRABHU, NAMRATHA, MD

Provider ID: N/A

2125 S EL CAMINO REAL
STE 103
OCEANSIDE, CA 92054

Effective as of 01-APR-24

TOWNE, BROOKE, MD

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

3998 VISTA WAY STE C
OCEANSIDE, CA 92056
Effective as of 01-DEC-23

CARDIAC ELECTROPHYSIOLOGY

**PASHMFOROUSH,
MOHAMMAD, MD†**

Provider ID: N/A
2424 VISTA WAY STE 300
OCEANSIDE, CA 92054
Teleservice
Effective as of 01-JUN-21

CARDIOVASCULAR DISEASE

EL SHERIEF, KARIM, MD†

Provider ID: N/A
3230 WARING CT STE O
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

KABRA, ASHISH, MD†

Provider ID: N/A
3907 WARING RD STE 3
OCEANSIDE, CA 92056
Effective as of 01-AUG-22

**RAJAMANICKAM, ANITHA,
MD†**

Provider ID: N/A
3907 WARING RD STE 3
OCEANSIDE, CA 92056
Effective as of 01-AUG-22

**RAJAMANICKAM, ANITHA,
MD†**

Provider ID: N/A
3907 WARING RD STE 3
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

SAMANI, PARGOL, MD

Provider ID: N/A
3927 WARING RD STE C
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-DEC-23

SHEREV, DIMITRI, MD

Provider ID: N/A
3300 VISTA WAY STE B
OCEANSIDE, CA 92056
Effective as of 01-SEP-23

YUNG, AARON, MD†

Provider ID: N/A
2424 VISTA WAY STE 300
OCEANSIDE, CA 92054
Teleservice
Effective as of 01-JUN-21

CERTIFIED ACUPUNCTURIST

DUFFIELD, GARY, LAC

Provider ID: N/A
4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-SEP-24

DUFFIELD, GARY, LAC

Provider ID: N/A
4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-SEP-24

DUFFIELD, GARY, LAC

Provider ID: N/A
818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-SEP-24

DUFFIELD, GARY, LAC

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-SEP-24

DUFFIELD, GARY, LAC

Provider ID: N/A
517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-SEP-24

DUFFIELD, GARY, LAC

Provider ID: N/A
818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-SEP-24

GONZALEZ, ANDRES, LAC

Provider ID: N/A
3988 VISTA WAY STE G
OCEANSIDE, CA 92056
Effective as of 01-JUL-24

LIPTON, GREGORY, LAC

Provider ID: N/A
701 SEAGAZE DR STE B
OCEANSIDE, CA 92054
Effective as of 01-SEP-21

CERTIFIED NURSE PRACTITIONER

ANDOLINA, SARA, NP†

Provider ID: N/A
3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JAN-21


BAEK, KILHYO, NP

Provider ID: N/A
818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

BAEK, KILHYO, NP


Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24


BAEK, KILHYO, NP

Provider ID: N/A

 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-FEB-24


BALDWIN, ANDREA, NP†

Provider ID: N/A

 818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-JAN-24


BALDWIN, ANDREA, NP†

Provider ID: N/A

 818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-NOV-22


CHAMBERLIN, KALIANA, NP

Provider ID: N/A

 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-21


CHILAKA, SAMUEL, NP

Provider ID: N/A

 818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-JAN-24


CHRISTY, TYLER, NPF

Provider ID: N/A

 818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-JAN-24


CHRISTY, TYLER, NPF

Provider ID: N/A

 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24


CORY, ALLISON, NP

Provider ID: N/A

 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-FEB-24


CORY, ALLISON, NP

Provider ID: N/A

 818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-FEB-24


CORY, ALLISON, NP

Provider ID: N/A

 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24


EKLUND, BONNIE, NP

Provider ID: N/A

 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-FEB-24


EKLUND, BONNIE, NP

Provider ID: N/A

 818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-FEB-24

FISHER-GAMEZ, LORI, NP


Provider ID: N/A

 3905 WARING RD
OCEANSIDE, CA 92056
Teleservice

Effective as of 01-OCT-21


HALGEDAHL, YI TING, NP

Provider ID: N/A

 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-FEB-24


HALGEDAHL, YI TING, NP

Provider ID: N/A

 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

HALGEDAHL, YI TING, NP

Provider ID: N/A

 818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-JAN-24


HOWELL, AMANDA, NP

Provider ID: N/A

 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-24


HOWELL, AMANDA, NP

Provider ID: N/A

 818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-JAN-24


HOWELL, AMANDA, NP

Provider ID: N/A

 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24


HUERTA, STEVEN, NP

Provider ID: N/A

 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JUL-24


HUERTA, STEVEN, NP

Provider ID: N/A

 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JUL-24

HUERTA, STEVEN, NP

Provider ID: N/A

 818 PIER VIEW WAY
OCEANSIDE, CA 92054

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-JUL-24

KELLEHER, BRIDGET, NP

Provider ID: N/A

📍 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-APR-24

KELLEHER, BRIDGET, NP

Provider ID: N/A

📍 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-APR-24

KELLEHER, BRIDGET, NP

Provider ID: N/A

📍 818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-APR-24

LANG, LESLIE, NPF

Provider ID: N/A

📍 818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-MAY-24

NAVA, PETER, NP

Provider ID: N/A

📍 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

PATEMAN, CAROLYN, NP

Provider ID: N/A

📍 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

PRITZKER, JOELY, NP

Provider ID: N/A

📍 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-21

PRITZKER, JOELY, NP

Provider ID: N/A

📍 818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-FEB-24

PRITZKER, JOELY, NP

Provider ID: N/A

📍 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-FEB-24

QUINN, ERIN, NP

Provider ID: N/A

📍 3998 VISTA WAY STE C
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-MAY-21

SANTIAGO, AMANDA, NP

Provider ID: N/A

📍 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-21

SHAHBAZ, LINNAE, NPF

Provider ID: N/A

📍 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-MAR-24

SHAHBAZ, LINNAE, NPF

Provider ID: N/A

📍 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-MAR-24

WAGNER, TASIA, NP

Provider ID: N/A

📍 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-APR-24

WAGNER, TASIA, NP

Provider ID: N/A

📍 818 PIER VIEW WAY

OCEANSIDE, CA 92054
Effective as of 01-FEB-24

WAGNER, TASIA, NP

Provider ID: N/A

📍 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-APR-24

WINDHAM, SUZONNE, NP

Provider ID: N/A

📍 818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

CERTIFIED REGISTERED NURSE MIDWIFE

KELLY, KATHERINE, CRNM[†]

Provider ID: N/A

📍 2210 MESA DR STE 5
OCEANSIDE, CA 92054
Effective as of 01-JUL-22

LASKY, LANA, CRNM

Provider ID: N/A

📍 2210 MESA DR STE 5
OCEANSIDE, CA 92054
Effective as of 01-JUL-22

PERLMAN, TAMARA, CRNM[†]

Provider ID: N/A

📍 2210 MESA DR STE 5
OCEANSIDE, CA 92054
Effective as of 01-JUL-22

ZAMORA-FLYR, MARIA, CRNM

Provider ID: N/A

📍 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

ZAMORA-FLYR, MARIA, CRNM

Provider ID: N/A

📍 517 N HORNE ST

C1. Lista de proveedores de la red Médico de atención especializada

OCEANSIDE, CA 92054
Effective as of 01-JAN-24

ZAMORA-FLYR, MARIA, CRNM

Provider ID: N/A
3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JAN-24

CHIROPRACTOR

ANDREWS, BRAD, DC

Provider ID: N/A
619 CROUCH ST
OCEANSIDE, CA 92054
Effective as of 01-JUL-22

JU, NATHANIEL, DC†

Provider ID: N/A
517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JUL-22

JU, NATHANIEL, DC†

Provider ID: N/A
517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

LOVERN, JENNIFER, DC

Provider ID: N/A
517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-AUG-24

LOVERN, JENNIFER, DC

Provider ID: N/A
517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JUL-24

TRAINER, JASON, DC

Provider ID: N/A
3998 VISTA WAY STE G
OCEANSIDE, CA 92056

Effective as of 01-JUL-24

DERMATOLOGY

AGUIRRE, KRISTEN, MD†

Provider ID: N/A
3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JAN-20

AGUIRRE, KRISTEN, MD†

Provider ID: N/A
3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-FEB-24

ANGRA, KUNAL, MD†

Provider ID: N/A
3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-DEC-21

ANGRA, KUNAL, MD†

Provider ID: N/A
3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-NOV-20

BROWN, REGINA, MD

Provider ID: N/A
3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-AUG-24

BROWN, REGINA, MD

Provider ID: N/A
3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-SEP-24

BROWN, REGINA, MD

Provider ID: N/A
3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-SEP-24

GILBOA, RUTH, MD†

Provider ID: N/A
3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-AUG-20

GILBOA, RUTH, MD†

Provider ID: N/A
3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-MAR-12

ROSS, ANDREW, MD†

Provider ID: N/A
3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JUL-22

ROSS, ANDREW, MD†

Provider ID: N/A
3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-AUG-20

ROSS, ANDREW, MD†

Provider ID: N/A
3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-AUG-20

ROSS, ANDREW, MD†

Provider ID: N/A
3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-SEP-21


SAMADY, JOSEPH, MD†

Provider ID: N/A
3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-AUG-20


SAMADY, JOSEPH, MD†

Provider ID: N/A


C1. Lista de proveedores de la red Médico de atención especializada

 3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-APR-07


SAMADY, JOSEPH, MD†
Provider ID: N/A

 3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-MAR-12

SAMADY, JOSEPH, MD†
Provider ID: N/A


 3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

SAMADY, JOSEPH, MD†
Provider ID: N/A


 3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JUL-22

**SIRICHOTIRATANA, MELISSA,
MD†**


Provider ID: N/A

 3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JAN-23

THIELE, JENS, MD†
Provider ID: N/A

 3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

THIELE, JENS, MD†
Provider ID: N/A


 3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-MAR-12

THIELE, JENS, MD†
Provider ID: N/A


 3629 VISTA WAY
OCEANSIDE, CA 92056

Effective as of 01-JUL-22


THIELE, JENS, MD†
Provider ID: N/A

 3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-SEP-09


TSE, YARDY, MD†
Provider ID: N/A

 3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-SEP-21


TSE, YARDY, MD†
Provider ID: N/A

 3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-SEP-21


VENKAT, ARUN, MD†
Provider ID: N/A

 3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-AUG-20


VENKAT, ARUN, MD†
Provider ID: N/A

 3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-AUG-13

VENKAT, ARUN, MD†
Provider ID: N/A

 3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JUL-22

WONG, DARRYL, MD†
Provider ID: N/A

 3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JUL-22


WONG, DARRYL, MD†

Provider ID: N/A

 3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-MAR-12


ENDOCRINOLOGY REPRODUCTIVE

COFFLER, MICKEY, MD†
Provider ID: N/A


 3231 WARING CT STE M
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

FAMILY PRACTICE


MARTINEZ, LESLY, MD
Provider ID: N/A

 4700 N RIVER RD
OCEANSIDE, CA 92057*
Effective as of 01-JUL-24


MARTINEZ, LESLY, MD
Provider ID: N/A

 517 N HORNE ST
OCEANSIDE, CA 92054*
Effective as of 01-JUL-24


MARTINEZ, LESLY, MD
Provider ID: N/A

 818 PIER VIEW WAY
OCEANSIDE, CA 92054*
Effective as of 01-JUL-24

MATIAS, JULIE, DO
Provider ID: N/A

 3998 VISTA WAY STE 204
OCEANSIDE, CA 92056
Effective as of 01-JUN-24

PANICKER, CIBU, MD
Provider ID: N/A

 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-SEP-18

C1. Lista de proveedores de la red Médico de atención especializada

SNYDER, OLE, MD

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057*
Effective as of 01-JUN-24

SNYDER, OLE, MD

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054*
Effective as of 01-JUN-24

SNYDER, OLE, MD

Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054*
Effective as of 01-JUN-24

VIDAL, MONICA, DO†

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054*
Effective as of 01-JUL-24

VIDAL, MONICA, DO†

Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054*
Effective as of 01-JUL-24

VIDAL, MONICA, DO†

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057*
Effective as of 01-JUL-24

FAMILY PRACTICE SPORTS MEDICINE

STARK, ERIK, MD†

Provider ID: N/A

3905 WARING RD
OCEANSIDE, CA 92056
Teleservice

Effective as of 01-SEP-21

GASTROENTEROLOGY

CHIAO, HELLEN, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JUL-22

CHIAO, HELLEN, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

CHIAO, HELLEN, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

CHIAO, HELLEN, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

DEVEREAUX, CHRISTOPHER, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

DEVEREAUX, CHRISTOPHER, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

DEVEREAUX, CHRISTOPHER, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

DEVEREAUX, CHRISTOPHER, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JUL-22

DEVEREAUX, CHRISTOPHER, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-MAR-01

KROL, THOMAS, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JUN-99

KROL, THOMAS, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JUL-22

KROL, THOMAS, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

KROL, THOMAS, MD†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

NOVO, MEGAN, MD

Provider ID: N/A

3923 WARING RD STE A

C1. Lista de proveedores de la red Médico de atención especializada

OCEANSIDE, CA 92056
Teleservice
Effective as of 01-JUL-23

NOVO, MEGAN, MD

Provider ID: N/A
3923 WARING RD STE A
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-JUL-24

NOVO, MEGAN, MD

Provider ID: N/A
3923 WARING RD STE A
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-OCT-23

NOVO, MEGAN, MD

Provider ID: N/A
3923 WARING RD STE A
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-SEP-23

SHAD, JAVAID, MD†

Provider ID: N/A
3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

SHAD, JAVAID, MD†

Provider ID: N/A
3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JUL-22

SHAD, JAVAID, MD†

Provider ID: N/A
3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-DEC-07

SHAD, JAVAID, MD†

Provider ID: N/A
3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

SHAD, JAVAID, MD†

Provider ID: N/A
3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

SHIM, MICHAEL, MD†

Provider ID: N/A
3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

SHIM, MICHAEL, MD†

Provider ID: N/A
3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

SHIM, MICHAEL, MD†

Provider ID: N/A
3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JUL-22

SHIM, MICHAEL, MD†

Provider ID: N/A
3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-FEB-10

SHIM, MICHAEL, MD†

Provider ID: N/A
3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

VIERNES, MATTHEW, MD†

Provider ID: N/A
3923 WARING RD STE A
OCEANSIDE, CA 92056

Effective as of 01-JUL-22

VIERNES, MATTHEW, MD†

Provider ID: N/A
3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

VIERNES, MATTHEW, MD†

Provider ID: N/A
3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-SEP-01

VIERNES, MATTHEW, MD†

Provider ID: N/A
3923 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

GYNECOLOGIC ONCOLOGY

ESKANDER, RAMEZ, MD†

Provider ID: N/A
4002 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JUL-21

HEMATOLOGY / ONCOLOGY

SINGH, HIMANI, MD†

Provider ID: N/A
3617 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

SINGH, HIMANI, MD†

Provider ID: N/A
3617 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

C1. Lista de proveedores de la red Médico de atención especializada

INTERNAL MEDICINE

KHARADJIAN, TALAR, MD†

Provider ID: N/A

3300 VISTA WAY STE B
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-SEP-21

KHARADJIAN, TALAR, MD†

Provider ID: N/A

3300 VISTA WAY STE B
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-OCT-21

KHARADJIAN, TALAR, MD†

Provider ID: N/A

3300 VISTA WAY STE B
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-SEP-22

LIU, ANDREW, MD

Provider ID: N/A

3300 VISTA WAY STE B
OCEANSIDE, CA 92056

Effective as of 01-SEP-23

MACMURRAY, MICHAEL, MD

Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054

Effective as of 01-NOV-23

MOOLANI, UJJALA, MD

Provider ID: N/A

3300 VISTA WAY STE B
OCEANSIDE, CA 92056

Effective as of 01-MAY-23

PAROLY, WARREN, MD†

Provider ID: N/A

3617 VISTA WAY

OCEANSIDE, CA 92056

Effective as of 01-JAN-21

SHABANIAN, LEILA, MD

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057*

Effective as of 01-AUG-24

SHABANIAN, LEILA, MD

Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054*

Effective as of 01-MAY-24

INTERNAL MEDICINE

GERIATRIC MEDICINE

CHONG, ILSONG, MD

Provider ID: N/A

3998 VISTA WAY STE 204
OCEANSIDE, CA 92056

Effective as of 01-JUN-24

INTERVENTIONAL

CARDIOLOGY

MOUSSAVIAN, MEHRAN, DO†

Provider ID: N/A

605 CROUCH ST
OCEANSIDE, CA 92054

Effective as of 01-JUL-22

LICENSED CLINICAL

SOCIAL WORKER

ACOSTA, AZUCENA, LCSW

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054

Effective as of 01-JAN-24

ACOSTA, AZUCENA, LCSW

Provider ID: N/A

4700 N RIVER RD

OCEANSIDE, CA 92057

Effective as of 01-JAN-24

ACOSTA, AZUCENA, LCSW

Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054

Effective as of 01-JAN-24

CRUZ, VANESSA, LCSW

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057

Effective as of 01-JAN-24

CRUZ, VANESSA, LCSW

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054

Effective as of 01-JAN-24

CRUZ, VANESSA, LCSW

Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054

Effective as of 01-JAN-21

DOUGHERTY, CHRISTINE, LCSW

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054

Effective as of 01-JAN-24

DOUGHERTY, CHRISTINE, LCSW

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057

Effective as of 01-JAN-24

DOUGHERTY, CHRISTINE, LCSW

Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

GODINEZ, BRENDA, LCSW
Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

GODINEZ, BRENDA, LCSW
Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

GODINEZ, BRENDA, LCSW
Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

MENDEZ, ADRIANA, LCSW
Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

MENDEZ, ADRIANA, LCSW
Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

MENDEZ, ADRIANA, LCSW
Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

NEVILLE, MARGARET, LCSW
Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Teleservice

Effective as of 01-JAN-24

NEVILLE, MARGARET, LCSW
Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Teleservice

Effective as of 01-JAN-24

SANCHEZ, ADRIANA, LCSW
Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

SANCHEZ, ADRIANA, LCSW
Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

SANCHEZ, ADRIANA, LCSW
Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

SMITH, SONYA, LCSW
Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

SMITH, SONYA, LCSW
Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

SMITH, SONYA, LCSW
Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

WILSON, CARLENE, LCSW
Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

ZAPPONE, ALIDA, LCSW
Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Teleservice
Effective as of 01-JAN-24

ZAPPONE, ALIDA, LCSW
Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Teleservice
Effective as of 01-JAN-24

ZAPPONE, ALIDA, LCSW
Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Teleservice
Effective as of 01-JAN-24

MARRIAGE FAMILY THERAPIST

MEYERHOF, GRETA, MFT†
Provider ID: N/A


4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

MEYERHOF, GRETA, MFT†
Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

MEYERHOF, GRETA, MFT†
Provider ID: N/A


C1. Lista de proveedores de la red Médico de atención especializada

 818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

MEDICAL ONCOLOGY

PAROLY, WARREN, MD†


Provider ID: N/A

 3617 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

NEPHROLOGY


KHARADJIAN, TALAR, MD†

Provider ID: N/A

 3300 VISTA WAY STE B
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-JUL-21


KHARADJIAN, TALAR, MD†

Provider ID: N/A

 3300 VISTA WAY STE B
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-JUN-21


LIU, ANDREW, MD

Provider ID: N/A

 3300 VISTA WAY
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-JUL-24

LIU, ANDREW, MD

Provider ID: N/A

 3300 VISTA WAY STE B
OCEANSIDE, CA 92056
Effective as of 01-NOV-23

LIU, ANDREW, MD


Provider ID: N/A

 3300 VISTA WAY
OCEANSIDE, CA 92056

Teleservice
Effective as of 01-DEC-23


LIU, ANDREW, MD

Provider ID: N/A

 3300 VISTA WAY
OCEANSIDE, CA 92056*
Teleservice
Effective as of 01-OCT-23

LIU, ANDREW, MD


Provider ID: N/A

 3300 VISTA WAY STE B
OCEANSIDE, CA 92056
Effective as of 01-DEC-23

OBSTETRICS / GYNECOLOGY


BINDER, PRATIBHA, MD†

Provider ID: N/A

 4002 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JUL-21


EBRAHIMIADIB, TANNAZ, MD†

Provider ID: N/A

 3927 WARING RD STE D
OCEANSIDE, CA 92056
Effective as of 01-JAN-21


EBRAHIMIADIB, TANNAZ, MD†

Provider ID: N/A

 3927 WARING RD STE D
OCEANSIDE, CA 92056
Effective as of 01-JAN-19


MAZAREI, RAHELE, DO†

Provider ID: N/A

 3998 VISTA WAY STE C
OCEANSIDE, CA 92056
Effective as of 01-MAY-21


MAZAREI, RAHELE, DO†

Provider ID: N/A

 3998 VISTA WAY STE C
OCEANSIDE, CA 92056
Effective as of 01-MAR-20


SCHWEIKERT, SUZANNE, MD†

Provider ID: N/A

 2210 MESA DR STE 5
OCEANSIDE, CA 92054
Effective as of 01-JUL-22


SCHWEIKERT, SUZANNE, MD†

Provider ID: N/A

 2210 MESA DR STE 5
OCEANSIDE, CA 92054
Effective as of 01-APR-15


SUNTAY, BERK, MD†

Provider ID: N/A

 3998 VISTA WAY STE C
OCEANSIDE, CA 92056
Effective as of 01-MAY-21

SUNTAY, BERK, MD†


Provider ID: N/A

 3998 VISTA WAY STE C
OCEANSIDE, CA 92056
Effective as of 01-JUN-21

OPHTHALMOLOGY


JACOBSEN, BRADLEY, MD

Provider ID: N/A

 3231 WARING CT STE S
OCEANSIDE, CA 92056
Effective as of 01-JUL-23

JACOBSEN, BRADLEY, MD


Provider ID: N/A

 3231 WARING CT STE S
OCEANSIDE, CA 92056
Effective as of 01-OCT-23


NGUYEN, VINCENT, MD†

Provider ID: N/A


C1. Lista de proveedores de la red Médico de atención especializada

 3231 WARING CT STE S
OCEANSIDE, CA 92056
Effective as of 01-APR-20


NGUYEN, VINCENT, MD†
Provider ID: N/A

 3231 WARING CT STE S
OCEANSIDE, CA 92056
Effective as of 01-SEP-21


ROBINSON, FANE, MD†
Provider ID: N/A

 3231 WARING CT STE S
OCEANSIDE, CA 92056
Effective as of 01-FEB-10


SHEILS, CATHERINE, MD
Provider ID: N/A

 3637 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JAN-24


SMITH, MARK, MD†
Provider ID: N/A

 3231 WARING CT STE S
OCEANSIDE, CA 92056
Effective as of 01-FEB-10


SMITH, MARK, MD†
Provider ID: N/A

 3231 WARING CT STE S
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

SONG, DELU, MD
Provider ID: N/A


 3231 WARING CT STE S
OCEANSIDE, CA 92056
Effective as of 01-OCT-23

SONG, DELU, MD
Provider ID: N/A

 3231 WARING CT STE S
OCEANSIDE, CA 92056
Effective as of 01-DEC-23

SONG, DELU, MD


Provider ID: N/A

 3231 WARING CT STE S
OCEANSIDE, CA 92056
Effective as of 01-JUL-23

OPTOMETRIST


GEE, JENNIFER, OD

Provider ID: N/A

 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JUL-22


GEE, JENNIFER, OD

Provider ID: N/A

 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-24


GEE, JENNIFER, OD

Provider ID: N/A

 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JUL-22


GEE, JENNIFER, OD

Provider ID: N/A

 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24


KIM, MICHAEL, OD

Provider ID: N/A

 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JUL-22


KIM, MICHAEL, OD

Provider ID: N/A

 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-24


KIM, MICHAEL, OD

Provider ID: N/A

 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24


KIM, MICHAEL, OD

Provider ID: N/A

 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JUL-22


MORA, WENDY, OD

Provider ID: N/A

 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JUL-22


MORA, WENDY, OD

Provider ID: N/A

 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24


MORA, WENDY, OD

Provider ID: N/A

 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-24


MORA, WENDY, OD

Provider ID: N/A

 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JUL-22


RICH, RYAN, OD

Provider ID: N/A

 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JUL-22

RICH, RYAN, OD

Provider ID: N/A

 517 N HORNE ST

C1. Lista de proveedores de la red Médico de atención especializada

OCEANSIDE, CA 92054
Effective as of 01-JAN-24

RICH, RYAN, OD

Provider ID: N/A
4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

RICH, RYAN, OD

Provider ID: N/A
4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JUL-22

RING, ROBERT, OD†

Provider ID: N/A
3998 VISTA WAY STE 204
OCEANSIDE, CA 92056
Effective as of 01-SEP-22

TAM, EMILY, OD

Provider ID: N/A
4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JUL-22

TAM, EMILY, OD

Provider ID: N/A
4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

TAM, EMILY, OD

Provider ID: N/A
517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

TAM, EMILY, OD

Provider ID: N/A
517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JUL-22

OTOLARYNGOLOGY

CARROLL, SARAH, MD†

Provider ID: N/A
3907 WARING RD STE 1
OCEANSIDE, CA 92056
Effective as of 01-MAY-21

CARROLL, SARAH, MD†

Provider ID: N/A
3907 WARING RD STE 1
OCEANSIDE, CA 92056
Effective as of 01-OCT-21

CARROLL, SARAH, MD†

Provider ID: N/A
3907 WARING RD STE 1
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

JACOBS, ROBERT, MD†

Provider ID: N/A
3907 WARING RD STE 1A
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

JACOBS, ROBERT, MD†

Provider ID: N/A
3907 WARING RD STE 1A
OCEANSIDE, CA 92056
Effective as of 01-JUN-99

KUSHNARYOV, ANTON, MD

Provider ID: N/A
3909 WARING RD STE A
OCEANSIDE, CA 92056
Effective as of 01-APR-23

REISMAN, BRUCE, MD†

Provider ID: N/A
3907 WARING RD STE 1
OCEANSIDE, CA 92056
Effective as of 01-JUN-99

PEDIATRICS

CURLEY, EDWARD, MD†

Provider ID: N/A
2210 MESA DR STE 300
OCEANSIDE, CA 92054
Effective as of 01-FEB-15

RONAN, KEVIN, MD

Provider ID: N/A
4700 N RIVER RD
OCEANSIDE, CA 92057*
Effective as of 01-JUL-24

RONAN, KEVIN, MD

Provider ID: N/A
818 PIER VIEW WAY
OCEANSIDE, CA 92054*
Effective as of 01-JUL-24

PHYS MED/ REHAB PAIN MEDICINE

FISHER, CASEY, MD

Provider ID: N/A
2125 S EL CAMINO REAL
STE 103
OCEANSIDE, CA 92054
Effective as of 01-AUG-24

PHYSICAL MEDICINE / REHABILITATION

CURRY, JASON, MD†

Provider ID: N/A
3905 WARING RD
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-SEP-21

FISHER, CASEY, MD

Provider ID: N/A
3142 VISTA WAY STE 207
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

C1. Lista de proveedores de la red Médico de atención especializada

PERRIZO, NATHAN, DO

Provider ID: N/A

3998 VISTA WAY STE 108
OCEANSIDE, CA 92056

Effective as of 01-SEP-21

RICHARDSON, HENRY, MD†

Provider ID: N/A

3231 WARING CT STE K
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-MAY-23

PHYSICIANS ASSISTANT

BASIN, NATALIE, PA

Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-AUG-23

BASIN, NATALIE, PA

Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-DEC-23

BECKER, JANTIMA, PA

Provider ID: N/A

3629 VISTA WAY
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-APR-24

BRODSKY, DENNIS, PA

Provider ID: N/A

3142 VISTA WAY STE 207
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-FEB-22

COWAN, JOHN, PA†

Provider ID: N/A

3905 WARING RD
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-SEP-21

GLASSER, DANIEL, PA

Provider ID: N/A

605 CROUCH ST BLDG C
OCEANSIDE, CA 92054

Effective as of 01-MAY-24

JOHNSON, RYAN, PA

Provider ID: N/A

3905 WARING RD
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-JUN-24

PAUL, ROBERT, PA†

Provider ID: N/A

3142 VISTA WAY STE 207
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-FEB-22

POLLINGTON, CHRISTOPHER, PA

Provider ID: N/A

3905 WARING RD
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-OCT-23

RAMOS, ELENA, PA

Provider ID: N/A

605 CROUCH ST BLDG C
OCEANSIDE, CA 92054

Effective as of 01-AUG-23

SKULSKY, EVA, PA†

Provider ID: N/A

3923 WARING RD STE A
OCEANSIDE, CA 92056

Effective as of 01-JAN-21

THOMAS, ROGER, PA

Provider ID: N/A

3142 VISTA WAY STE 207
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-JUL-23

WALLACE, STEPHANIE, PA

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057

Effective as of 01-FEB-24

WRIGHT, DEREK, PA

Provider ID: N/A

3231 WARING CT STE K
OCEANSIDE, CA 92056

Effective as of 01-AUG-23

WRIGHT, DEREK, PA

Provider ID: N/A

3231 WARING CT STE K
OCEANSIDE, CA 92056

Effective as of 01-APR-24

PODIATRIST

BOBICK, BRIAN, DPM†

Provider ID: N/A

3905 WARING RD
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-SEP-21

BOBICK, BRIAN, DPM†

Provider ID: N/A

3905 WARING RD
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-SEP-21

BROOKS, JEFFREY, DPM

Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

3230 WARING CT STE M
OCEANSIDE, CA 92056
Effective as of 01-APR-21

HAN, JAMES, DPM

Provider ID: N/A

2119 S EL CAMINO REAL
OCEANSIDE, CA 92054
Effective as of 01-DEC-11

SPRINGER, DEWAIN, DPM†

Provider ID: N/A

2191 S EL CAMINO REAL
STE 101
OCEANSIDE, CA 92054
Effective as of 01-JUL-18

PSYCHIATRY

BELL, JENNIFER, DO

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-FEB-24

BELL, JENNIFER, DO

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-FEB-24

CHAUDHRI, YASHWANT, MD†

Provider ID: N/A

520 N COAST HWY STE 103
OCEANSIDE, CA 92054
Effective as of 01-AUG-22

CHAUDHRI, YASHWANT, MD†

Provider ID: N/A

520 N COAST HWY STE 103
OCEANSIDE, CA 92054
Effective as of 01-AUG-22

CHRISTIANSON, WARREN, DO

Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-AUG-21

CHRISTIANSON, WARREN, DO

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-AUG-21

CHRISTIANSON, WARREN, DO

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-AUG-21

CHRISTIANSON, WARREN, DO

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-AUG-21

CHRISTIANSON, WARREN, DO

Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-AUG-21

CHRISTIANSON, WARREN, DO

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-AUG-21

PATEL, MITESH, MD

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

PATEL, MITESH, MD

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Teleservice

Effective as of 01-JAN-24

PATEL, MITESH, MD

Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Teleservice

Effective as of 01-JAN-24

PATEL, MITESH, MD

Provider ID: N/A

4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

PATEL, MITESH, MD

Provider ID: N/A

517 N HORNE ST
OCEANSIDE, CA 92054
Teleservice
Effective as of 01-JAN-24

PATEL, MITESH, MD

Provider ID: N/A

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Teleservice
Effective as of 01-JAN-24

PULMONARY DISEASES

CORONA, FRANK, MD

Provider ID: N/A

3907 WARING RD STE 2
OCEANSIDE, CA 92056
Effective as of 01-AUG-23

CORONA, FRANK, MD

Provider ID: N/A

3231 WARING CT STE D
OCEANSIDE, CA 92056
Effective as of 01-JUN-99

VISEROI, MARIUS, MD†

Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

3231 WARING CT STE D
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

YAMANAKA, MARK, MD

Provider ID: N/A

3907 WARING RD STE 2
OCEANSIDE, CA 92056
Effective as of 01-AUG-23

RADIATION ONCOLOGY

HOOPES, DAVID, MD

Provider ID: N/A

4002 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-DEC-23

RASH, DOMINIQUE, MD

Provider ID: N/A

4002 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-DEC-23

URBANIC, JAMES, MD

Provider ID: N/A

4002 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-DEC-23

REGISTERED PHYSICAL THERAPIST

AMBROSE, CHRISTOPHER, PT

Provider ID: N/A

467 COLLEGE BLVD STE 6
OCEANSIDE, CA 92057
Effective as of 01-DEC-21

BOUCHARD, REID, PT

Provider ID: N/A

3905 WARING RD
OCEANSIDE, CA 92056
Effective as of 01-OCT-21

DOULL, MATTHEW, PT

Provider ID: N/A

3905 WARING RD
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-JUN-23

FARRAR, COURTNEY, PT†

Provider ID: N/A

3231 WARING CT STE K
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-JAN-23

FARRAR, COURTNEY, PT†

Provider ID: N/A

3231 WARING CT STE K
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-JAN-23

GARBER, MARC, PT

Provider ID: N/A

3905 WARING RD
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-OCT-21

LANGIS, TANYA, PT

Provider ID: N/A

3905 WARING RD
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-OCT-21

MCGEE, JACQUELINE, PT

Provider ID: N/A

467 COLLEGE BLVD STE 6
OCEANSIDE, CA 92057
Effective as of 01-DEC-21

OSORIO, SANTIAGO, PT

Provider ID: N/A

2424 VISTA WAY STE 120

OCEANSIDE, CA 92054
Effective as of 01-SEP-22

PENNINGTON, JENNIFER, PT

Provider ID: N/A

3905 WARING RD
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-OCT-21

TAMAYO, SYDNIE, PT

Provider ID: N/A

3905 WARING RD
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-OCT-23

WILSON, JENNIFER, PT

Provider ID: N/A

3905 WARING RD
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-OCT-21

RHEUMATOLOGY

BEJKO, ETELEVA, MD

Provider ID: N/A

3998 VISTA WAY STE E
OCEANSIDE, CA 92056
Effective as of 01-JAN-24

BRION, PAUL, MD

Provider ID: N/A

3998 VISTA WAY STE E
OCEANSIDE, CA 92056
Effective as of 01-JUL-24

BRION, PAUL, MD

Provider ID: N/A

3998 VISTA WAY STE E
OCEANSIDE, CA 92056
Effective as of 01-FEB-24

SURGERY COLON

C1. Lista de proveedores de la red Médico de atención especializada

SURGERY

NASSERY, KRISTEN, MD†

Provider ID: N/A

3601 VISTA WAY STE 203
OCEANSIDE, CA 92056

Effective as of 01-JAN-21

NASSERY, KRISTEN, MD†

Provider ID: N/A

3601 VISTA WAY STE 203
OCEANSIDE, CA 92056

Effective as of 01-AUG-24

NASSERY, KRISTEN, MD†

Provider ID: N/A

3601 VISTA WAY STE 203
OCEANSIDE, CA 92056

Effective as of 01-JUL-24

NASSERY, KRISTEN, MD†

Provider ID: N/A

3601 VISTA WAY STE 203
OCEANSIDE, CA 92056

Effective as of 01-SEP-21

SURGERY GENERAL

DEEMER, ANDREW, MD†

Provider ID: N/A

3601 VISTA WAY STE 203
OCEANSIDE, CA 92056

Effective as of 01-SEP-21

DEEMER, ANDREW, MD†

Provider ID: N/A

3601 VISTA WAY STE 203
OCEANSIDE, CA 92056

Effective as of 01-JUL-24

DEEMER, ANDREW, MD†

Provider ID: N/A

3601 VISTA WAY STE 203
OCEANSIDE, CA 92056

Effective as of 01-JAN-21

JAMSHIDI-NEZHAD, MOHAMMAD, DO

Provider ID: N/A

3601 VISTA WAY STE 203
OCEANSIDE, CA 92056

Effective as of 01-JAN-21

JAMSHIDI-NEZHAD, MOHAMMAD, DO

Provider ID: N/A

3601 VISTA WAY STE 203
OCEANSIDE, CA 92056

Effective as of 01-JUL-24

JAMSHIDI-NEZHAD, MOHAMMAD, DO

Provider ID: N/A

3601 VISTA WAY STE 203
OCEANSIDE, CA 92056

Effective as of 01-AUG-24

SEIDEN, GRANT, MD†

Provider ID: N/A

3905 WARING RD
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-SEP-21

WAKILY, HUSSNA, MD†

Provider ID: N/A

3601 VISTA WAY STE 203
OCEANSIDE, CA 92056

Effective as of 01-SEP-21

WAKILY, HUSSNA, MD†

Provider ID: N/A

3601 VISTA WAY STE 203
OCEANSIDE, CA 92056

Effective as of 01-AUG-24

WAKILY, HUSSNA, MD†

Provider ID: N/A

3601 VISTA WAY STE 203

OCEANSIDE, CA 92056
Effective as of 01-JUL-24

WAKILY, HUSSNA, MD†

Provider ID: N/A

3601 VISTA WAY STE 203
OCEANSIDE, CA 92056

Effective as of 01-JAN-21

SURGERY GENERAL VASCULAR

DEEMER, ANDREW, MD†

Provider ID: N/A

3601 VISTA WAY STE 203
OCEANSIDE, CA 92056

Effective as of 01-AUG-24

SURGERY HAND

DAUGHERTY, DAVID, MD†

Provider ID: N/A

3905 WARING RD
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-SEP-21

HARTMAN, ANDREW, MD†

Provider ID: N/A

3905 WARING RD
OCEANSIDE, CA 92056

Teleservice

Effective as of 01-SEP-21

SEIDEN, GRANT, MD†

Provider ID: N/A

3905 WARING RD
OCEANSIDE, CA 92056

Teleservice


Effective as of 01-SEP-21

SURGERY ORTHOPEDIC


AMORY, DAVID, MD†

C1. Lista de proveedores de la red Médico de atención especializada


Provider ID: N/A

 3905 WARING RD
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-SEP-21


DAUGHERTY, DAVID, MD†

Provider ID: N/A
 3905 WARING RD
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-SEP-21


KANE, NORMAN, MD†

Provider ID: N/A
 3905 WARING RD
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-SEP-21

KANE, NORMAN, MD†


Provider ID: N/A
 3905 WARING RD
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-SEP-21

STARK, ERIK, MD†

Provider ID: N/A
 3905 WARING RD
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-SEP-21


SURGERY THORACIC

WU, DARRELL, MD†


Provider ID: N/A
 3156 VISTA WAY STE 100
OCEANSIDE, CA 92056
Effective as of 01-JUL-21

UROLOGY


BOONJINDASUP, AARON, MD

Provider ID: N/A
 3907 WARING RD STE 4
OCEANSIDE, CA 92056
Effective as of 01-SEP-21


FRASIER, BRADLEY, MD†

Provider ID: N/A
 3609 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JAN-21


FRASIER, BRADLEY, MD†

Provider ID: N/A
 3609 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JUN-99


FRASIER, BRADLEY, MD†

Provider ID: N/A
 3609 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-SEP-21


GUERENA, MICHAEL, MD†

Provider ID: N/A
 3609 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-SEP-21


GUERENA, MICHAEL, MD†

Provider ID: N/A
 3609 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JUN-99

GUERENA, MICHAEL, MD†


Provider ID: N/A
 3609 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

PHILLIPS, JASON, MD†


Provider ID: N/A
 3907 WARING RD STE 4

OCEANSIDE, CA 92056
Effective as of 01-SEP-21


SHAPIRO, ROBERT, MD

Provider ID: N/A
 3609 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-AUG-23


VILCHIS, CAROLINE, MD†

Provider ID: N/A
 3609 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

VILCHIS, CAROLINE, MD†


Provider ID: N/A
 3609 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

VILCHIS, CAROLINE, MD†

Provider ID: N/A
 3609 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-DEC-13


CERTIFIED NURSE PRACTITIONER

ADDO, BELINDA, NP†

Provider ID: N/A
 524 W 4TH ST STE B
PERRIS, CA 92570
Effective as of 01-OCT-22

CHIROPRACTOR

JIMENEZ, CLARIBEL, DC

Provider ID: N/A
 1675 N PERRIS BLVD STE G1
PERRIS, CA 92571*
Effective as of 01-OCT-24

SCHRIEFER, NOAH, DC

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

1675 N PERRIS BLVD STE G1
PERRIS, CA 92571
Effective as of 01-MAY-24

TRAINER, JASON, DC†

Provider ID: N/A

1675 N PERRIS BLVD STE G1
PERRIS, CA 92571
Effective as of 01-JUL-22

NEUROLOGY CHILD

ARCA, CHRIS, MD

Provider ID: N/A

215 W 4TH ST
PERRIS, CA 92570
Effective as of 01-NOV-23

PEDIATRICS

LEE, ALAN, MD†

Provider ID: N/A

215 W 4TH ST
PERRIS, CA 92570*
Effective as of 01-AUG-20

LEE, ALAN, MD†

Provider ID: N/A

215 W 4TH ST
PERRIS, CA 92570*
Effective as of 01-AUG-20

PREVENTATIVE MEDICINE ANESTHESIOLOGY PAIN GENERAL MANAGEMENT

LAFONTANT, JEAN, MD†

Provider ID: N/A

524 W 4TH ST STE B
PERRIS, CA 92570
Effective as of 01-SEP-22

LAFONTANT, JEAN, MD†

Provider ID: N/A

524 W 4TH ST STE B

PERRIS, CA 92570

Effective as of 01-JAN-21

LAFONTANT, JEAN, MD†

Provider ID: N/A

524 W 4TH ST STE B
PERRIS, CA 92570

Effective as of 01-MAY-24

LAFONTANT, JEAN, MD†

Provider ID: N/A

524 W 4TH ST STE B
PERRIS, CA 92570

Effective as of 01-SEP-22

ADDICTIVE MEDICINE

GILL, MANPREET, MD

Provider ID: N/A

13010 POWAY RD
POWAY, CA 92064
Effective as of 01-JUN-24

ANESTHESIOLOGY

PRASAD, RUPA, MD†

Provider ID: N/A

15611 POMERADO RD STE
505
POWAY, CA 92064

Teleservice

Effective as of 01-NOV-23

ANESTHESIOLOGY PAIN MANAGEMENT

BROWNLOW, ROY, MD

Provider ID: N/A

15725 POMERADO RD STE
201
POWAY, CA 92064

Effective as of 01-JUL-24

BROWNLOW, ROY, MD

Provider ID: N/A

15725 POMERADO RD STE
201

POWAY, CA 92064

Effective as of 01-JUL-24

COHEN, ZACHARY, MD

Provider ID: N/A

15725 POMERADO RD STE
201

POWAY, CA 92064

Effective as of 01-JAN-23

COHEN, ZACHARY, MD†

Provider ID: N/A

15725 POMERADO RD STE
210

POWAY, CA 92064

Effective as of 01-JAN-24

FISHER, CASEY, MD

Provider ID: N/A

15725 POMERADO RD STE
210

POWAY, CA 92064

Effective as of 01-APR-24

FISHER, CASEY, MD

Provider ID: N/A

15725 POMERADO RD STE
201

POWAY, CA 92064

Effective as of 01-APR-23

PRASAD, RUPA, MD†

Provider ID: N/A

15611 POMERADO RD STE
505

POWAY, CA 92064

Teleservice

Effective as of 01-NOV-21

CARDIOVASCULAR DISEASE

NANAVATI, VIMAL, MD

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

☐ 15706 POMERADO RD STE
104
POWAY, CA 92064

Effective as of 01-FEB-23

SHEREV, DIMITRI, MD

Provider ID: N/A

☐ 15708 POMERADO RD STE
N-205
POWAY, CA 92064

Effective as of 01-SEP-23

ZAKOV, KAMEN, MD†

Provider ID: N/A

☐ 15611 POMERADO RD STE
400
POWAY, CA 92064

Effective as of 01-SEP-22

CERTIFIED NURSE PRACTITIONER

BISHOP, LESLIE, NP†

Provider ID: N/A

☐ 15611 POMERADO RD STE
505
POWAY, CA 92064

Teleservice

Effective as of 01-JAN-21

WILLIAMS, SHANTRICE, NP

Provider ID: N/A

☐ 13010 POWAY RD
POWAY, CA 92064*

Effective as of 01-FEB-24

WRIGHT, KIMBERLY, NP†

Provider ID: N/A

☐ 15611 POMERADO RD STE
400
POWAY, CA 92064

Effective as of 01-JAN-21

CLINICAL

NEUROPSYCHOLOGIST

KAUP, ALLISON, PhD†

Provider ID: N/A

☐ 15611 POMERADO RD STE
505
POWAY, CA 92064

Teleservice

Effective as of 01-MAR-21

DERMATOLOGY

ARMSTRONG, PATRICK, MD

Provider ID: N/A

☐ 15721 POMERADO RD STE
300
POWAY, CA 92064

Effective as of 01-MAR-24

BROGAN, JACQUELINE, MD

Provider ID: N/A

☐ 15725 POMERADO RD STE
102
POWAY, CA 92064

Effective as of 01-FEB-24

CELANO, NICHOLAS, MD

Provider ID: N/A

☐ 15725 POMERADO RD STE
102
POWAY, CA 92064

Effective as of 01-NOV-23

CELANO, NICHOLAS, MD

Provider ID: N/A

☐ 15725 POMERADO RD STE
102
POWAY, CA 92064

Effective as of 01-JUL-24

CELANO, NICHOLAS, MD

Provider ID: N/A

☐ 15725 POMERADO RD STE
102
POWAY, CA 92064

Effective as of 01-JAN-24

CHIANG, JENNIFER, MD

Provider ID: N/A

☐ 15725 POMERADO RD STE
102
POWAY, CA 92064

Effective as of 01-JAN-24

GONZALEZ, JOSE, MD

Provider ID: N/A

☐ 15725 POMERADO RD STE
102
POWAY, CA 92064

Effective as of 01-FEB-24

LIN, SHINKO, MD

Provider ID: N/A

☐ 15725 POMERADO RD STE
102
POWAY, CA 92064

Effective as of 01-APR-24

LIN, SHINKO, MD

Provider ID: N/A

☐ 15725 POMERADO RD STE
102
POWAY, CA 92064

Effective as of 01-MAR-24

NELSON, AISLYN, MD

Provider ID: N/A

☐ 15725 POMERADO RD STE
102
POWAY, CA 92064

Effective as of 01-FEB-24

SATEESH, BROOKE, MD

Provider ID: N/A

☐ 15725 POMERADO RD STE
102
POWAY, CA 92064

Effective as of 01-JAN-24

TYAGI, ABHILASHA, MD

CI. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

15725 POMERADO RD STE
102
POWAY, CA 92064
Effective as of 01-JAN-24

UEBELHOER, NATHAN, DO†

Provider ID: N/A

15725 POMERADO RD STE
102
POWAY, CA 92064
Effective as of 01-JAN-24

ENDOCRINOLOGY

METABOLISM DIABETES

SCHNEIDER, DARIUS, MD

Provider ID: N/A

15525 POMERADO RD STE
A1
POWAY, CA 92064
Effective as of 01-JAN-23

SCHNEIDER, DARIUS, MD

Provider ID: N/A

15525 POMERADO RD STE
A1
POWAY, CA 92064
Effective as of 01-DEC-22

FAMILY PRACTICE

FLINN, SCOTT, MD†

Provider ID: N/A

15611 POMERADO RD STE
400
POWAY, CA 92064
Effective as of 01-JAN-21

NAJAND, SADAF, MD†

Provider ID: N/A

15611 POMERADO RD STE
400
POWAY, CA 92064
Effective as of 01-SEP-22

PATEL, RAKESH, MD

Provider ID: N/A

13010 POWAY RD
POWAY, CA 92064
Effective as of 01-AUG-24

WHITE, KERI, MD†

Provider ID: N/A

15611 POMERADO RD STE
400
POWAY, CA 92064
Effective as of 01-SEP-22

GASTROENTEROLOGY

ZAKKO, MARAM, MD†

Provider ID: N/A

15611 POMERADO RD STE
400
POWAY, CA 92064
Effective as of 01-JAN-21

INTERNAL MEDICINE

CHEN, ANDREW, MD†

Provider ID: N/A

15611 POMERADO RD STE
400
POWAY, CA 92064
Effective as of 01-SEP-22

MOOLANI, UJJALA, MD

Provider ID: N/A

15708 POMERADO RD STE
N-205
POWAY, CA 92064
Effective as of 01-MAY-23

REDDY, SMITHA, MD†

Provider ID: N/A

15725 POMERADO RD STE
117
POWAY, CA 92064
Effective as of 01-JAN-21

THAPER, MOHINDERPAL, MD†

Provider ID: N/A

15611 POMERADO RD STE
575
POWAY, CA 92064
Effective as of 01-JAN-21

INTERVENTIONAL CARDIOLOGY

BAYAT, HAMED, MD†

Provider ID: N/A

15611 POMERADO RD STE
400
POWAY, CA 92064
Effective as of 01-SEP-22

MULVIHILL, DANIEL, MD†

Provider ID: N/A

15611 POMERADO RD FL 4
POWAY, CA 92064
Effective as of 01-SEP-22

VANICHSARN, CHRISTOPHER, MD†

Provider ID: N/A

15611 POMERADO RD STE
400
POWAY, CA 92064
Effective as of 01-MAR-24

LICENSED CLINICAL SOCIAL WORKER

BELINSKY, MARIA, LCSW

Provider ID: N/A

13010 POWAY RD
POWAY, CA 92064*
Effective as of 01-FEB-24

NEPHROLOGY

AL-DAHMAN, ZAID, MD

Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

15708 POMERADO RD STE
N-205
POWAY, CA 92064
Effective as of 01-MAY-23

BOISKIN, MARK, MD†

Provider ID: N/A

15708 POMERADO RD STE
N-205
POWAY, CA 92064
Effective as of 01-JAN-16

BOISKIN, MARK, MD†

Provider ID: N/A

15708 POMERADO RD STE
N-205
POWAY, CA 92064
Effective as of 01-JAN-21

BOISKIN, MARK, MD†

Provider ID: N/A

15708 POMERADO RD STE
N-205
POWAY, CA 92064
Effective as of 01-JUL-22

BOISKIN, MARK, MD

Provider ID: N/A

15644 POMERADO RD STE
104
POWAY, CA 92064
Effective as of 01-JAN-24

GREENSTEIN, JOSHUA, MD†

Provider ID: N/A

15708 POMERADO RD STE
N-205
POWAY, CA 92064
Effective as of 01-JUL-22

NEYAZ, MOHAMMED, DO

Provider ID: N/A

15708 POMERADO RD STE
N-205
POWAY, CA 92064

Effective as of 01-NOV-23

NEUROLOGY

DELANEY, MICHAEL, MD

Provider ID: N/A

15611 POMERADO RD STE
580
POWAY, CA 92064

Teleservice

Effective as of 01-JUN-24

DELANEY, MICHAEL, MD†

Provider ID: N/A

15611 POMERADO RD STE
505
POWAY, CA 92064

Teleservice

Effective as of 01-JAN-21

FARNSWORTH, WILLIAM, MD

Provider ID: N/A

15611 POMERADO RD STE
580
POWAY, CA 92064

Effective as of 01-SEP-24

FARNSWORTH, WILLIAM, MD

Provider ID: N/A

15611 POMERADO RD STE
580
POWAY, CA 92064

Effective as of 01-JUN-24

FARNSWORTH, WILLIAM, MD

Provider ID: N/A

15611 POMERADO RD STE
580
POWAY, CA 92064

Effective as of 01-JUN-24

HAMILTON, ROSS, MD

Provider ID: N/A

15611 POMERADO RD STE
580

POWAY, CA 92064*
Effective as of 01-OCT-24

HO, GILBERT, MD

Provider ID: N/A

15708 POMERADO RD STE
N103
POWAY, CA 92064*
Effective as of 01-OCT-23

LUHAR, RIYA, DO

Provider ID: N/A

15611 POMERADO RD STE
505
POWAY, CA 92064

Teleservice

Effective as of 01-JAN-23

LUHAR, RIYA, DO

Provider ID: N/A

15611 POMERADO RD STE
580
POWAY, CA 92064

Effective as of 01-JUN-24

SAVANI, AMAN, MD

Provider ID: N/A

15611 POMERADO RD STE
580
POWAY, CA 92064

Effective as of 01-JUN-24

WANG, CHUNYANG, MD†

Provider ID: N/A

15611 POMERADO RD STE
505
POWAY, CA 92064

Teleservice

Effective as of 01-JAN-24

WANG, ANCHI, MD†

Provider ID: N/A

15611 POMERADO RD STE
505
POWAY, CA 92064

**C1. Lista de proveedores de la red
Médico de atención especializada**

Effective as of 01-JAN-21

WANG, CHUNYANG, MD

Provider ID: N/A

15611 POMERADO RD STE
580
POWAY, CA 92064

Effective as of 01-MAY-24

WANG, CHUNYANG, MD†

Provider ID: N/A

15611 POMERADO RD STE
505
POWAY, CA 92064

Teleservice

Effective as of 01-NOV-23

**OBSTETRICS /
GYNECOLOGY**

FAN, LI, MD†

Provider ID: N/A

15525 POMERADO RD STE
C1
POWAY, CA 92064*

Effective as of 01-NOV-21

OPHTHALMOLOGY

LOZIER, JEFFREY, MD†

Provider ID: N/A

15611 POMERADO RD STE
400
POWAY, CA 92064

Effective as of 01-SEP-22

OPTOMETRIST

KIM, MICHELLE, OD

Provider ID: N/A

15611 POMERADO RD STE
400
POWAY, CA 92064

Effective as of 01-SEP-22

**PHYS MED/ REHAB PAIN
MEDICINE**

FISHER, CASEY, MD

Provider ID: N/A

15725 POMERADO RD STE
210
POWAY, CA 92064

Effective as of 01-AUG-24

**PHYSICAL MEDICINE /
REHABILITATION**

BULLOCK, ANDREW, DO†

Provider ID: N/A

15644 POMERADO RD STE
204
POWAY, CA 92064

Effective as of 01-JAN-21

BULLOCK, ANDREW, DO†

Provider ID: N/A

15644 POMERADO RD STE
204
POWAY, CA 92064

Effective as of 01-SEP-22

BULLOCK, ANDREW, DO†

Provider ID: N/A

15644 POMERADO RD STE
204
POWAY, CA 92064

Effective as of 01-JUL-22

FISHER, CASEY, MD

Provider ID: N/A

15725 POMERADO RD STE
210
POWAY, CA 92064

Effective as of 01-JAN-21

TAHAEI, SEYED, MD†

Provider ID: N/A

15708 POMERADO RD STE

N-207

POWAY, CA 92064

Effective as of 01-OCT-22

PHYSICIANS ASSISTANT

ASTOURIAN, PATRICK, PA†

Provider ID: N/A

15725 POMERADO RD STE
117
POWAY, CA 92064

Teleservice

Effective as of 01-SEP-22

CAMERON, KENDALL, PA

Provider ID: N/A

15725 POMERADO RD STE
117
POWAY, CA 92064

Teleservice

Effective as of 01-AUG-22

CHATFIELD, ALEXANDRA, PA†

Provider ID: N/A

15611 POMERADO RD STE
525
POWAY, CA 92064

Effective as of 01-FEB-21

GRINDLE, SILVIA, PA†

Provider ID: N/A

13525 MIDLAND RD STE F
POWAY, CA 92064

Effective as of 01-JAN-21

HUANG, STEPHANIE, PA†

Provider ID: N/A

15611 POMERADO RD STE
505
POWAY, CA 92064

Effective as of 01-JAN-21

RAHIM, ARIANNA, PA

Provider ID: N/A

15611 POMERADO RD STE

C1. Lista de proveedores de la red Médico de atención especializada

505
POWAY, CA 92064
Effective as of 01-OCT-23

WEBB, SHANNON, PA

Provider ID: N/A
☑ 15725 POMERADO RD STE
102
POWAY, CA 92064
Teleservice
Effective as of 01-MAY-23

PODIATRIST

BRAZIER, SETH, DPM

Provider ID: N/A
☑ 15706 POMERADO RD STE
102
POWAY, CA 92064
Effective as of 01-SEP-24

CHU, ANDREW, DPM†

Provider ID: N/A
☑ 15706 POMERADO RD STE
S-102
POWAY, CA 92064
Effective as of 01-NOV-21

HAN, KYOUNG, DPM

Provider ID: N/A
☑ 15706 POMERADO RD STE
102
POWAY, CA 92064
Effective as of 01-NOV-21

NEGRON, RICARDO, DPM

Provider ID: N/A
☑ 13010 POWAY RD
POWAY, CA 92064*
Effective as of 01-JAN-21

READ, TRENTON, DPM

Provider ID: N/A
☑ 15706 POMERADO RD STE
102

POWAY, CA 92064
Effective as of 01-APR-23

SMITH, COLLIN, DPM†

Provider ID: N/A
☑ 15706 POMERADO RD STE
S102
POWAY, CA 92064
Effective as of 01-DEC-21

SMITH, COLLIN, DPM†

Provider ID: N/A
☑ 15706 POMERADO RD STE
S102
POWAY, CA 92064
Effective as of 01-FEB-21

SMITH, COLLIN, DPM†

Provider ID: N/A
☑ 15706 POMERADO RD STE
S102
POWAY, CA 92064
Effective as of 01-SEP-22

PSYCHIATRY

ANDERSEN, CLAIRE, MD

Provider ID: N/A
☑ 13020 POWAY RD
POWAY, CA 92064*
Effective as of 01-JAN-21

ANDERSEN, CLAIRE, MD

Provider ID: N/A
☑ 13020 POWAY RD
POWAY, CA 92064*
Effective as of 01-JAN-21

MODHWADIA, MAMTA, MD

Provider ID: N/A
☑ 13010 POWAY RD
POWAY, CA 92064
Effective as of 01-FEB-24

MODHWADIA, MAMTA, MD

Provider ID: N/A
☑ 13010 POWAY RD
POWAY, CA 92064
Effective as of 01-FEB-24

PEDERSEN, SUESAN, MD

Provider ID: N/A
☑ 13010 POWAY RD
POWAY, CA 92064
Effective as of 01-AUG-22

PEDERSEN, SUESAN, MD

Provider ID: N/A
☑ 13010 POWAY RD
POWAY, CA 92064
Effective as of 01-AUG-22

POSTLETHWAITE, ALEJANDRA, MD†

Provider ID: N/A
☑ 13010 POWAY RD
POWAY, CA 92064*
Effective as of 01-JAN-24

POSTLETHWAITE, ALEJANDRA, MD†

Provider ID: N/A
☑ 13010 POWAY RD
POWAY, CA 92064*
Effective as of 01-JAN-24

PSYCHIATRY CHILD

ANDERSEN, CLAIRE, MD

Provider ID: N/A
☑ 13020 POWAY RD
POWAY, CA 92064*
Effective as of 01-JAN-21

ANDERSEN, CLAIRE, MD

Provider ID: N/A
☑ 13020 POWAY RD
POWAY, CA 92064*
Effective as of 01-JAN-21

C1. Lista de proveedores de la red Médico de atención especializada

PSYCHOLOGIST

KAUP, ALLISON, PhD†

Provider ID: N/A

15611 POMERADO RD STE
505
POWAY, CA 92064

Teleservice

Effective as of 01-NOV-23

KAUP, ALLISON, PhD

Provider ID: N/A

15611 POMERADO RD STE
580
POWAY, CA 92064

Effective as of 01-JUN-24

KAUP, ALLISON, PhD†

Provider ID: N/A

15611 POMERADO RD STE
505
POWAY, CA 92064

Teleservice

Effective as of 01-NOV-23

KAUP, ALLISON, PhD

Provider ID: N/A

15611 POMERADO RD STE
580
POWAY, CA 92064

Effective as of 01-JUN-24

MEJIAS, JUAN, PhD

Provider ID: N/A

13010 POWAY RD
POWAY, CA 92064*

Effective as of 01-JAN-24

MEJIAS, JUAN, PhD

Provider ID: N/A

13010 POWAY RD
POWAY, CA 92064*

Effective as of 01-JAN-24

VALLEZ-BARLAM, ANDREA,

PhD

Provider ID: N/A

13010 POWAY RD
POWAY, CA 92064

Effective as of 01-DEC-23

VALLEZ-BARLAM, ANDREA,

PhD

Provider ID: N/A

13010 POWAY RD
POWAY, CA 92064*

Effective as of 01-JAN-24

VALLEZ-BARLAM, ANDREA,

PhD

Provider ID: N/A

13010 POWAY RD
POWAY, CA 92064

Effective as of 01-DEC-23

VALLEZ-BARLAM, ANDREA,

PhD

Provider ID: N/A

13010 POWAY RD
POWAY, CA 92064*

Effective as of 01-JAN-24

RHEUMATOLOGY

RAO, SOUMYA, MD†

Provider ID: N/A

15611 POMERADO RD STE
400
POWAY, CA 92064

Effective as of 01-SEP-22

REDDY, SMITHA, MD†

Provider ID: N/A

15725 POMERADO RD STE
117
POWAY, CA 92064

Effective as of 01-SEP-22

REDDY, SMITHA, MD

Provider ID: N/A

15525 POMERADO RD STE
E6
POWAY, CA 92064

Effective as of 01-JUL-24

REDDY, SMITHA, MD

Provider ID: N/A

15525 POMERADO RD STE
E6
POWAY, CA 92064

Effective as of 01-JUL-24

REDDY, SMITHA, MD

Provider ID: N/A

15525 POMERADO RD STE
E6
POWAY, CA 92064

Effective as of 01-JUL-24

SLEEP MEDICINE

MASHAYEKHI, PEGAH, DO

Provider ID: N/A

15611 POMERADO RD STE
300
POWAY, CA 92064

Effective as of 01-SEP-24

SURGERY ORTHOPEDIC

BALIKIAN, PHILIP, MD†

Provider ID: N/A

15611 POMERADO RD STE
400
POWAY, CA 92064

Teleservice

Effective as of 01-JAN-21

BRIED, JAMES, MD†

Provider ID: N/A

15611 POMERADO RD STE
525
POWAY, CA 92064

Effective as of 01-SEP-22

C1. Lista de proveedores de la red Médico de atención especializada

COHEN, BRAD, MD†

Provider ID: N/A

15611 POMERADO RD STE
525
POWAY, CA 92064
Effective as of 01-SEP-22

UROLOGY

ANTHONY, JULIAN, MD

Provider ID: N/A

15611 POMERADO RD FL 4
POWAY, CA 92064
Effective as of 01-MAR-24

PE, MARK-RALLY, MD†

Provider ID: N/A

12630 MONTE VISTA RD
STE 103
POWAY, CA 92064
Effective as of 01-SEP-22

CHIROPRACTOR

JIMENEZ, CLARIBEL, DC

Provider ID: N/A

220 ROTANZI ST
RAMONA, CA 92065
Effective as of 01-JUL-24

FAMILY PRACTICE

HARDISON, CHARLES, MD†

Provider ID: N/A

211 13TH ST
RAMONA, CA 92065*
Effective as of 01-SEP-22

WELLS, TODD, MD

Provider ID: N/A

211 13TH ST
RAMONA, CA 92065
Effective as of 01-JUN-23

PEDIATRICS

YUNG, DORIS, MD†

Provider ID: N/A

220 ROTANZI ST
RAMONA, CA 92065
Effective as of 01-DEC-18

REGISTERED PHYSICAL THERAPIST

BOUTELLE, DAVID, PT

Provider ID: N/A

850 MAIN ST STE 105
RAMONA, CA 92065
Effective as of 01-FEB-24

BOUTELLE, BARBARA, PT

Provider ID: N/A

850 MAIN ST STE 105
RAMONA, CA 92065
Effective as of 01-FEB-24

CHIROPRACTOR

PIERSON, MICHAEL, DC

Provider ID: N/A

22411 ANTONIO PKWY STE
C215
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-JAN-18

DERMATOLOGY

DICESARE, DANIEL, MD

Provider ID: N/A

22032 EL PASEO STE 150
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-NOV-19

DICESARE, DANIEL, MD

Provider ID: N/A

22032 EL PASEO STE 150

RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-NOV-19

GUIDE, SHIREEN, MD†

Provider ID: N/A

29829 SANTA MARGARITA
PKWY STE 500
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-JAN-17

GUIDE, SHIREEN, MD†

Provider ID: N/A

29829 SANTA MARGARITA
PKWY STE 500
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-JAN-16

GUIDE, SHIREEN, MD†

Provider ID: N/A

29829 SANTA MARGARITA
PKWY STE 500
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-JAN-16

GUIDE, SHIREEN, MD†

Provider ID: N/A

29829 SANTA MARGARITA
PKWY STE 500
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-AUG-12

GUIDE, SHIREEN, MD†

Provider ID: N/A

29829 SANTA MARGARITA
PKWY STE 500
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-AUG-12

GUIDE, SHIREEN, MD†

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

29829 SANTA MARGARITA
PKWY STE 500
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-AUG-12

LEVIN, JACQUELINE, DO†

Provider ID: N/A

22032 EL PASEO STE 220
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-OCT-23

LEVIN, JACQUELINE, DO†

Provider ID: N/A

22032 EL PASEO STE 220
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-JAN-23

LEVIN, JACQUELINE, DO†

Provider ID: N/A

22032 EL PASEO STE 220
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-JUL-21

LEVIN, JACQUELINE, DO†

Provider ID: N/A

22032 EL PASEO STE 220
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-JUN-18

LEVIN, JACQUELINE, DO†

Provider ID: N/A

22032 EL PASEO STE 220
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-NOV-21

LEVIN, JACQUELINE, DO†

Provider ID: N/A

22032 EL PASEO STE 220

RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-NOV-21

LEVIN, JACQUELINE, DO†

Provider ID: N/A

22032 EL PASEO STE 220
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-MAR-19

SHIELL, RONALD, MD†

Provider ID: N/A

22032 EL PASEO STE 220
RANCHO SANTA
MARGARITA, CA 92688

Teleservice

Effective as of 01-DEC-21

SHIELL, RONALD, MD†

Provider ID: N/A

22032 EL PASEO STE 220
RANCHO SANTA
MARGARITA, CA 92688

Teleservice

Effective as of 01-JAN-17

WANG, JAMES, MD†

Provider ID: N/A

29833 SANTA MARGARITA
PKWY STE 100
RANCHO SANTA
MARGARITA, CA 92688

Effective as of 01-SEP-19

WANG, JAMES, MD†

Provider ID: N/A

29833 SANTA MARGARITA
PKWY STE 100
RANCHO SANTA
MARGARITA, CA 92688

Effective as of 01-SEP-19

WANG, JAMES, MD†

Provider ID: N/A

29833 SANTA MARGARITA
PKWY STE 100
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-SEP-19

WANG, JAMES, MD†

Provider ID: N/A

29833 SANTA MARGARITA
PKWY STE 100
RANCHO SANTA
MARGARITA, CA 92688

Effective as of 01-JUL-18

WANG, JAMES, MD†

Provider ID: N/A

29833 SANTA MARGARITA
PKWY STE 100
RANCHO SANTA
MARGARITA, CA 92688

Effective as of 01-APR-20

WANG, JAMES, MD†

Provider ID: N/A

29833 SANTA MARGARITA
PKWY STE 100
RANCHO SANTA
MARGARITA, CA 92688

Effective as of 01-SEP-19

WANG, JAMES, MD†

Provider ID: N/A

29833 SANTA MARGARITA
PKWY STE 100
RANCHO SANTA
MARGARITA, CA 92688

Effective as of 01-SEP-19

ENDOCRINOLOGY METABOLISM DIABETES

HAMIDI, AFSHIN, MD

Provider ID: N/A

30511 AVENIDA DE LAS
FLORES STE 1064

C1. Lista de proveedores de la red Médico de atención especializada

RANCHO SANTA
MARGARITA, CA 92688
Teleservice
Effective as of 01-SEP-23

HAMIDI, AFSHIN, MD

Provider ID: N/A
☑ 30511 AVENIDA DE LAS
FLORES STE 1064
RANCHO SANTA
MARGARITA, CA 92688
Teleservice
Effective as of 01-SEP-23

INTERNAL MEDICINE

GORE, GWENDOLYN, MD†

Provider ID: N/A
☑ 29472 AVENIDA DE LAS
BANDERA
RANCHO SANTA
MARGARITA, CA 92688*
Effective as of 01-FEB-13

GORE, GWENDOLYN, MD†

Provider ID: N/A
☑ 29472 AVENIDA DE LAS
BANDERA
RANCHO SANTA
MARGARITA, CA 92688*
Effective as of 01-MAY-12

PHYSICIANS ASSISTANT

KANE, KARA, PA†

Provider ID: N/A
☑ 22032 EL PASEO STE 220
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-OCT-22

PODIATRIST

ANGAROLA, JEFF, DPM

Provider ID: N/A

☑ 29472 AVENIDA DE LAS
BANDERA
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-JAN-22

ANGAROLA, JEFF, DPM

Provider ID: N/A
☑ 29472 AVENIDA DE LAS
BANDERA
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-APR-11

ANGAROLA, JEFF, DPM

Provider ID: N/A
☑ 29472 AVENIDA DE LAS
BANDERA
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-JAN-22

ANGAROLA, JEFF, DPM

Provider ID: N/A
☑ 29472 AVENIDA DE LAS
BANDERA
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-MAY-12

ANGAROLA, JEFF, DPM

Provider ID: N/A
☑ 29472 AVENIDA DE LAS
BANDERA
RANCHO SANTA
MARGARITA, CA 92688
Effective as of 01-MAY-12

ANESTHESIOLOGY PAIN MANAGEMENT

MAASUMI, KASRA, MD

Provider ID: N/A
☑ 30212 TOMAS STE 180
RANCHO STA MARG, CA

92688
Teleservice
Effective as of 01-FEB-24

MAASUMI, KASRA, MD

Provider ID: N/A
☑ 30212 TOMAS STE 180
RANCHO STA MARG, CA
92688
Teleservice
Effective as of 01-FEB-24

ALLERGY IMMUNOLOGY

DYER, MARC, MD

Provider ID: N/A
☑ 665 CAMINO DE LOS
MARES STE 201
SAN CLEMENTE, CA 92673
Effective as of 01-NOV-17

ANESTHESIOLOGY

GERAYLI, AFSHIN, MD†

Provider ID: N/A
☑ 647 CAMINO DE LOS
MARES STE 223
SAN CLEMENTE, CA 92673
Effective as of 01-AUG-22

GERAYLI, AFSHIN, MD†

Provider ID: N/A
☑ 647 CAMINO DE LOS
MARES STE 223
SAN CLEMENTE, CA 92673
Effective as of 01-AUG-22

ANESTHESIOLOGY PAIN MANAGEMENT

BETTS, ANDRES, MD†

Provider ID: N/A
☑ 665 CAMINO DE LOS
MARES STE 202
SAN CLEMENTE, CA 92673

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-SEP-16

BETTS, ANDRES, MD†

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 202
SAN CLEMENTE, CA 92673

Effective as of 01-SEP-16

GERAYLI, AFSHIN, MD†

Provider ID: N/A

647 CAMINO DE LOS
MARES STE 223
SAN CLEMENTE, CA 92673

Effective as of 01-OCT-23

GERAYLI, AFSHIN, MD†

Provider ID: N/A

647 CAMINO DE LOS
MARES STE 223
SAN CLEMENTE, CA 92673

Effective as of 01-SEP-19

GERAYLI, AFSHIN, MD†

Provider ID: N/A

647 CAMINO DE LOS
MARES STE 223
SAN CLEMENTE, CA 92673

Effective as of 01-JAN-23

GERAYLI, AFSHIN, MD†

Provider ID: N/A

647 CAMINO DE LOS
MARES STE 223
SAN CLEMENTE, CA 92673

Effective as of 01-JAN-23

GERAYLI, AFSHIN, MD†

Provider ID: N/A

647 CAMINO DE LOS
MARES STE 223
SAN CLEMENTE, CA 92673

Effective as of 01-JAN-23

MOUSAVI, SHAHRYAR, MD

Provider ID: N/A

647 CAMINO DE LOS
MARES STE 223
SAN CLEMENTE, CA 92673

Effective as of 01-AUG-20

SHAHBAZIAN, MICHAEL, MD†

Provider ID: N/A

647 CAMINO DE LOS
MARES STE 223
SAN CLEMENTE, CA 92673

Effective as of 01-JUL-20

CARDIAC ELECTROPHYSIOLOGY

DRURY, PAUL, MD†

Provider ID: N/A

724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672

Effective as of 01-JAN-24

DRURY, PAUL, MD†

Provider ID: N/A

724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672

Effective as of 01-JAN-24

CARDIOVASCULAR DISEASE

KUO, ALLEN, MD†

Provider ID: N/A

724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672

Effective as of 01-FEB-23

CERTIFIED NURSE PRACTITIONER

PARK, SE, NP

Provider ID: N/A

3553 CAMINO MIRA COSTA
STE A

SAN CLEMENTE, CA 92672

Effective as of 01-JUL-23

POLIZZI, BRITTANY, NP†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673

Effective as of 01-DEC-22

WONG, KRYSTLE, NP

Provider ID: N/A

1031 AVENIDA PICO STE
203
SAN CLEMENTE, CA 92673

Effective as of 01-NOV-23

CHIROPRACTOR

THOMPSON, RUSSELL, DC†

Provider ID: N/A

629 CAMINO DE LOS
MARES STE 104
SAN CLEMENTE, CA 92673

Effective as of 01-JAN-18

DERMATOLOGY

CARLIN, CHRISTOPHER, MD†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673

Effective as of 01-JAN-23

CARLIN, CHRISTOPHER, MD†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673

Effective as of 01-NOV-19

CARLIN, CHRISTOPHER, MD†

Provider ID: N/A

1300 AVENIDA VISTA

C1. Lista de proveedores de la red Médico de atención especializada

HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-DEC-21

CARLIN, CHRISTOPHER, MD†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-22

CARLIN, CHRISTOPHER, MD†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-DEC-21

CARLIN, CHRISTOPHER, MD†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-DEC-21

CARLIN, CHRISTOPHER, MD†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-23

FOREMAN, TANYA, MD†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-23

FOREMAN, TANYA, MD†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-SEP-18

FOREMAN, TANYA, MD†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-JUL-21

FOREMAN, TANYA, MD†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-JUL-21

GUIDE, SHIREEN, MD†

Provider ID: N/A

629 CAMINO DE LOS
MARES STE 105
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-17

GUIDE, SHIREEN, MD†

Provider ID: N/A

629 CAMINO DE LOS
MARES STE 105
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-16

GUIDE, SHIREEN, MD†

Provider ID: N/A

629 CAMINO DE LOS
MARES STE 105
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-16

NAKHLA, TONY, DO

Provider ID: N/A

224 AVENIDA DEL MAR STE
B
SAN CLEMENTE, CA 92672
Effective as of 01-AUG-17

NAKHLA, TONY, DO

Provider ID: N/A

224 AVENIDA DEL MAR STE
B
SAN CLEMENTE, CA 92672
Effective as of 01-MAY-18

RILEY, JESSICA, DO†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-NOV-18

RILEY, JESSICA, DO†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-NOV-18

RILEY, JESSICA, DO†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-AUG-20

RILEY, JESSICA, DO†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-MAR-23

RILEY, JESSICA, DO†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-JUN-24

RILEY, JESSICA, DO†

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-OCT-18

RILEY, JESSICA, DO[†]

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673

Effective as of 01-OCT-23

SHIELL, RONALD, MD[†]

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673

Teleservice

Effective as of 01-OCT-23

SHIELL, RONALD, MD[†]

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673

Teleservice

Effective as of 01-SEP-18

SHIELL, RONALD, MD[†]

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA
SAN CLEMENTE, CA 92673

Effective as of 01-JAN-17

SHIELL, RONALD, MD[†]

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673

Teleservice

Effective as of 01-DEC-21

SHIELL, RONALD, MD[†]

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673

Teleservice

Effective as of 01-MAR-19

EMERGENCY MEDICINE

KENNEDY, GREGORY, MD[†]

Provider ID: N/A

1300 AVENIDA VISTA
HERMOSA STE 200
SAN CLEMENTE, CA 92673

Effective as of 01-MAY-24

GASTROENTEROLOGY

GUJRAL, NAVJYOT, MD[†]

Provider ID: N/A

655 CAMINO LOS MARES
123
SAN CLEMENTE, CA 92673

Effective as of 01-MAY-12

GUJRAL, NAVJYOT, MD[†]

Provider ID: N/A

655 CAMINO LOS MARES
123
SAN CLEMENTE, CA 92673

Effective as of 01-APR-11

HASSANEIN, TAREK, MD[†]

Provider ID: N/A

675 CAMINO DE LOS
MARES STE 301
SAN CLEMENTE, CA 92673

Effective as of 01-JAN-18

HASSANEIN, TAREK, MD[†]

Provider ID: N/A

675 CAMINO LOS MARES
210
SAN CLEMENTE, CA 92673

Effective as of 01-JAN-18

HASSANEIN, TAREK, MD[†]

Provider ID: N/A

675 CAMINO DE LOS

MARES STE 301

SAN CLEMENTE, CA 92673

Effective as of 01-MAY-22

INTERVENTIONAL CARDIOLOGY

DRURY, PAUL, MD[†]

Provider ID: N/A

724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672

Effective as of 01-FEB-23

DRURY, PAUL, MD[†]

Provider ID: N/A

724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672

Effective as of 01-SEP-19

DRURY, PAUL, MD[†]

Provider ID: N/A

724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672

Effective as of 01-JAN-23

DRURY, PAUL, MD[†]

Provider ID: N/A

724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672

Effective as of 01-JAN-23

DRURY, PAUL, MD[†]

Provider ID: N/A

724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672

Effective as of 01-JAN-23

KUO, ALLEN, MD[†]

Provider ID: N/A


724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672

Effective as of 01-SEP-20

KUO, ALLEN, MD[†]


Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

 724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672
Effective as of 01-SEP-20


KUO, ALLEN, MD†

Provider ID: N/A

 724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672
Effective as of 01-SEP-20


VAN, HOHAI, MD†

Provider ID: N/A

 724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672
Effective as of 01-DEC-21


VAN, HOHAI, MD†

Provider ID: N/A

 724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672
Effective as of 01-DEC-21


VAN, HOHAI, MD†

Provider ID: N/A

 724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672
Effective as of 01-DEC-21

VAN, HOHAI, MD†


Provider ID: N/A

 724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672
Effective as of 01-FEB-23

NEUROLOGY


PATEL, HITESH, MD†

Provider ID: N/A

 638 CAMINO DE LOS
MARES STE D4
SAN CLEMENTE, CA 92673
Effective as of 01-DEC-21


PATEL, HITESH, MD†

Provider ID: N/A

 638 CAMINO DE LOS
MARES STE D4
SAN CLEMENTE, CA 92673
Effective as of 01-DEC-21

PATEL, HITESH, MD†


Provider ID: N/A

 638 CAMINO DE LOS
MARES STE D4
SAN CLEMENTE, CA 92673
Effective as of 01-DEC-21

OBSTETRICS / GYNECOLOGY


BAILEY, THOMAS, MD†

Provider ID: N/A

 665 CAMINO LOS MARES
303
SAN CLEMENTE, CA 92672
Effective as of 01-JAN-18


BAILEY, THOMAS, MD†

Provider ID: N/A

 665 CAMINO LOS MARES
303
SAN CLEMENTE, CA 92672
Effective as of 01-MAR-01


JOHNSON, SUSAN, MD†

Provider ID: N/A

 1031 AVENIDA PICO STE
204
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-20


JOHNSON, SUSAN, MD†

Provider ID: N/A

 1031 AVENIDA PICO STE
204
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-22


JOHNSON, SUSAN, MD†

Provider ID: N/A

 1031 AVENIDA PICO STE
204
SAN CLEMENTE, CA 92673
Effective as of 01-JUL-22


RAMIREZ, SARA, MD†

Provider ID: N/A

 665 CAMINO DE LOS
MARES
SAN CLEMENTE, CA 92673
Effective as of 01-SEP-10


RAMIREZ, SARA, MD†

Provider ID: N/A

 665 CAMINO DE LOS
MARES
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-18


SALCIDO, CRAIG, MD†

Provider ID: N/A

 665 CAMINO DE LOS
MARES STE 303A
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-18

SALCIDO, CRAIG, MD†


Provider ID: N/A

 665 CAMINO DE LOS
MARES STE 303A
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-18

OPHTHALMOLOGY

AHMAD, ASHRAF, MD†

Provider ID: N/A

 665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-23

AHMAD, ASHRAF, MD†

Provider ID: N/A

 665 CAMINO DE LOS

C1. Lista de proveedores de la red Médico de atención especializada

MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-SEP-22

BANUELOS, LYDIA, MD

Provider ID: N/A

653 CAMINO DE LOS
MARES STE 103
SAN CLEMENTE, CA 92673
Effective as of 01-FEB-23

BANUELOS, LYDIA, MD†

Provider ID: N/A

653 CAMINO DE LOS
MARES STE 107
SAN CLEMENTE, CA 92673
Effective as of 01-DEC-22

DHOOT, SONIA, MD†

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-SEP-22

DHOOT, SONIA, MD†

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-23

DHOOT, SONIA, MD†

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-19

DHOOT, SONIA, MD†

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-19

GUJRAL, SATVINDER, MD†

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-23

GUJRAL, SATVINDER, MD†

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-SEP-22

GWYNN, DAVID, MD

Provider ID: N/A

653 CAMINO DE LOS
MARES STE 103
SAN CLEMENTE, CA 92673
Effective as of 01-FEB-23

GWYNN, DAVID, MD

Provider ID: N/A

653 CAMINO DE LOS
MARES STE 103
SAN CLEMENTE, CA 92673
Effective as of 01-MAR-23

HOVANESIAN, JOHN, MD

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-23

HOVANESIAN, JOHN, MD

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-APR-23

HOVANESIAN, JOHN, MD

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-APR-23

HOVANESIAN, JOHN, MD

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-23

JACOBS, JEFFREY, MD†

Provider ID: N/A

665 CAMINO LOS MARES
102
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-23

JACOBS, JEFFREY, MD†

Provider ID: N/A

665 CAMINO LOS MARES
102
SAN CLEMENTE, CA 92673
Effective as of 01-APR-23

JACOBS, JEFFREY, MD†

Provider ID: N/A

665 CAMINO LOS MARES
102
SAN CLEMENTE, CA 92673
Effective as of 01-AUG-22

JACOBS, JEFFREY, MD†

Provider ID: N/A

665 CAMINO LOS MARES
102
SAN CLEMENTE, CA 92673
Effective as of 01-APR-23

JOSON, PETER, MD

Provider ID: N/A

653 CAMINO LOS MARES
107
SAN CLEMENTE, CA 92673

**C1. Lista de proveedores de la red
Médico de atención especializada**

Effective as of 01-APR-11	Provider ID: N/A	SAN CLEMENTE, CA 92673
JOSON, PETER, MD	 653 CAMINO DE LOS MARES STE 103	Effective as of 01-OCT-23
Provider ID: N/A	SAN CLEMENTE, CA 92673	KIM, EDWARD, MD†
 653 CAMINO LOS MARES 107	Effective as of 01-MAY-23	Provider ID: N/A
SAN CLEMENTE, CA 92673	JOSON, PETER, MD	 665 CAMINO DE LOS MARES STE 102
Effective as of 01-JAN-15	Provider ID: N/A	SAN CLEMENTE, CA 92673
JOSON, PETER, MD	 653 CAMINO DE LOS MARES STE 103	Effective as of 01-OCT-23
Provider ID: N/A	SAN CLEMENTE, CA 92673	KIM, BRIAN, MD†
 653 CAMINO DE LOS MARES STE 103	Effective as of 01-MAY-23	Provider ID: N/A
SAN CLEMENTE, CA 92673	KELLER, CHARLES, MD	 665 CAMINO DE LOS MARES STE 102
Effective as of 01-JAN-18	Provider ID: N/A	SAN CLEMENTE, CA 92673
JOSON, PETER, MD	 665 CAMINO DE LOS MARES STE 102	Effective as of 01-OCT-23
Provider ID: N/A	SAN CLEMENTE, CA 92673	KIM, BRIAN, MD†
 653 CAMINO LOS MARES 107	Effective as of 01-OCT-23	Provider ID: N/A
SAN CLEMENTE, CA 92673	KELLER, CHARLES, MD	 665 CAMINO DE LOS MARES STE 102
Effective as of 01-MAR-10	Provider ID: N/A	SAN CLEMENTE, CA 92673
JOSON, PETER, MD	 665 CAMINO DE LOS MARES STE 102	Effective as of 01-AUG-22
Provider ID: N/A	SAN CLEMENTE, CA 92673	KIM, EDWARD, MD†
 653 CAMINO LOS MARES 107	Effective as of 01-AUG-22	Provider ID: N/A
SAN CLEMENTE, CA 92673	KERSTEN, DIANA, MD	 665 CAMINO DE LOS MARES STE 102
Effective as of 01-MAR-23	Provider ID: N/A	SAN CLEMENTE, CA 92673
JOSON, PETER, MD	 665 CAMINO DE LOS MARES STE 102	Effective as of 01-JUL-22
Provider ID: N/A	SAN CLEMENTE, CA 92673	NOGUCHI, JONATHAN, MD
 653 CAMINO LOS MARES 107	Effective as of 01-APR-23	Provider ID: N/A
SAN CLEMENTE, CA 92673	KERSTEN, DIANA, MD	 665 CAMINO DE LOS MARES STE 102
Effective as of 01-MAY-12	Provider ID: N/A	SAN CLEMENTE, CA 92673
JOSON, PETER, MD	 665 CAMINO DE LOS MARES STE 102	Effective as of 01-OCT-23
Provider ID: N/A	SAN CLEMENTE, CA 92673	ROUHANI, BEHNAZ, MD
 653 CAMINO DE LOS MARES STE 103	Effective as of 01-APR-23	Provider ID: N/A
SAN CLEMENTE, CA 92673	KERSTEN, DIANA, MD	 665 CAMINO DE LOS MARES STE 102
Effective as of 01-OCT-17	Provider ID: N/A	SAN CLEMENTE, CA 92673
JOSON, PETER, MD	 665 CAMINO DE LOS MARES STE 102	Effective as of 01-OCT-23

**C1. Lista de proveedores de la red
Médico de atención especializada**

ROUHANI, BEHNAZ, MD

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-SEP-22

SALEHI-HAD, HANI, MD†

Provider ID: N/A

653 CAMINO DE LOS
MARES STE 103
SAN CLEMENTE, CA 92673
Effective as of 01-JUN-21

SALEHI-HAD, HANI, MD†

Provider ID: N/A

653 CAMINO DE LOS
MARES STE 103
SAN CLEMENTE, CA 92673
Effective as of 01-JUN-21

TAI, AUDREY, DO†

Provider ID: N/A

653 CAMINO DE LOS
MARES STE 107
SAN CLEMENTE, CA 92673
Effective as of 01-JUL-24

TAYANI, RAMIN, MD

Provider ID: N/A

653 CAMINO DE LOS
MARES STE 107
SAN CLEMENTE, CA 92673
Effective as of 01-JUL-24

TEYMOORIAN, SAVAK, MD†

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-22

TEYMOORIAN, SAVAK, MD†

Provider ID: N/A

665 CAMINO DE LOS

MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-23

WANG, YE, MD†

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-NOV-19

WANG, YE, MD†

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-NOV-19

OPTOMETRIST

CHOI-SIRITARATIWAT,

ISABELL, OD†

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-23

CHOI-SIRITARATIWAT,

ISABELL, OD†

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-JUN-19

CHOI-SIRITARATIWAT,

ISABELL, OD†

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-JUN-19

CHOI-SIRITARATIWAT,

ISABELL, OD†

Provider ID: N/A

665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-AUG-22

LEIGHT, TERRA, OD†

Provider ID: N/A

685 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-23

LEIGHT, TERRA, OD†

Provider ID: N/A

685 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-AUG-22

MULICK, STEPHANIE, OD

Provider ID: N/A

653 CAMINO DE LOS
MARES STE 107
SAN CLEMENTE, CA 92673
Effective as of 01-JUL-24

NG, REBECCA, OD†

Provider ID: N/A

653 CAMINO LOS MARES
103
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-18

NG, REBECCA, OD†

Provider ID: N/A

653 CAMINO LOS MARES
103
SAN CLEMENTE, CA 92673
Effective as of 01-AUG-11

NG, REBECCA, OD

Provider ID: N/A

653 CAMINO DE LOS

**C1. Lista de proveedores de la red
Médico de atención especializada**

MARES STE 107
SAN CLEMENTE, CA 92673
Effective as of 01-SEP-23

STEFANIDIS, NICOLETTA, OD†
Provider ID: N/A
665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-SEP-22

STEFANIDIS, NICOLETTA, OD†
Provider ID: N/A
665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-FEB-18

STEFANIDIS, NICOLETTA, OD†
Provider ID: N/A
665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-23

STEFANIDIS, NICOLETTA, OD†
Provider ID: N/A
665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-FEB-18

TERADA, SEIJU, OD
Provider ID: N/A
665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-SEP-22

TERADA, SEIJU, OD
Provider ID: N/A
665 CAMINO DE LOS
MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-23

OTOLARYNGOLOGY

CROCKETT, DENNIS, MD†
Provider ID: N/A
675 CAMINO DE LOS
MARES STE 420
SAN CLEMENTE, CA 92673
Effective as of 01-JUL-19

CROCKETT, DENNIS, MD†
Provider ID: N/A
675 CAMINO DE LOS
MARES STE 420
SAN CLEMENTE, CA 92673
Effective as of 01-JUL-19

CROCKETT, DENNIS, MD†
Provider ID: N/A
675 CAMINO DE LOS
MARES STE 420
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-18

WELLS, PHILLIP, MD†
Provider ID: N/A
675 CAMINO DE LOS
MARES STE 420
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-18

WELLS, PHILLIP, MD†
Provider ID: N/A
675 CAMINO DE LOS
MARES STE 420
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-08

WELLS, PHILLIP, MD†
Provider ID: N/A
675 CAMINO DE LOS
MARES STE 420
SAN CLEMENTE, CA 92673
Effective as of 01-NOV-14

PEDIATRICS

DWINELL, LAUREN, MD†
Provider ID: N/A
1300 AVENIDA VISTA
HERMOSA STE 200
SAN CLEMENTE, CA 92673
Effective as of 01-JUL-23

PHYSICIANS ASSISTANT

ESHOIEE, MIRIAM, PA†
Provider ID: N/A
224 AVENIDA DEL MAR STE
B
SAN CLEMENTE, CA 92672
Effective as of 01-AUG-20

MOHALE, SHARON, PA†
Provider ID: N/A
1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-AUG-18

NORMAN, STACY, PA
Provider ID: N/A
1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-AUG-23

WANG, ALICE, PA
Provider ID: N/A
831 VIA SUERTE STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-FEB-24

PODIATRIST

HEHE, KYLE, DPM
Provider ID: N/A
665 CAMINO DE LOS
MARES
SAN CLEMENTE, CA 92673

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-AUG-23

HEHE, KYLE, DPM

Provider ID: N/A

665 CAMINO DE LOS MARES
SAN CLEMENTE, CA 92673

Effective as of 01-AUG-23

LEAMING, ROBERT, DPM

Provider ID: N/A

655 CAMINO DE LOS MARES STE 120
SAN CLEMENTE, CA 92673

Teleservice

Effective as of 01-FEB-24

LEAMING, ROBERT, DPM

Provider ID: N/A

655 CAMINO DE LOS MARES STE 120
SAN CLEMENTE, CA 92673

Teleservice

Effective as of 01-FEB-24

SURGERY HAND

FRANKLIN, ADAM, MD

Provider ID: N/A

653 CAMINO DE LOS MARES STE 109
SAN CLEMENTE, CA 92673

Effective as of 01-APR-18

FRANKLIN, ADAM, MD

Provider ID: N/A

653 CAMINO DE LOS MARES STE 109
SAN CLEMENTE, CA 92673

Effective as of 01-APR-18

SURGERY

NEUROLOGICAL

PATEL, HITESH, MD[†]

Provider ID: N/A

638 CAMINO DE LOS MARES STE D4
SAN CLEMENTE, CA 92673

Effective as of 01-NOV-21

SURGERY ORTHOPEDIC

EIDT, HERBERT, MD

Provider ID: N/A

653 CAMINO DE LOS MARES STE 109
SAN CLEMENTE, CA 92673

Effective as of 01-SEP-24

ELZIK, MARK, MD

Provider ID: N/A

653 CAMINO DE LOS MARES STE 109
SAN CLEMENTE, CA 92673

Effective as of 01-SEP-24

FITZPATRICK, MICHAEL, MD

Provider ID: N/A

653 CAMINO DE LOS MARES STE 109
SAN CLEMENTE, CA 92673

Effective as of 01-SEP-24

GIALAMAS, GUS, MD

Provider ID: N/A

653 CAMINO DE LOS MARES STE 109
SAN CLEMENTE, CA 92673

Effective as of 01-FEB-18

GIALAMAS, GUS, MD

Provider ID: N/A

653 CAMINO DE LOS MARES STE 109
SAN CLEMENTE, CA 92673

Effective as of 01-FEB-18

PARK, SAMUEL, MD

Provider ID: N/A

653 CAMINO DE LOS MARES STE 109
SAN CLEMENTE, CA 92673

Effective as of 01-SEP-24

VAN DER REIS, WILLIAM, MD[†]

Provider ID: N/A

653 CAMINO DE LOS MARES STE 109
SAN CLEMENTE, CA 92673

Effective as of 01-APR-11

VAN DER REIS, WILLIAM, MD[†]

Provider ID: N/A

653 CAMINO DE LOS MARES STE 109
SAN CLEMENTE, CA 92673

Effective as of 01-MAY-12

UROLOGY

BUI, DON, MD

Provider ID: N/A

3553 CAMINO MIRA COSTA STE A
SAN CLEMENTE, CA 92672

Effective as of 01-JAN-23

BUI, DON, MD

Provider ID: N/A

3553 CAMINO MIRA COSTA STE A
SAN CLEMENTE, CA 92672

Effective as of 01-OCT-23

BUI, DON, MD

Provider ID: N/A

3553 CAMINO MIRA COSTA STE A
SAN CLEMENTE, CA 92672

Effective as of 01-DEC-23

ELKHOORY, FUAD, MD

Provider ID: N/A

3553 CAMINO MIRA COSTA

**C1. Lista de proveedores de la red
Médico de atención especializada**

STE A
SAN CLEMENTE, CA 92672
Effective as of 01-OCT-23

HO, TAMMY, MD

Provider ID: N/A
3553 CAMINO MIRA COSTA
STE A
SAN CLEMENTE, CA 92672
Effective as of 01-OCT-23

KIM, MOSES, MD

Provider ID: N/A
3553 CAMINO MIRA COSTA
STE A
SAN CLEMENTE, CA 92672
Effective as of 01-OCT-23

KIM, MOSES, MD

Provider ID: N/A
3553 CAMINO MIRA COSTA
STE A
SAN CLEMENTE, CA 92672
Effective as of 01-JAN-23

MEAGLIA, JAMES, MD

Provider ID: N/A
3553 CAMINO MIRA COSTA
STE A
SAN CLEMENTE, CA 92672
Effective as of 01-JAN-23

MEAGLIA, JAMES, MD

Provider ID: N/A
3553 CAMINO MIRA COSTA
STE A
SAN CLEMENTE, CA 92672
Effective as of 01-OCT-23

NAKAMURA, LEAH, MD

Provider ID: N/A
3553 CAMINO MIRA COSTA
STE A
SAN CLEMENTE, CA 92672
Effective as of 01-OCT-23

RANDALL, JOSH, MD

Provider ID: N/A
3553 CAMINO MIRA COSTA
STE A
SAN CLEMENTE, CA 92672
Effective as of 01-OCT-23

SINGH, KARAN, MD

Provider ID: N/A
3553 CAMINO MIRA COSTA
STE A
SAN CLEMENTE, CA 92672
Effective as of 01-OCT-23

SPITZ, AARON, MD

Provider ID: N/A
3553 CAMINO MIRA COSTA
STE A
SAN CLEMENTE, CA 92672
Effective as of 01-OCT-23

SU, DANIEL, MD

Provider ID: N/A
3553 CAMINO MIRA COSTA
STE A
SAN CLEMENTE, CA 92672
Effective as of 01-OCT-23

TEBYANI, NEYSSAN, MD

Provider ID: N/A
3553 CAMINO MIRA COSTA
STE A
SAN CLEMENTE, CA 92672
Effective as of 01-OCT-23

ADDICTIVE MEDICINE

HEINRICI, ALEKA, MD

Provider ID: N/A
286 EUCLID AVE STE 302
SAN DIEGO, CA 92114
Teleservice
Effective as of 01-APR-23

**SALGUEROGALLAND,
MARIOLUIS, MD**

Provider ID: N/A
4187 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-JUN-23

**SALGUEROGALLAND,
MARIOLUIS, MD**

Provider ID: N/A
4185 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-JUN-23

**SALGUEROGALLAND,
MARIOLUIS, MD†**

Provider ID: N/A
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-SEP-21

**SALGUEROGALLAND,
MARIOLUIS, MD**

Provider ID: N/A
4157 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-JUN-23

**SALGUEROGALLAND,
MARIOLUIS, MD**

Provider ID: N/A
4175 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-JUN-23

**ADVANCED HEART
FAILURE AND**

C1. Lista de proveedores de la red Médico de atención especializada

TRANSPLANT CARDIOLOGY

HOAGLAND, PETER, MD†

Provider ID: N/A

📍 3131 BERGER AVE STE 200
SAN DIEGO, CA 92123

Effective as of 01-JAN-21

JASKI, BRIAN, MD†

Provider ID: N/A

📍 3131 BERGER AVE STE 200
SAN DIEGO, CA 92123

Teleservice

Effective as of 01-JAN-21

ALLERGY IMMUNOLOGY

ALKATIB, RHONDA, MD†

Provider ID: N/A

📍 2655 CAMINO DEL RIO N
STE 425

SAN DIEGO, CA 92108

Effective as of 01-APR-22

ALKATIB, RHONDA, MD†

Provider ID: N/A

📍 2655 CAMINO DEL RIO N
STE 120

SAN DIEGO, CA 92108

Effective as of 01-SEP-22

ALKATIB, RHONDA, MD†

Provider ID: N/A

📍 2655 CAMINO DEL RIO N
STE 425

SAN DIEGO, CA 92108

Effective as of 01-OCT-21

COHEN, GARY, MD

Provider ID: N/A

📍 9833 PACIFIC HEIGHTS
BLVD STE J
SAN DIEGO, CA 92121

Effective as of 01-OCT-95

COHEN, GARY, MD

Provider ID: N/A

📍 9833 PACIFIC HEIGHTS
BLVD STE J
SAN DIEGO, CA 92121

Effective as of 01-FEB-07

KIM, ALEXANDER, MD

Provider ID: N/A

📍 16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-JUN-23

MERCANDETTI, ALEX, MD†

Provider ID: N/A

📍 3965 5TH AVE STE 430
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-NOV-20

OSTROM, NANCY, MD†

Provider ID: N/A

📍 5776 RUFFIN RD
SAN DIEGO, CA 92123

Effective as of 01-JAN-13

SHARMA, KUSUM, MD

Provider ID: N/A

📍 10672 WEXFORD ST STE
280

SAN DIEGO, CA 92131

Effective as of 01-SEP-15

SHARMA, KUSUM, MD

Provider ID: N/A

📍 10672 WEXFORD ST STE
280

SAN DIEGO, CA 92131

Effective as of 01-JAN-21

SHARMA, KUSUM, MD

Provider ID: N/A

📍 10672 WEXFORD ST STE

280

SAN DIEGO, CA 92131

Effective as of 01-JAN-23

ANESTHESIOLOGY

BECERRA SONGOLO, TOSHA, MD

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JUN-23

CHAN, CHI-BEW, MD

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-SEP-24

CHAN, CHI-BEW, MD

Provider ID: N/A

📍 6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-SEP-24

CHIEN, SHELBY, MD†

Provider ID: N/A

📍 5395 RUFFIN RD STE 204
SAN DIEGO, CA 92123

Effective as of 01-JAN-21

DOBECKI, DOUGLAS, MD†

Provider ID: N/A

📍 5395 RUFFIN RD STE 202
SAN DIEGO, CA 92123

Effective as of 01-JAN-22

FILIPOVIC, MAYA, MD

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-APR-23

FUNDINGSLAND, BRENT, MD†

Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-21

GROVEY, BRITTANY, MD†
Provider ID: N/A

8901 ACTIVITY RD STE 100
SAN DIEGO, CA 92126
Effective as of 01-JAN-21

GROVEY, BRITTANY, MD†
Provider ID: N/A

8901 ACTIVITY RD STE 104
SAN DIEGO, CA 92126
Effective as of 01-APR-21

LEE, GEMAYEL, MD†
Provider ID: N/A

8901 ACTIVITY RD STE 100
SAN DIEGO, CA 92126
Effective as of 01-JAN-21

LEE, INSUN, MD
Provider ID: N/A

5395 RUFFIN RD STE 204
SAN DIEGO, CA 92123
Effective as of 01-AUG-24

NARLA, VINOD, MD
Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

NGO, DONALD, MD
Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

PARDO, PATRICIA, MD
Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-24

PARDO, PATRICIA, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-AUG-24

ROY, KEVIN, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

SAHA, DEVJANI, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-AUG-24

SAHA, DEVJANI, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-24

SAID, ENGY, MD†

Provider ID: N/A

16918 DOVE CANYON RD
STE 100
SAN DIEGO, CA 92127
Effective as of 01-OCT-21

SAID, ENGY, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-OCT-21

SUYDAM, STEVEN, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-21

TOLIVER, KEVIN, MD

Provider ID: N/A

4060 4TH AVE STE 408
SAN DIEGO, CA 92103
Effective as of 01-JAN-23

TULLY, JEFFREY, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-21

TZENG, ERIC, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

VANNOORD, BRANDON, MD†

Provider ID: N/A

3969 4TH AVE STE 208
SAN DIEGO, CA 92103
Effective as of 01-FEB-19

VAUGHN, DOUGLAS, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

ANESTHESIOLOGY

CRITICAL CARE MEDICINE

KRAUSE, MARTIN, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-21

ANESTHESIOLOGY PAIN MANAGEMENT

BROWNLOW, ROY, MD


Provider ID: N/A

5395 RUFFIN RD STE 204


**C1. Lista de proveedores de la red
Médico de atención especializada**

SAN DIEGO, CA 92123
Effective as of 01-APR-24


CHISHOLM, CHRISTOPHER, MD

Provider ID: N/A
 16466 BERNARDO CENTER
DR STE 150
SAN DIEGO, CA 92128
Effective as of 01-JUN-20


CHONG, TIMOTHY, MD†

Provider ID: N/A
 16466 BERNARDO CENTER
DR STE 150
SAN DIEGO, CA 92128
Effective as of 01-SEP-17


COHEN, ZACHARY, MD

Provider ID: N/A
 5395 RUFFIN RD STE 204
SAN DIEGO, CA 92123
Effective as of 01-FEB-24


COHEN, ZACHARY, MD

Provider ID: N/A
 5395 RUFFIN RD STE 204
SAN DIEGO, CA 92123
Effective as of 01-JUN-24


DAIRO, BRANDON, MD†

Provider ID: N/A
 3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110
Teleservice
Effective as of 01-NOV-22

GROVEY, BRITTANY, MD†


Provider ID: N/A
 8901 ACTIVITY RD STE 104
SAN DIEGO, CA 92126
Effective as of 01-FEB-21

LEE, GEMAYEL, MD†


Provider ID: N/A
 8901 ACTIVITY RD STE 104

SAN DIEGO, CA 92126
Effective as of 01-FEB-21


LEE, INSUN, MD

Provider ID: N/A
 5395 RUFFIN RD STE 204
SAN DIEGO, CA 92123
Effective as of 01-APR-24


LEE, GEMAYEL, MD†

Provider ID: N/A
 8901 ACTIVITY RD STE 104
SAN DIEGO, CA 92126
Effective as of 01-APR-21


RICHARDSON, HENRY, MD†

Provider ID: N/A
 3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110
Effective as of 01-MAY-21


THOMPSON, SANDRA, MD†

Provider ID: N/A
 4033 3RD AVE STE 430
SAN DIEGO, CA 92103
Effective as of 01-DEC-22


VANNOORD, BRANDON, MD†

Provider ID: N/A
 3969 4TH AVE STE 208
SAN DIEGO, CA 92103
Effective as of 01-FEB-19

VANNOORD, BRANDON, MD†


Provider ID: N/A
 3969 4TH AVE STE 208
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

VANNOORD, BRANDON, MD†


Provider ID: N/A
 3969 4TH AVE STE 208
SAN DIEGO, CA 92103
Effective as of 01-MAR-23

AUDIOLOGIST


BAXTER, STEPHANIE, AuD

Provider ID: N/A
 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23


BAXTER, STEPHANIE, AuD

Provider ID: N/A
 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23


BAXTER, STEPHANIE, AuD

Provider ID: N/A
 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23


HARRIS, GENEVIEVE, AuD

Provider ID: N/A
 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23


SERENO, EMILY, AuD

Provider ID: N/A
 5405 OBERLIN DR FL 2
SAN DIEGO, CA 92121
Teleservice
Effective as of 01-JUL-24

SHASKY, GARY, AuD†

Provider ID: N/A
 9340 CLAIREMONT MESA
BLVD STE D
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

TSANG, JOYCE, AuD

Provider ID: N/A
 200 W ARBOR DR
SAN DIEGO, CA 92103

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-MAY-23

WILLIAMS, ALICIA, AuD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JUL-21

CARDIAC ELECTROPHYSIOLOGY

ATHILL, CHARLES, MD†

Provider ID: N/A

3131 BERGER AVE STE 200
SAN DIEGO, CA 92123

Effective as of 01-JAN-21

CHOI, ANTHONY, MD

Provider ID: N/A

3131 BERGER AVE
SAN DIEGO, CA 92123

Effective as of 01-OCT-23

KAGAN, CALVIN, MD

Provider ID: N/A

501 WASHINGTON ST STE
512
SAN DIEGO, CA 92103

Effective as of 01-JUL-24

LERNER, JONATHAN, MD

Provider ID: N/A

412 WASHINGTON ST
SAN DIEGO, CA 92103

Effective as of 01-JUL-23

LERNER, JONATHAN, MD

Provider ID: N/A

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114

Effective as of 01-JUL-23

MAI, TUAN, MD†

Provider ID: N/A

501 WASHINGTON ST STE

512

SAN DIEGO, CA 92103

Effective as of 01-MAR-20

MAI, TUAN, MD†

Provider ID: N/A

501 WASHINGTON ST STE
512
SAN DIEGO, CA 92103

Effective as of 01-JAN-21

PATEL, JIGAR, DO†

Provider ID: N/A

4060 4TH AVE STE 650
SAN DIEGO, CA 92103

Effective as of 01-FEB-23

PATEL, JIGAR, DO†

Provider ID: N/A

4060 4TH AVE STE 650
SAN DIEGO, CA 92103

Effective as of 01-DEC-22

SHAH, ABHISHEK, MD†

Provider ID: N/A

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114

Effective as of 01-JAN-23

SHAH, ABHISHEK, MD

Provider ID: N/A

412 WASHINGTON ST
SAN DIEGO, CA 92103

Effective as of 01-JAN-23

WADHWA, MANISH, MD†

Provider ID: N/A

501 WASHINGTON ST STE
512
SAN DIEGO, CA 92103

Effective as of 01-SEP-15

CARDIOVASCULAR DISEASE

ABELHAD, NADIA, MD

Provider ID: N/A

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114

Effective as of 01-JAN-24

ABELHAD, NADIA, MD

Provider ID: N/A

412 WASHINGTON ST
SAN DIEGO, CA 92103

Effective as of 01-JAN-24

BHATT, JIKEN, MD

Provider ID: N/A

3131 BERGER AVE STE 200
SAN DIEGO, CA 92123

Effective as of 01-FEB-24

CARAZO, MATTHEW, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-NOV-21

CARLSON, STEVEN, MD†

Provider ID: N/A

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114

Teleservice

Effective as of 01-SEP-22

CARLSON, STEVEN, MD†

Provider ID: N/A

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114

Teleservice

Effective as of 01-JAN-21

CARLSON, STEVEN, MD†

Provider ID: N/A

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114

Teleservice

Effective as of 01-APR-21

C1. Lista de proveedores de la red Médico de atención especializada

CHUNG, KIYON, MD†

Provider ID: N/A

4060 4TH AVE STE 650
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

CHUNG, KIYON, MD†

Provider ID: N/A

4060 4TH AVE STE 650
SAN DIEGO, CA 92103
Effective as of 01-AUG-16

COX, JUSTIN, MD†

Provider ID: N/A

3131 BERGER AVE STE 200
SAN DIEGO, CA 92123
Teleservice
Effective as of 01-SEP-21

COX, JUSTIN, MD†

Provider ID: N/A

3131 BERGER AVE STE 200
SAN DIEGO, CA 92123
Teleservice
Effective as of 01-MAY-24

DIGGS, THOMAS, MD†

Provider ID: N/A

501 WASHINGTON ST STE
512
SAN DIEGO, CA 92103
Effective as of 01-JAN-14

DO, HULBERT, MD

Provider ID: N/A

412 WASHINGTON ST
SAN DIEGO, CA 92103
Effective as of 01-OCT-23

DO, HULBERT, MD

Provider ID: N/A

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Effective as of 01-OCT-23

DURAN, EDWARD, MD

Provider ID: N/A

2131 3RD AVE
SAN DIEGO, CA 92101
Effective as of 01-DEC-23

DURAN, EDWARD, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

FRIEDMAN, RICHARD, MD†

Provider ID: N/A

4060 4TH AVE STE 650
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

FRIEDMAN, RICHARD, MD†

Provider ID: N/A

4060 4TH AVE STE 650
SAN DIEGO, CA 92103
Effective as of 01-JAN-14

GARIBYAN, VARTAN, DO†

Provider ID: N/A

4060 4TH AVE STE 500
SAN DIEGO, CA 92103
Effective as of 01-MAR-21

GLASSMAN, JERROLD, MD†

Provider ID: N/A

4060 4TH AVE STE 650
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

GLASSMAN, JERROLD, MD†

Provider ID: N/A

4060 4TH AVE STE 650
SAN DIEGO, CA 92103
Effective as of 01-AUG-20

GOLLAPUDI, RAGHAVA, MD†

Provider ID: N/A

3131 BERGER AVE STE 200

SAN DIEGO, CA 92123
Effective as of 01-NOV-23

HOURLANI, RAYAN, MD

Provider ID: N/A

3131 BERGER AVE STE 200
SAN DIEGO, CA 92123
Teleservice
Effective as of 01-FEB-23

KERAMATI, SHAHIN, MD†

Provider ID: N/A

501 WASHINGTON ST STE
512
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

KERAMATI, SHAHIN, MD†

Provider ID: N/A

501 WASHINGTON ST STE
512
SAN DIEGO, CA 92103
Effective as of 01-MAY-11

KHAN, HASHIM, MD†

Provider ID: N/A

3131 BERGER AVE STE 200
SAN DIEGO, CA 92123
Effective as of 01-APR-21

KIMURA, BRUCE, MD†

Provider ID: N/A

501 WASHINGTON ST STE
512
SAN DIEGO, CA 92103
Effective as of 01-MAY-11

LY, NANCY, MD†

Provider ID: N/A

4844 UNIVERSITY AVE STE
A
SAN DIEGO, CA 92105
Effective as of 01-JAN-21

LY, NANCY, MD†

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

4844 UNIVERSITY AVE STE
A
SAN DIEGO, CA 92105
Effective as of 01-JUN-23

LY, NANCY, MD†

Provider ID: N/A

4844 UNIVERSITY AVE STE
A
SAN DIEGO, CA 92105
Effective as of 01-NOV-23

MAI, TUAN, MD†

Provider ID: N/A

501 WASHINGTON ST STE
512
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

MEHTA, HIRSCH, MD†

Provider ID: N/A

3131 BERGER AVE STE 200
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

MOHAMEDALI, BURHAN, MD†

Provider ID: N/A

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Effective as of 01-SEP-22

MULLVAIN, JEFFRY, MD†

Provider ID: N/A

4060 4TH AVE STE 500
SAN DIEGO, CA 92103
Effective as of 01-JAN-23

NANAVATI, VIMAL, MD†

Provider ID: N/A

16776 BERNARDO CENTER
DR STE 209
SAN DIEGO, CA 92128
Teleservice
Effective as of 01-FEB-23

NANAVATI, VIMAL, MD

Provider ID: N/A

11939 RANCHO BERNARDO
RD STE 120
SAN DIEGO, CA 92128

Teleservice

Effective as of 01-AUG-23

NANAVATI, VIMAL, MD

Provider ID: N/A

11939 RANCHO BERNARDO
RD STE 120
SAN DIEGO, CA 92128

Teleservice

Effective as of 01-AUG-24

NARAYANAN, MEENA, MD†

Provider ID: N/A

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Effective as of 01-SEP-22

NARAYANAN, MEENA, MD†

Provider ID: N/A

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Effective as of 01-APR-21

NARULA, ARVIN, MD†

Provider ID: N/A

3131 BERGER AVE STE 200
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

NAYAK, KESHAV, MD†

Provider ID: N/A

501 WASHINGTON ST STE
512
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

NAYAK, KESHAV, MD†

Provider ID: N/A

501 WASHINGTON ST STE

512

SAN DIEGO, CA 92103
Effective as of 01-MAY-19

NGUYEN, TRI, MD†

Provider ID: N/A

4551 EL CAJON BLVD
SAN DIEGO, CA 92115
Teleservice

Effective as of 01-JAN-23

NISHIMURA-KAMINSKI, MARIN, MD

Provider ID: N/A

3131 BERGER AVE STE 200
SAN DIEGO, CA 92123
Teleservice

Effective as of 01-MAR-23

OMRAN, JAD, MD

Provider ID: N/A

3131 BERGER AVE STE 200
SAN DIEGO, CA 92123
Teleservice

Effective as of 01-FEB-23

PARIKH, MILIND, DO†

Provider ID: N/A

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Effective as of 01-SEP-22

PARIZO, JUSTIN, MD†

Provider ID: N/A

3131 BERGER AVE STE 200
SAN DIEGO, CA 92123
Teleservice

Effective as of 01-SEP-21

PATEL, JIGAR, DO

Provider ID: N/A

4060 FOURTH AVENUE,
STE 650
SAN DIEGO, CA 92103

CI. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-MAR-24

PATEL, JIGAR, DO†

Provider ID: N/A

📍 4060 4TH AVE STE 650
SAN DIEGO, CA 92103

Effective as of 01-SEP-24

PROHASKA, THOMAS, MD

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JUL-23

SALAMI, ALI, MD†

Provider ID: N/A

📍 501 WASHINGTON ST STE
512
SAN DIEGO, CA 92103

Effective as of 01-MAY-11

SARSAM, LUAY, MD

Provider ID: N/A

📍 412 WASHINGTON ST
SAN DIEGO, CA 92103

Effective as of 01-JUL-23

SARSAM, LUAY, MD

Provider ID: N/A

📍 292 EUCLID AVE STE 210
SAN DIEGO, CA 92114

Effective as of 01-JUL-23

SARSAM, LUAY, MD

Provider ID: N/A

📍 292 EUCLID AVE STE 210
SAN DIEGO, CA 92114

Effective as of 01-JUL-23

SHAH, ABHISHEK, MD†

Provider ID: N/A

📍 292 EUCLID AVE STE 210
SAN DIEGO, CA 92114

Effective as of 01-SEP-22

SHAH, KULIN, MD†

Provider ID: N/A

📍 292 EUCLID AVE STE 210
SAN DIEGO, CA 92114

Effective as of 01-JAN-23

SHAH, KULIN, MD†

Provider ID: N/A

📍 412 WASHINGTON ST
SAN DIEGO, CA 92103

Effective as of 01-JAN-23

SHEREV, DIMITRI, MD†

Provider ID: N/A

📍 6402 EL CAJON BLVD STE
102
SAN DIEGO, CA 92115

Effective as of 01-FEB-21

SUDHAKAR, DEEPTHI, MD†

Provider ID: N/A

📍 292 EUCLID AVE STE 210
SAN DIEGO, CA 92114

Effective as of 01-JAN-23

SUDHAKAR, DEEPTHI, MD†

Provider ID: N/A

📍 412 WASHINGTON ST
SAN DIEGO, CA 92103

Effective as of 01-JAN-23

WILLIAMS, JEFFREY, MD

Provider ID: N/A

📍 4033 3RD AVE STE 204
SAN DIEGO, CA 92103

Effective as of 01-SEP-23

ZAVARO, SUHAIL, MD

Provider ID: N/A

📍 3131 BERGER AVE STE 200
SAN DIEGO, CA 92123

Teleservice

Effective as of 01-FEB-23

ACUPUNCTURIST

ARELLANO, JACQUELINE, LAC

Provider ID: N/A

📍 4910 DIRECTORS PL
SAN DIEGO, CA 92121

Effective as of 01-FEB-24

ARELLANO, JACQUELINE, LAC†

Provider ID: N/A

📍 9909 MIRA MESA BLVD
STE 200
SAN DIEGO, CA 92131

Effective as of 01-MAR-21

ARELLANO, JACQUELINE, LAC†

Provider ID: N/A

📍 9333 GENESEE AVE STE
200
SAN DIEGO, CA 92121

Effective as of 01-MAR-21

ARELLANO, JACQUELINE, LAC

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-FEB-24

ARELLANO, JACQUELINE, LAC†

Provider ID: N/A

📍 330 LEWIS ST
SAN DIEGO, CA 92103

Effective as of 01-MAR-21

CALLISON, YANHUI, LAC

Provider ID: N/A

📍 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-OCT-23

CERTIFIED

**C1. Lista de proveedores de la red
Médico de atención especializada**

CALLISON, YANHUI, LAC

Provider ID: N/A

4167 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-OCT-23

JULIAN, FIDES, LAC†

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103

Effective as of 01-MAR-21

JULIAN, FIDES, LAC

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-FEB-24

JULIAN, FIDES, LAC†

Provider ID: N/A

9333 GENESEE AVE STE
200

SAN DIEGO, CA 92121

Effective as of 01-MAR-21

JULIAN, FIDES, LAC†

Provider ID: N/A

9909 MIRA MESA BLVD
STE 200

SAN DIEGO, CA 92131

Effective as of 01-MAR-21

JULIAN, FIDES, LAC

Provider ID: N/A

4910 DIRECTORS PL
SAN DIEGO, CA 92121

Effective as of 01-FEB-24

LAM, KHANH, LAC†

Provider ID: N/A

3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110

Teleservice

Effective as of 01-SEP-21

LAM, KHANH, LAC†

Provider ID: N/A

3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110

Teleservice

Effective as of 01-NOV-22

MURRAY, STEVEN, LAC

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-FEB-24

MURRAY, STEVEN, LAC†

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103

Effective as of 01-AUG-21

MURRAY, STEVEN, LAC†

Provider ID: N/A

9333 GENESEE AVE STE
220

SAN DIEGO, CA 92121

Effective as of 01-AUG-21

MURRAY, STEVEN, LAC†

Provider ID: N/A

9909 MIRA MESA BLVD
STE 200

SAN DIEGO, CA 92131

Effective as of 01-AUG-21

MURRAY, STEVEN, LAC

Provider ID: N/A

4910 DIRECTORS PL
SAN DIEGO, CA 92121

Effective as of 01-FEB-24

NOVAK, ERIKA, LAC

Provider ID: N/A

3282 GOVERNOR DR
SAN DIEGO, CA 92122

Teleservice

Effective as of 01-NOV-22

SEITZ, GRETCHEN, LAC

Provider ID: N/A

9995 CARMEL MOUNTAIN
RD STE B10-B11

SAN DIEGO, CA 92129

Effective as of 01-JAN-21

SEITZ, GRETCHEN, LAC

Provider ID: N/A

10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

Effective as of 01-JAN-21

TANG-RITCHIE, LENG, LAC

Provider ID: N/A

4910 DIRECTORS PL
SAN DIEGO, CA 92121

Effective as of 01-FEB-24

TANG-RITCHIE, LENG, LAC

Provider ID: N/A

9909 MIRA MESA BLVD
STE 200

SAN DIEGO, CA 92131

Effective as of 01-FEB-24

TANG-RITCHIE, LENG, LAC†

Provider ID: N/A

9333 GENESEE AVE
SAN DIEGO, CA 92121

Effective as of 01-DEC-21

TANG-RITCHIE, LENG, LAC†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-DEC-21

TANG-RITCHIE, LENG, LAC†

Provider ID: N/A

330 LEWIS ST

C1. Lista de proveedores de la red Médico de atención especializada

SAN DIEGO, CA 92103
Effective as of 01-DEC-21

CERTIFIED NURSE PRACTITIONER

AGUILA, YESENIA, NP

Provider ID: N/A

📍 292 EUCLID AVE STE 115
SAN DIEGO, CA 92114
Effective as of 01-FEB-24

ALSTEEN, STEPHANIE, NP†

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

AMOS, MARIA, NP†

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

ANTHONY, SHARON, NP†

Provider ID: N/A

📍 350 DICKINSON ST
SAN DIEGO, CA 92103*
Effective as of 01-DEC-21

ASHMAN, ELLEN, NP†

Provider ID: N/A

📍 4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

ASHMAN, ELLEN, NP†

Provider ID: N/A

📍 4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

ATILLO, RONALD MAR, NP†

Provider ID: N/A

📍 200 W ARBOR DR

SAN DIEGO, CA 92103
Effective as of 01-AUG-22

BILOTTA, NATALIE, NP†

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

BINAVI, HOWNAZ, NP†

Provider ID: N/A

📍 4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

BINAVI, HOWNAZ, NP†

Provider ID: N/A

📍 9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

BROWN, VICTORIA, NP

Provider ID: N/A

📍 350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-JUL-24

BROWN, VICTORIA, NP

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-24

BUI, ANH, NPF

Provider ID: N/A

📍 7345 LINDA VISTA RD STE A
SAN DIEGO, CA 92111
Teleservice

Effective as of 01-NOV-23

BULLER, RIYAN, NPF

Provider ID: N/A

📍 3737 MORAGA AVE STE
B103

SAN DIEGO, CA 92117
Teleservice

Effective as of 01-JUN-24

BULLER, RIYAN, NPF

Provider ID: N/A

📍 9909 MIRA MESA BLVD
STE 110
SAN DIEGO, CA 92131

Teleservice

Effective as of 01-JUN-24

BURNEY, BRAEANNE, NP†

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

CALCUTT, SUZANNE, NP

Provider ID: N/A

📍 6386 ALVARADO CT STE
101
SAN DIEGO, CA 92120

Teleservice

Effective as of 01-JUN-24

CAMAQUIN, MIA, NP

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-APR-23

CAMARGO-LOWTHERS, ANGELICA, NP

Provider ID: N/A

📍 8010 FROST ST STE 220
SAN DIEGO, CA 92123
Effective as of 01-JUL-23

CAMARGO-LOWTHERS, ANGELICA, NP†

Provider ID: N/A

📍 8010 FROST ST STE 510
SAN DIEGO, CA 92123

CI. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-SEP-22

**CAMARGO-LOWTHERS,
ANGELICA, NP**

Provider ID: N/A

8010 FROST ST STE 100
SAN DIEGO, CA 92123
Effective as of 01-AUG-24

**CAMARGO-LOWTHERS,
ANGELICA, NP†**

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

CAPORELLO, AMY, NPF

Provider ID: N/A

555 W C ST STE 102
SAN DIEGO, CA 92101
Teleservice
Effective as of 01-JUN-24

CARDENAS, MIRIAM, NPF

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-OCT-23

CARDENAS, MIRIAM, NPF

Provider ID: N/A

4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-OCT-23

CASE, ERINN, NP

Provider ID: N/A

3737 MORAGA AVE STE
B103
SAN DIEGO, CA 92117
Effective as of 01-JAN-21

CAVIRIS, DIONYSIA, NPF

Provider ID: N/A

375 CAMINO DE LA REINA
STE C
SAN DIEGO, CA 92108
Teleservice
Effective as of 01-JUN-24

**CELESTIN-RAMSEY, AKANKE,
NPF**

Provider ID: N/A

950 S EUCLID AVE
SAN DIEGO, CA 92114
Teleservice
Effective as of 01-DEC-21

CHANTALA, ELIZABETH, NP†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

CHAVEZ, ALEXANDRIA, NP†

Provider ID: N/A

4510 EXECUTIVE DR STE 7
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

CHEATHAM, BRITTANY, NP†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

CHEN, KATIE, NP

Provider ID: N/A

4440 EUCLID AVE STE A
SAN DIEGO, CA 92115
Effective as of 01-MAR-24

CHOATE, BERNADETTE, NP†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-DEC-21

CHOATE, BERNADETTE, NP†

Provider ID: N/A

4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122
Effective as of 01-DEC-21

CHRISMAN, JESSICA, NP

Provider ID: N/A

3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Effective as of 01-MAR-24

CHUNG, SUEMIN, NP

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-AUG-24

CHUNG, SUEMIN, NP

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-24

CHUNG, SUEMIN, NP

Provider ID: N/A

350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-AUG-24

COLEMAN, PAGE, NP

Provider ID: N/A

4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
Effective as of 01-FEB-24

CONNER, PAMELA, NP

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

C1. Lista de proveedores de la red Médico de atención especializada

CONNOR, CAROLINE, NP†

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-JUN-21

CONNOR, CAROLINE, NP†

Provider ID: N/A

6030 VILLAGE WAY
SAN DIEGO, CA 92130
Effective as of 01-JUN-21

CUTLER, APRYL, NP

Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-JAN-24

DE DIOS, SARAH JANE, NP

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

DEL VECCHIO, MEGAN, NP

Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-SEP-23

DEL VECCHIO, MEGAN, NP

Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-SEP-23

DELARA, KAROLJOHN, NP

Provider ID: N/A

4440 EUCLID AVE STE A
SAN DIEGO, CA 92115
Effective as of 01-MAR-24

DHARKAR-SURBER, SAPNA, NP

Provider ID: N/A

4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-OCT-23

DHARKAR-SURBER, SAPNA, NP

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-OCT-23

DILLEN, REBECCA, NP

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

DOAN, ANGELA, NP†

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

DOAN, ANGELA, NP†

Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

DRISCOLL, KARRIE, NP†

Provider ID: N/A

4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122
Effective as of 01-DEC-21

DRISCOLL, SUSAN, NP

Provider ID: N/A

1666 PRECISION PARK LN
SAN DIEGO, CA 92173
Effective as of 01-OCT-23

DWYER, ERIN, NP†

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

DWYER, ERIN, NP†

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-SEP-22

DWYER, ERIN, NP

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-FEB-24

DWYER, ERIN, NP

Provider ID: N/A

3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

DWYER, ERIN, NP

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-FEB-24

EDNACOT, KARYNNE, NPF

Provider ID: N/A

8010 FROST ST STE 100
SAN DIEGO, CA 92123
Teleservice
Effective as of 01-AUG-24

EDNACOT, KARYNNE, NPF

Provider ID: N/A

8010 FROST ST STE 100
SAN DIEGO, CA 92123
Teleservice

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-JUL-24

ERICKSON, LISA, NP†

Provider ID: N/A

📍 4168 FRONT ST
SAN DIEGO, CA 92103

Effective as of 01-FEB-22

ERICKSON, LISA, NP†

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-FEB-22

FEIZI, SEDI, NP†

Provider ID: N/A

📍 995 GATEWAY CENTER
WAY STE 207
SAN DIEGO, CA 92102

Effective as of 01-JAN-21

FEROLIE, PAM, NP

Provider ID: N/A

📍 375 CAMINO DE LA REINA
STE C
SAN DIEGO, CA 92108

Effective as of 01-DEC-23

FILIPPELLO, LAUREN, NPF

Provider ID: N/A

📍 3863 CLAIREMONT DR
SAN DIEGO, CA 92117

Teleservice

Effective as of 01-OCT-23

GIORGI, ASHLEY, NP

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JAN-24

GIORGI, ASHLEY, NP

Provider ID: N/A

📍 350 DICKINSON ST
SAN DIEGO, CA 92103

Effective as of 01-JAN-24

GOMEZ, LESLIE, NP

Provider ID: N/A

📍 8899 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122

Effective as of 01-MAY-23

GOMEZ, LESLIE, NP

Provider ID: N/A

📍 16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-MAY-23

GOMEZ, LESLIE, NP

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-MAY-23

GONZALEZ, LISA, NP

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-DEC-23

GORDON, DANIELLE, NP†

Provider ID: N/A

📍 292 EUCLID AVE STE 210
SAN DIEGO, CA 92114

Effective as of 01-JAN-21

GROSS, KIMBERLY, NP†

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-AUG-22

GROSS, KIMBERLY, NP†

Provider ID: N/A

📍 4510 EXECUTIVE DR
SAN DIEGO, CA 92121

Effective as of 01-AUG-22

HA, THU, NP

Provider ID: N/A

📍 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Effective as of 01-SEP-22

HA, THU, NP

Provider ID: N/A

📍 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Effective as of 01-SEP-22

HARVEY, DELFINA, NP

Provider ID: N/A

📍 3490 PALM AVE
SAN DIEGO, CA 92154

Effective as of 01-JUL-23

HAYS, SHEENA, NPF

Provider ID: N/A

📍 4060 4TH AVE STE 310
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-JUN-24

HAYS, SHEENA, NPF

Provider ID: N/A

📍 3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123

Teleservice

Effective as of 01-JUN-24

HAYS, SHEENA, NPF

Provider ID: N/A

📍 3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123

Teleservice

Effective as of 01-JUN-24

HEFNER, ANNA, NP

Provider ID: N/A

📍 10737 CAMINO RUIZ STE

C1. Lista de proveedores de la red Médico de atención especializada

235
SAN DIEGO, CA 92126
Effective as of 01-JUL-24

HILL, GENIELYN, NP

Provider ID: N/A
10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126
Effective as of 01-MAY-23

HILLIARD, THESALONICA, NP

Provider ID: N/A
10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126
Effective as of 01-SEP-22

HOOPER, BONNIE, NP

Provider ID: N/A
9095 RIO SAN DIEGO DR
STE 300
SAN DIEGO, CA 92108
Effective as of 01-MAY-24

HOOPER, BONNIE, NP†

Provider ID: N/A
9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

HORNFELD, COURTNEY, NP

Provider ID: N/A
6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

JENKINS, ERIN, NP

Provider ID: N/A
4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

JENKINS, ERIN, NP

Provider ID: N/A
4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

JENSEN, ADRIENNE, NP

Provider ID: N/A
4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-APR-23

JENSEN, ADRIENNE, NP

Provider ID: N/A
350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

JONES, CHRISTA, NP

Provider ID: N/A
6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

JONES, CHRISTA, NP†

Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

KAHL, NICHOLAS, NP

Provider ID: N/A
12843 EL CAMINO REAL
STE 203
SAN DIEGO, CA 92130
Effective as of 01-JAN-21

KELLEY, JESSICA, NP

Provider ID: N/A
3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-APR-24

KI, TRISH, NP†

Provider ID: N/A

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

KI, TRISH, NP†

Provider ID: N/A
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

KYI, MYA, NP

Provider ID: N/A
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-MAR-24

LARSON, LINDSAY, NP

Provider ID: N/A
6386 ALVARADO CT STE
101
SAN DIEGO, CA 92120
Teleservice
Effective as of 01-JUN-24

LEE, MINDY, NP

Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

LEE, MINDY, NP

Provider ID: N/A
8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

LEE, MINDY, NP

Provider ID: N/A
16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

LOWE, ASHLEY, NP

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201

SAN DIEGO, CA 92123
Effective as of 01-MAY-24

LOWE, ASHLEY, NP

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201

SAN DIEGO, CA 92123
Effective as of 01-MAY-24

MADGEDI, SHEILA, NP†

Provider ID: N/A

4282 GENESEE AVE STE
204
SAN DIEGO, CA 92117

Teleservice

Effective as of 01-JUL-21

MANRIQUEZ, LISETTE, NPF

Provider ID: N/A

286 EUCLID AVE STE 302
SAN DIEGO, CA 92114

Effective as of 01-MAY-24

MANZANO, EUNICE, NP†

Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121

Effective as of 01-AUG-22

MANZANO, EUNICE, NP†

Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121

Effective as of 01-AUG-22

MAROSOK, MICHELLE, NP

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127

Teleservice

Effective as of 01-MAR-24

MARTINEZ, CAROLYN, NP

Provider ID: N/A

1016 OUTER RD
SAN DIEGO, CA 92154

Effective as of 01-AUG-22

MCCLAIN, MEGAN, NP†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-AUG-22

MCGILLOWAY, MELANIE, NP†

Provider ID: N/A

3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123

Effective as of 01-JAN-21

MCGOWAN, GLAIZA ANN, NP

Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121

Effective as of 01-DEC-23

MCGOWAN, GLAIZA ANN, NP

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103

Effective as of 01-DEC-23

MEDINA, RUBELETA, NP

Provider ID: N/A

9995 CARMEL MOUNTAIN
RD STE B1011
SAN DIEGO, CA 92129

Effective as of 01-FEB-23

MELTZER, VIRGINIA, NP†

Provider ID: N/A

350 DICKINSON ST
SAN DIEGO, CA 92103

Effective as of 01-DEC-21

MEYER, ISAAC, NP

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JUN-23

MEYER, ISAAC, NP

Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121

Effective as of 01-JUN-23

MICK, SHARON, NP

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Effective as of 01-MAY-23

MICK, SHARON, NP

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-MAY-23

MICK, SHARON, NP

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-MAY-23

MOONEY, PATRICIA, NP†

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127

Teleservice

Effective as of 01-MAY-21

MOONEY, PATRICIA, NP†

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127

C1. Lista de proveedores de la red Médico de atención especializada

Teleservice

Effective as of 01-JAN-24

MULVEY, CAOILFHIONN, NP†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

MWAURA, WAIRIMU, NP†

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Teleservice
Effective as of 01-JUN-21

NAGATA, CERAH, NP

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-APR-23

NAGATA, CERAH, NP

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

NETZEL, JENNIFER, NP†

Provider ID: N/A

9909 MIRA MESA BLVD
STE 200
SAN DIEGO, CA 92131
Effective as of 01-AUG-22

NETZEL, JENNIFER, NP†

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-AUG-22

NETZEL, JENNIFER, NP†

Provider ID: N/A

9333 GENESEE AVE
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

NGO-BIGGE, ANGELA, NP

Provider ID: N/A

7345 LINDA VISTA RD STE A
SAN DIEGO, CA 92111
Teleservice
Effective as of 01-JUN-23

NOCEDA, ANA, NP†

Provider ID: N/A

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

NOCEDA, ANA, NP†

Provider ID: N/A

4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
Effective as of 01-SEP-22

OREJEL, EDITH, NP

Provider ID: N/A

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-FEB-23

OREJEL, EDITH, NP

Provider ID: N/A

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-FEB-23

ORPILLA, IMELDA, NP

Provider ID: N/A

9995 CARMEL MOUNTAIN
RD STE B10-B11
SAN DIEGO, CA 92129
Effective as of 01-JAN-21

ORPILLA, IMELDA, NP

Provider ID: N/A

10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126
Effective as of 01-AUG-21

PACE, RACHELLE, NP

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

PACE, RACHELLE, NP

Provider ID: N/A

350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

PACE, RACHELLE, NP

Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-JAN-24

PACE, RACHELLE, NP

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-SEP-24

PATIAG, DANIEL, NP

Provider ID: N/A

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

PATIAG, DANIEL, NP

Provider ID: N/A

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

PEET, MELISSA, NPF

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-AUG-24

PEET, MELISSA, NPF

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-24

PEREZ, ALLYSSA, NP†

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

PEREZ, ALLYSSA, NP

Provider ID: N/A

📍 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

PEREZ, ALLYSSA, NP†

Provider ID: N/A

📍 4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-NOV-21

PETTIS, BETH, NP†

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-21

PITECK, CAITLIN, NPF

Provider ID: N/A

📍 555 W C ST STE 102
SAN DIEGO, CA 92101
Teleservice
Effective as of 01-JUN-24

POLIZZI, BRITTANY, NP†

Provider ID: N/A

📍 3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Effective as of 01-JUN-22

POVOLI, LAUREN, NPF

Provider ID: N/A

📍 3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-APR-24

RADMAN, MIRKA, NP

Provider ID: N/A

📍 6402 EL CAJON BLVD STE
102
SAN DIEGO, CA 92115
Effective as of 01-AUG-23

RAJAEI, NILOUFAR, NP†

Provider ID: N/A

📍 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-AUG-22

REAL, MARIA, NP

Provider ID: N/A

📍 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-OCT-23

REAL, MARIA, NP

Provider ID: N/A

📍 4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-OCT-23

REDDY, PRIYA, NP

Provider ID: N/A

📍 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Effective as of 01-NOV-22

REDDY, PRIYA, NP

Provider ID: N/A

📍 4171 FAIRMOUNT AVE

SAN DIEGO, CA 92105
Effective as of 01-NOV-22

REGEV, SHANEE, NP

Provider ID: N/A

📍 4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-APR-23

REGEV, SHANEE, NP

Provider ID: N/A

📍 350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

REINER, GAIL, NP†

Provider ID: N/A

📍 4510 EXECUTIVE DR STE
325
SAN DIEGO, CA 92121
Effective as of 01-OCT-21

REINER, GAIL, NP

Provider ID: N/A

📍 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

RENZAS, JENNIFER, NP

Provider ID: N/A

📍 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-JUL-21

RENZAS, JENNIFER, NP

Provider ID: N/A

📍 4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-JUL-21

ROBERTSON, RACHAEL, NP†

Provider ID: N/A

📍 200 W ARBOR DR

C1. Lista de proveedores de la red Médico de atención especializada

SAN DIEGO, CA 92103
Effective as of 01-JAN-22

RODENMEYER, EVE, NP

Provider ID: N/A

📍 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-JUL-22

RODENMEYER, EVE, NP

Provider ID: N/A

📍 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-JUL-22

ROSCOE, SYDNEY, NP

Provider ID: N/A

📍 350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-MAR-24

ROSCOE, SYDNEY, NP

Provider ID: N/A

📍 4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-MAR-24

ROSCOE, SYDNEY, NP

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAR-24

ROSS, CRYSTAL, NP†

Provider ID: N/A

📍 350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-DEC-21

ROSSI, CATHERINE, NP†

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

ROZO, JOSE, NP

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

RUFO, ROSAVIDA, NP

Provider ID: N/A

📍 10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131
Effective as of 01-JUN-23

SABIN, NANCY, NP

Provider ID: N/A

📍 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

SABIN, NANCY, NP

Provider ID: N/A

📍 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

SALINAS, NIECEL, NP†

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

SALOTTI, JOANIE, NP†

Provider ID: N/A

📍 4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

SALOTTI, JOANIE, NP†

Provider ID: N/A

📍 4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

SANADA, VIVIANE, NP

Provider ID: N/A

📍 995 GATEWAY CENTER
WAY STE 202
SAN DIEGO, CA 92102
Teleservice
Effective as of 01-APR-24

SANTANGELO, JOANNE, NP

Provider ID: N/A

📍 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

SANTANGELO, JOANNE, NP

Provider ID: N/A

📍 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

SATTERWHITE, MAURINE, NP

Provider ID: N/A

📍 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

SATTERWHITE, MAURINE, NP

Provider ID: N/A

📍 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

SCOTT, KELLY, NP

Provider ID: N/A

📍 2630 1ST AVE
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-JUL-22

SEARS-WILEY, ELIZABETH, NP†

Provider ID: N/A

📍 350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-FEB-21

SHARMA, RAKHI, NP

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

SHAW, MARILYNN, NP

Provider ID: N/A

3131 BERGER AVE STE 200
SAN DIEGO, CA 92123
Effective as of 01-MAR-23

SIETSMA, ALEXANDRA, NP†

Provider ID: N/A

4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
Effective as of 01-JUL-22

SMITH, JENNIFER, NP†

Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

SMITH, JENNIFER, NP†

Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

SNYDER, KIRSTIN, NP

Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-APR-23

SNYDER, KIRSTIN, NP

Provider ID: N/A

350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

SNYDER, KIRSTIN, NP

Provider ID: N/A

6655 ALVARADO RD

SAN DIEGO, CA 92120
Effective as of 01-AUG-24

SOLOMON, AMANDA, NP

Provider ID: N/A

350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

SOLOMON, AMANDA, NP

Provider ID: N/A

16918 DOVE CANYON RD
STE 100
SAN DIEGO, CA 92127
Effective as of 01-JUN-23

SPAULDING, ENJOLI, NP

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Teleservice
Effective as of 01-AUG-23

SPAULDING, ENJOLI, NP

Provider ID: N/A

6402 EL CAJON BLVD STE
100
SAN DIEGO, CA 92115
Effective as of 01-MAY-23

STAHL, STEPHANIE, NP†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-21

STEFFENSMEIER, CHRISTA, NP

Provider ID: N/A

3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-APR-24

SUHIR, ERIN, NP

Provider ID: N/A

4157 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice

Effective as of 01-MAR-24

SWEENEY, ZSAZSA, NP

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-JUL-21

TANNOUS, PETER, NP

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105*
Effective as of 01-OCT-24

TEJADA BRAS, SANDY, NP

Provider ID: N/A

2929 HEALTH CENTER DR
SAN DIEGO, CA 92123*
Effective as of 01-JUL-22

TILLEY, MONICA, NPF

Provider ID: N/A

12843 EL CAMINO REAL
STE 203
SAN DIEGO, CA 92130
Effective as of 01-DEC-21

TOMICICH, STEPHANIE, NP

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-FEB-24

TOMICICH, STEPHANIE, NP

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-FEB-24

C1. Lista de proveedores de la red Médico de atención especializada

TOMICICH, STEPHANIE, NP

Provider ID: N/A

3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

TOMICICH, STEPHANIE, NP

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

TOPIK, AMANDA, NP†

Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

TOPIK, AMANDA, NP†

Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

TOWNS, ARTA, NP

Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-JUN-23

TOWNS, ARTA, NP

Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-JUN-23

TRAN, DAPHNE, NP

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-JUN-23

TREJO, ANA, NP

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-24

TUCKER, LANIKA, NP

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-24

TUCKER, LANIKA, NP

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-JUL-24

VILLANUEVADEGUTIE, BERENICE, NP

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-MAY-21

WHITEHURST, UNIQUE, NP

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-AUG-24

WHITEHURST, UNIQUE, NP

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-24

WHITEHURST, UNIQUE, NP

Provider ID: N/A

350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-AUG-24

WIETZKE, MATTHEW, NP

Provider ID: N/A

200 W ARBOR DR

SAN DIEGO, CA 92103
Effective as of 01-JAN-24

WIETZKE, MATTHEW, NP

Provider ID: N/A

350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

WILLEY, MARTI, NP†

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Teleservice
Effective as of 01-JUN-21

WILLEY, MARTI, NP†

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Teleservice
Effective as of 01-JAN-21

WILLIAMS, BREAHA, NP

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Effective as of 01-DEC-21

WILLIAMS, BREAHA, NP

Provider ID: N/A

4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Effective as of 01-DEC-21

WONG, MAYBELLE, NP


Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

WONG, MAYBELLE, NP


Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

 350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-JAN-24


WOO, ANDY, NP

Provider ID: N/A

 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

YARTSEVA, YULIYA, NP


Provider ID: N/A

 3737 MORAGA AVE STE
B103
SAN DIEGO, CA 92117
Effective as of 01-JAN-21

CERTIFIED REGISTERED NURSE ANESTHETIST


CALABRIA, MEGAN, CRNA

Provider ID: N/A

 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23


CANTRELL, SARAH, CRNA

Provider ID: N/A

 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-23


COLE, JASON, CRNA†

Provider ID: N/A

 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-21


DOLLAND, STEVEN, CRNA†

Provider ID: N/A

 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-21


DULAY, JOTI, CRNA

Provider ID: N/A

 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23


EVANS, CATHERINE, CRNA

Provider ID: N/A

 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-23


FIEDLER, DEREK, CRNA

Provider ID: N/A

 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23


GONZALEZ, LISA, CRNA

Provider ID: N/A

 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23


GRIFFIN, SETH, CRNA

Provider ID: N/A

 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23


JOHNSTON, RACHEL, CRNA

Provider ID: N/A

 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

POLIKOWSKI, SAMANTHA, CRNA†

Provider ID: N/A

 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

POLLOM, JESSICA, CRNA†


Provider ID: N/A

 200 W ARBOR DR

SAN DIEGO, CA 92103
Effective as of 01-JUL-21


RAMIREZ, NICOLE, CRNA†

Provider ID: N/A

 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22


ROADMAN, KEENE, CRNA

Provider ID: N/A

 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23


SACKS, BRENT, CRNA†

Provider ID: N/A

 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-APR-21


SNODGRASS, JULIE, CRNA†

Provider ID: N/A

 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-21

VINCENT, BERLIN, CRNA†


Provider ID: N/A

 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

CERTIFIED REGISTERED NURSE MIDWIFE

CHOI, NATHALIE, CRNM

Provider ID: N/A

 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

CHOI, NATHALIE, CRNM

Provider ID: N/A

 4168 FRONT ST

C1. Lista de proveedores de la red Médico de atención especializada

SAN DIEGO, CA 92103
Effective as of 01-SEP-23

CORRY, ANDREA, CRNM

Provider ID: N/A
7910 FROST ST
SAN DIEGO, CA 92123
Effective as of 01-SEP-23

CORRY, ANDREA, CRNM

Provider ID: N/A
4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

CORRY, ANDREA, CRNM

Provider ID: N/A
6030 VILLAGE WAY
SAN DIEGO, CA 92130
Effective as of 01-SEP-23

CORRY, ANDREA, CRNM

Provider ID: N/A
16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-SEP-23

CORTES, CHRISTINE, CRNM†

Provider ID: N/A
4290 POLK AVE
SAN DIEGO, CA 92105
Effective as of 01-JUL-22

EKHOLM, JANNA, CRNM†

Provider ID: N/A
4290 POLK AVE
SAN DIEGO, CA 92105
Effective as of 01-JUL-22

ELY-KONOSKE, RACHEL, CRNM

Provider ID: N/A
4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

ELY-KONOSKE, RACHEL, CRNM

Provider ID: N/A
16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-DEC-23

ELY-KONOSKE, RACHEL, CRNM

Provider ID: N/A
3750 CONVOY ST STE 312
SAN DIEGO, CA 92111
Effective as of 01-DEC-23

GUNTHER, HOPE, CRNM†

Provider ID: N/A
4290 POLK AVE
SAN DIEGO, CA 92105
Effective as of 01-JUL-22

MAST, ASHLEY, CRNM

Provider ID: N/A
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-OCT-23

NATHAN, CARLY, CRNM

Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-23

NATHAN, CARLY, CRNM

Provider ID: N/A
3750 CONVOY ST STE 312
SAN DIEGO, CA 92111
Effective as of 01-AUG-23

RAY, BROOKE, CRNM†

Provider ID: N/A
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice

Effective as of 01-SEP-21

STRAUSS, JOANNA, CRNM

Provider ID: N/A
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-MAY-21

TAYLOR, INGE, CRNM†

Provider ID: N/A
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-JUL-22

VU HILL, ERICA, NP†

Provider ID: N/A
4290 POLK AVE
SAN DIEGO, CA 92105
Effective as of 01-JUL-22

CHIROPRACTOR

ASSADIAN, MEHRAK, DC

Provider ID: N/A
950 S EUCLID AVE
SAN DIEGO, CA 92114
Effective as of 01-JAN-21

CABALLERO, JAMES, DC

Provider ID: N/A
10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126
Effective as of 01-NOV-23

CABALLERO, JAMES, DC

Provider ID: N/A
9995 CARMEL MOUNTAIN
RD STE B10 AND B11
SAN DIEGO, CA 92129
Effective as of 01-NOV-23

DORADO, SUE, DC

Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Effective as of 01-OCT-23

GILIBERTO, JOSEPH, DC†
Provider ID: N/A

9995 CARMEL MOUNTAIN
RD STE D
SAN DIEGO, CA 92129
Effective as of 01-AUG-22

GILIBERTO, JOSEPH, DC†
Provider ID: N/A

10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126
Effective as of 01-AUG-22

HALEY, STEVEN, DC
Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-OCT-23

KAZEM, AHMAD, DC
Provider ID: N/A

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
Effective as of 01-SEP-24

LE, BRANDON, DC
Provider ID: N/A

4290 POLK AVE
SAN DIEGO, CA 92105
Effective as of 01-JUL-22

LE, BRANDON, DC
Provider ID: N/A

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-JUL-22

LUU, DANIEL, DC†
Provider ID: N/A

4419 EUCLID AVE STE 105
SAN DIEGO, CA 92115
Effective as of 01-SEP-22

LUU, DANIEL, DC†
Provider ID: N/A

4419 EUCLID AVE STE 105
SAN DIEGO, CA 92115
Effective as of 01-SEP-22

MONTANE, RUBEN, DC
Provider ID: N/A

1016 OUTER RD
SAN DIEGO, CA 92154*
Effective as of 01-AUG-24

ROSENBERG, ERIK, DC
Provider ID: N/A

7612 LINDA VISTA RD STE
109
SAN DIEGO, CA 92111
Effective as of 01-NOV-23

TRUONG, VENNES, DC
Provider ID: N/A

10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126
Effective as of 01-OCT-23

DERMATOLOGY

AHLUWALIA, JUSLEEN, MD
Provider ID: N/A

9878 HIBERT ST STE 100
SAN DIEGO, CA 92131
Effective as of 01-DEC-20

ANGRA, KUNAL, MD†
Provider ID: N/A

9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Teleservice
Effective as of 01-JUL-21

ANGRA, KUNAL, MD†
Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-DEC-22

ANGRA, KUNAL, MD†
Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-JUL-21

BOEN, MONICA, MD†
Provider ID: N/A

9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-SEP-22

BOEN, MONICA, MD†
Provider ID: N/A

9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-SEP-22

BOEN, MONICA, MD†
Provider ID: N/A

9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-MAR-20

BOEN, MONICA, MD†
Provider ID: N/A

9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

BRADSHAW, MICHAEL, MD
Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

📄 9878 HIBERT ST STE 100
SAN DIEGO, CA 92131
Effective as of 01-JUL-16

BRAUN, TARA, MD

Provider ID: N/A

📄 4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-MAR-24

BROUHA, BROOK, MD

Provider ID: N/A

📄 4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Effective as of 01-NOV-23

BROUHA, BROOK, MD†

Provider ID: N/A

📄 9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-SEP-22

BROUHA, BROOK, MD†

Provider ID: N/A

📄 9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JUN-18

BROUHA, BROOK, MD†

Provider ID: N/A

📄 9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

BROUHA, BROOK, MD†

Provider ID: N/A

📄 9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

CALAME, ANTOANELLA, MD†

Provider ID: N/A

📄 6605 NANCY RIDGE DR
SAN DIEGO, CA 92121
Effective as of 01-JUL-22

CELANO, NICHOLAS, MD

Provider ID: N/A

📄 5222 BALBOA AVE FL 5
SAN DIEGO, CA 92117
Teleservice
Effective as of 01-AUG-24

CHEN, BRYAN, MD

Provider ID: N/A

📄 9878 HIBERT ST STE 100
SAN DIEGO, CA 92131*
Effective as of 01-JUL-16

CHEN, BRYAN, MD

Provider ID: N/A

📄 9878 HIBERT ST STE 100
SAN DIEGO, CA 92131
Effective as of 01-JUL-16

CHIANG, JENNIFER, MD

Provider ID: N/A

📄 5222 BALBOA AVE FL 5
SAN DIEGO, CA 92117
Effective as of 01-AUG-24

DANG, TIMOTHY, MD

Provider ID: N/A

📄 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-AUG-24

DELA ROSA, KRISTINA, MD

Provider ID: N/A

📄 9878 HIBERT ST STE 100
SAN DIEGO, CA 92131
Effective as of 01-JAN-18

DELA ROSA, KRISTINA, MD

Provider ID: N/A

📄 9878 HIBERT ST STE 100
SAN DIEGO, CA 92131
Effective as of 01-AUG-17

ERICKSON, CHRISTOPHER, MD†

Provider ID: N/A

📄 6605 NANCY RIDGE DR
SAN DIEGO, CA 92121
Effective as of 01-JUL-22

GERSTENFELD, ERIC, MD

Provider ID: N/A

📄 4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

GLADSJO, JULIE, MD

Provider ID: N/A

📄 6605 NANCY RIDGE DR
SAN DIEGO, CA 92121
Teleservice
Effective as of 01-FEB-23

GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

📄 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-DEC-23

HAMMAN, MICHAEL, MD†

Provider ID: N/A

📄 9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-SEP-21

HAMMAN, MICHAEL, MD†

Provider ID: N/A

📄 9339 GENESEE AVE STE
350A
SAN DIEGO, CA 92121
Effective as of 01-NOV-23

C1. Lista de proveedores de la red Médico de atención especializada

HAMMAN, MICHAEL, MD†

Provider ID: N/A

9339 GENESEE AVE STE
350A
SAN DIEGO, CA 92121
Effective as of 01-JUN-17

HAMMAN, MICHAEL, MD†

Provider ID: N/A

9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

HAMMAN, MICHAEL, MD†

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-JAN-21

HAMMAN, MICHAEL, MD†

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-SEP-22

HAN, AMY, MD

Provider ID: N/A

6386 ALVARADO CT STE
209
SAN DIEGO, CA 92120
Effective as of 01-FEB-22

HEMPERLY, STEPHEN, DO†

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Effective as of 01-SEP-22

HEMPERLY, STEPHEN, DO†

Provider ID: N/A

4060 4TH AVE STE 415

SAN DIEGO, CA 92103
Effective as of 01-JAN-21

HEMPERLY, STEPHEN, DO

Provider ID: N/A

9095 RIO SAN DIEGO DR
STE 300
SAN DIEGO, CA 92108
Effective as of 01-MAY-24

HIGHTOWER, GEORGE, MD†

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

KASSAB, GHADA, MD

Provider ID: N/A

4606 MISSION BAY DR
SAN DIEGO, CA 92109
Effective as of 01-AUG-24

KASSAB, GHADA, MD

Provider ID: N/A

3737 MORAGA AVE STE
A206
SAN DIEGO, CA 92117
Effective as of 01-JUL-23

KAUNITZ, GENEVIEVE, MD†

Provider ID: N/A

8899 UNIVERSITY CENTER
LN STE 350
SAN DIEGO, CA 92122
Effective as of 01-OCT-21

KEEL, DOUGLAS, DO

Provider ID: N/A

8899 UNIVERSITY CENTER
LN STE 150
SAN DIEGO, CA 92122
Effective as of 01-JAN-21

LIN, SHINKO, MD

Provider ID: N/A

5222 BALBOA AVE FL 5
SAN DIEGO, CA 92117
Effective as of 01-AUG-24

LIN LEVY, JENNIFER, MD

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-AUG-24

LIU, YUJIE, DO

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-JUL-24

LUPTON, JASON, MD

Provider ID: N/A

12395 EL CAMINO REAL
STE 207
SAN DIEGO, CA 92130
Effective as of 01-MAR-16

LYFORD, WILLIS, MD

Provider ID: N/A

6605 NANCY RIDGE DR
SAN DIEGO, CA 92121
Teleservice
Effective as of 01-MAY-23

MAFONG, ERICK, MD

Provider ID: N/A

4060 4TH AVE STE 209
SAN DIEGO, CA 92103
Effective as of 01-FEB-22

MAFONG, ERICK, MD

Provider ID: N/A

6386 ALVARADO CT STE
209
SAN DIEGO, CA 92120
Effective as of 01-FEB-22

C1. Lista de proveedores de la red Médico de atención especializada

NAHM, WALTER, MD†

Provider ID: N/A

7695 CARDINAL CT STE
200
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

NAHM, WALTER, MD†

Provider ID: N/A

7695 CARDINAL CT STE
200
SAN DIEGO, CA 92123
Effective as of 01-JAN-23

NAHM, WALTER, MD†

Provider ID: N/A

7695 CARDINAL CT STE
200
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

REED, KELLY, DO†

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-JAN-21

REED, KELLY, DO†

Provider ID: N/A

9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

RILEY, JESSICA, DO†

Provider ID: N/A

9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

RILEY, JESSICA, DO†

Provider ID: N/A

4060 4TH AVE STE 415

SAN DIEGO, CA 92103
Effective as of 01-MAR-20

RILEY, JESSICA, DO†

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Effective as of 01-NOV-23

SATEESH, BROOKE, MD

Provider ID: N/A

5222 BALBOA AVE FL 5
SAN DIEGO, CA 92117
Effective as of 01-AUG-24

SCHMIEDECKE, RUDY, MD

Provider ID: N/A

6605 NANCY RIDGE DR
SAN DIEGO, CA 92121
Teleservice
Effective as of 01-JUL-23

SHAHAN, FRED, MD

Provider ID: N/A

6367 ALVARADO CT STE
107
SAN DIEGO, CA 92120
Effective as of 01-JAN-21

SHAHAN, FRED, MD

Provider ID: N/A

6367 ALVARADO CT STE
107
SAN DIEGO, CA 92120
Effective as of 01-JAN-14

SHIELL, RONALD, MD†

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

SHIELL, RONALD, MD†

Provider ID: N/A

4060 4TH AVE STE 415

SAN DIEGO, CA 92103
Effective as of 01-JAN-21

SIRICHOTIRATANA, MELISSA, MD†

Provider ID: N/A

4765 CARMEL MOUNTAIN
RD STE 201
SAN DIEGO, CA 92130
Effective as of 01-JAN-23

SOON, SEAVAR, MD

Provider ID: N/A

3737 4TH AVE
SAN DIEGO, CA 92103
Effective as of 01-MAR-23

STEIN, ALEXANDER, MD†

Provider ID: N/A

6280 JACKSON DR STE 8
SAN DIEGO, CA 92119
Effective as of 01-SEP-22

STERN, MARLEIGH, MD

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-JUN-24

TOMPKINS, STACY, MD†

Provider ID: N/A

9339 GENESEE AVE STE
350A
SAN DIEGO, CA 92121
Effective as of 01-DEC-22

TOMPKINS, STACY, MD†

Provider ID: N/A

9339 GENESEE AVE STE
350A
SAN DIEGO, CA 92121
Effective as of 01-JUL-22

TOMPKINS, STACY, MD†

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

9339 GENESEE AVE STE
350A
SAN DIEGO, CA 92121
Effective as of 01-JUL-22

TOMPKINS, STACY, MD

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Effective as of 01-NOV-23

TSE, YARDY, MD†

Provider ID: N/A

4765 CARMEL MOUNTAIN
RD STE 201
SAN DIEGO, CA 92130
Effective as of 01-SEP-21

TYAGI, ABHILASHA, MD

Provider ID: N/A

5222 BALBOA AVE FL 5
SAN DIEGO, CA 92117
Effective as of 01-AUG-24

UEBELHOER, NATHAN, DO

Provider ID: N/A

5222 BALBOA AVE FL 5
SAN DIEGO, CA 92117
Effective as of 01-AUG-24

VENKAT, ARUN, MD†

Provider ID: N/A

4765 CARMEL MOUNTAIN
RD STE 201
SAN DIEGO, CA 92130
Effective as of 01-APR-20

ZALESKI-LARSEN, LISA, DO†

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-SEP-22

ZALESKI-LARSEN, LISA, DO†

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-JAN-21

ZUBAIR, RAHEEL, MD

Provider ID: N/A

9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-DEC-23

ZUBAIR, RAHEEL, MD

Provider ID: N/A

9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JUN-24

ZUBAIR, RAHEEL, MD

Provider ID: N/A

9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-24

ZUBAIR, RAHEEL, MD

Provider ID: N/A

9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-MAR-24

ZUBAIR, RAHEEL, MD

Provider ID: N/A

9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-NOV-23

DERMATOLOGY

DERMATOPATHOLOGY

CALAME, ANTOANELLA, MD†

Provider ID: N/A

6605 NANCY RIDGE DR
SAN DIEGO, CA 92121
Effective as of 01-JAN-23

ERICKSON, CHRISTOPHER, MD†

Provider ID: N/A

6605 NANCY RIDGE DR
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

SHEN, HONGGANG, MD

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Effective as of 01-JUL-19

EMERGENCY MEDICINE

ALKATIB, RHONDA, MD†

Provider ID: N/A

2655 CAMINO DEL RIO N
STE 120
SAN DIEGO, CA 92108
Effective as of 01-AUG-20

CASTELLANO, TIFFANY, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

CHEN, ALICE, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

COYNE, CHRISTOPHER, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

C1. Lista de proveedores de la red Médico de atención especializada

DICKSON, MATTHEW, DO†

Provider ID: N/A

1628 PALM AVE
SAN DIEGO, CA 92154
Effective as of 01-JAN-21

GUEFEN, URI, MD

Provider ID: N/A

555 W C ST STE 102
SAN DIEGO, CA 92101
Effective as of 01-SEP-23

HARE, MARC, MD

Provider ID: N/A

6719 ALVARADO RD STE
303
SAN DIEGO, CA 92120
Effective as of 01-APR-23

HOGUE, BRENNAN, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

JURKOWSKI, LEONARD, MD†

Provider ID: N/A

3830 VALLEY CENTRE DR
STE 702
SAN DIEGO, CA 92130
Effective as of 01-JAN-21

KUTZ, CRAIG, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-21

LIOTTA, BENJAMIN, MD†

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-DEC-21

PARK, JAY, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

YU, ELAINE, DO

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

ENDOCRINOLOGY

METABOLISM DIABETES

EKANAYAKE, PREETHIKA, MD†

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

EKANAYAKE, PREETHIKA, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

FIRST, BRIAN, MD†

Provider ID: N/A

4282 GENESEE AVE STE
103
SAN DIEGO, CA 92117
Effective as of 01-JAN-14

GUERIN, CHRIS, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

HOSEIN, NADEEN, MD

Provider ID: N/A

4077 5TH AVE STE 35
SAN DIEGO, CA 92103

Effective as of 01-FEB-23

IYENGAR, RAVI, MD

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

IYENGAR, RAVI, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-APR-23

NAGELBERG, JODI, MD†

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

NAGELBERG, JODI, MD†

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

NAGELBERG, JODI, MD†

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-NOV-21

NAGELBERG, JODI, MD†

Provider ID: N/A

9909 MIRA MESA BLVD
STE 200
SAN DIEGO, CA 92131
Effective as of 01-NOV-21

SANDLER, JEFFREY, MD

Provider ID: N/A

4060 4TH AVE STE 340
SAN DIEGO, CA 92103
Teleservice

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-OCT-23

SANDLER, JEFFREY, MD

Provider ID: N/A

4060 4TH AVE STE 340
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-AUG-23

SANDLER, JEFFREY, MD

Provider ID: N/A

4060 4TH AVE STE 340
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-AUG-23

SHAH, NANDI, MD

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103

Effective as of 01-JAN-24

SHAH, NANDI, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JAN-24

STRAHM, LISA, MD†

Provider ID: N/A

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

Effective as of 01-JUL-20

TANTISIRA, LALITA, MD†

Provider ID: N/A

4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122

Effective as of 01-DEC-21

ENDOCRINOLOGY REPRODUCTIVE

DANESHMAND, SAID, MD

Provider ID: N/A

11515 EL CAMINO REAL STE
100
SAN DIEGO, CA 92130

Effective as of 01-SEP-17

FOYOUZI-YOUSEFI, NASTARAN, MD

Provider ID: N/A

11425 EL CAMINO REAL
SAN DIEGO, CA 92130

Effective as of 01-JUN-23

FRIEDMAN, BROOKE, MD†

Provider ID: N/A

11425 EL CAMINO REAL
SAN DIEGO, CA 92130

Effective as of 01-SEP-17

FAMILY PRACTICE

ALVAREZ-ESTRADA, MIGUEL, MD†

Provider ID: N/A

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

Effective as of 01-SEP-23

BERNADETT, ALEX, MD†

Provider ID: N/A

6699 ALVARADO RD STE
2100
SAN DIEGO, CA 92120

Effective as of 01-FEB-23

BERNADETT, ALEX, MD†

Provider ID: N/A

10505 SORRENTO VALLEY
RD STE 200
SAN DIEGO, CA 92121

Effective as of 01-FEB-23

CAMPBELL, BRIANNA, MD

Provider ID: N/A

950 S EUCLID AVE

SAN DIEGO, CA 92114

Effective as of 01-MAY-23

DANG, LAUREL, MD

Provider ID: N/A

9909 MIRA MESA BLVD
STE 200

SAN DIEGO, CA 92131

Effective as of 01-SEP-24

DENYSIAK, JACQUELINE, MD†

Provider ID: N/A

3969 4TH AVE STE 203
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-DEC-20

HILL, LINDA, MD†

Provider ID: N/A

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Effective as of 01-SEP-22

HILL, LINDA, MD†

Provider ID: N/A

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Effective as of 01-SEP-22

JOLICOEUR, MEGAN, DO

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103

Effective as of 01-JUN-23

JOLICOEUR, MEGAN, DO

Provider ID: N/A

8899 UNIVERSITY CENTER
LN STE 350

SAN DIEGO, CA 92122

Effective as of 01-JUN-23

JOLICOEUR, MEGAN, DO

Provider ID: N/A

9909 MIRA MESA BLVD

C1. Lista de proveedores de la red Médico de atención especializada

STE 200
SAN DIEGO, CA 92131
Effective as of 01-JUN-23

JOLICOEUR, MEGAN, DO

Provider ID: N/A
9333 GENESEE AVE
SAN DIEGO, CA 92121
Effective as of 01-JUN-23

KUROSAKA, MOMO, MD†

Provider ID: N/A
8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-AUG-22

KUROSAKA, MOMO, MD†

Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

MARSTON, JACQUELINE, DO

Provider ID: N/A
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

PERESS, LILIA, MD

Provider ID: N/A
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-FEB-24

PERESS, LILIA, MD

Provider ID: N/A
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-FEB-24

RODRIGUEZ, NATALIE, MD

Provider ID: N/A
1685 HOLLISTER ST
SAN DIEGO, CA 92154*

Effective as of 01-NOV-23

ROJAS, SARAH, MD

Provider ID: N/A
950 S EUCLID AVE
SAN DIEGO, CA 92114
Effective as of 01-JUL-24

SHEKER-DICKSON, KIMBERLY, DO†

Provider ID: N/A
1628 PALM AVE
SAN DIEGO, CA 92154
Effective as of 01-JAN-21

SOPHY, ELIZABETH, MD†

Provider ID: N/A
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Effective as of 01-SEP-22

SUMMERS-DAY, COURTNEY, MD†

Provider ID: N/A
1016 OUTER RD
SAN DIEGO, CA 92154
Effective as of 01-JUL-22

FAMILY PRACTICE GERIATRIC MEDICINE

MILLER, SCOTT, MD†

Provider ID: N/A
9878 CARMEL MOUNTAIN
RD STE B
SAN DIEGO, CA 92129
Effective as of 01-JAN-21

FAMILY PRACTICE SPORTS MEDICINE

UDOWENKO, MARINA, DO

Provider ID: N/A
375 CAMINO DE LA REINA

STE C
SAN DIEGO, CA 92108
Effective as of 01-JUN-23

GASTROENTEROLOGY

BORTNIKER, ETHAN, MD

Provider ID: N/A
11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-MAY-24

BORTNIKER, ETHAN, MD

Provider ID: N/A
11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-JUN-24

CHANDRADAS, SAJIV, MD†

Provider ID: N/A
4060 4TH AVE STE 240
SAN DIEGO, CA 92103
Effective as of 01-JUL-17

CUBAS, IVAN, MD†

Provider ID: N/A
292 EUCLID AVE STE 115
SAN DIEGO, CA 92114
Effective as of 01-MAR-15

CUBAS, IVAN, MD†

Provider ID: N/A
292 EUCLID AVE STE 115
SAN DIEGO, CA 92114
Effective as of 01-JAN-21

CUBAS, IVAN, MD†

Provider ID: N/A
292 EUCLID AVE STE 115
SAN DIEGO, CA 92114
Effective as of 01-DEC-14

CUMMINS, ANDREW, MD†

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

4060 4TH AVE STE 240
SAN DIEGO, CA 92103
Effective as of 01-JAN-15

DESTA, TADDESE, MD†

Provider ID: N/A

292 EUCLID AVE STE 115
SAN DIEGO, CA 92114
Effective as of 01-SEP-15

DESTA, TADDESE, MD†

Provider ID: N/A

292 EUCLID AVE STE 115
SAN DIEGO, CA 92114
Effective as of 01-JAN-14

DESTA, TADDESE, MD†

Provider ID: N/A

292 EUCLID AVE STE 115
SAN DIEGO, CA 92114
Effective as of 01-APR-24

DESTA, TADDESE, MD†

Provider ID: N/A

292 EUCLID AVE STE 115
SAN DIEGO, CA 92114
Effective as of 01-JAN-21

DUBOIS, SUJA, MD†

Provider ID: N/A

4060 4TH AVE STE 240
SAN DIEGO, CA 92103
Effective as of 01-SEP-20

GADDIPATI, KISHORE, MD†

Provider ID: N/A

4060 4TH AVE STE 240
SAN DIEGO, CA 92103
Effective as of 01-SEP-15

GISH, ROBERT, MD†

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-JUN-21

GISH, ROBERT, MD†

Provider ID: N/A

4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-JUN-21

GOLDKLANG, ROBERT, MD

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270

SAN DIEGO, CA 92128

Effective as of 01-JUL-24

GOLDKLANG, ROBERT, MD

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270

SAN DIEGO, CA 92128

Effective as of 01-MAY-24

HASAN, AWS, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JUN-23

HASSANEIN, TAREK, MD†

Provider ID: N/A

995 GATEWAY CENTER
WAY STE 105

SAN DIEGO, CA 92102

Effective as of 01-SEP-22

HUA, MENG, MD†

Provider ID: N/A

6699 ALVARADO RD STE
2306

SAN DIEGO, CA 92120

Effective as of 01-SEP-22

KLAPHEKE, ROBERT, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-21

MITTAL, YASH, MD†

Provider ID: N/A

4060 4TH AVE STE 240
SAN DIEGO, CA 92103
Effective as of 01-MAR-20

NGUYEN, TUAN, MD†

Provider ID: N/A

4141 FAIRMOUNT AVE STE
201

SAN DIEGO, CA 92105

Effective as of 01-JAN-21

NOVO, MEGAN, MD

Provider ID: N/A

292 EUCLID AVE STE 115
SAN DIEGO, CA 92114

Effective as of 01-JAN-23

NOVO, MEGAN, MD

Provider ID: N/A

292 EUCLID AVE STE 115
SAN DIEGO, CA 92114

Effective as of 01-MAY-23

REDDY, JOSEPH, MD†

Provider ID: N/A

6699 ALVARADO RD STE
2301

SAN DIEGO, CA 92120

Effective as of 01-AUG-20

REDDY, JOSEPH, MD†

Provider ID: N/A

6699 ALVARADO RD STE
2301

SAN DIEGO, CA 92120

Effective as of 01-JAN-14

REDDY, JOSEPH, MD†

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

6699 ALVARADO RD STE
2301

SAN DIEGO, CA 92120
Effective as of 01-JUL-22

SCHAEFFER, CYNTHIA, MD†

Provider ID: N/A

292 EUCLID AVE STE 115
SAN DIEGO, CA 92114

Effective as of 01-JAN-21

SCHAEFFER, CYNTHIA, MD†

Provider ID: N/A

292 EUCLID AVE STE 115
SAN DIEGO, CA 92114

Effective as of 01-APR-21

SCHAEFFER, CYNTHIA, MD†

Provider ID: N/A

292 EUCLID AVE STE 115
SAN DIEGO, CA 92114

Effective as of 01-SEP-15

SHAFFER, KATHERINE, MD†

Provider ID: N/A

292 EUCLID AVE STE 115
SAN DIEGO, CA 92114

Effective as of 01-OCT-18

SHAFFER, KATHERINE, MD†

Provider ID: N/A

292 EUCLID AVE STE 115
SAN DIEGO, CA 92114

Effective as of 01-JAN-21

SHAFFER, KATHERINE, MD†

Provider ID: N/A

292 EUCLID AVE STE 115
SAN DIEGO, CA 92114

Effective as of 01-MAR-19

SHAH, SHAILJA, MD

Provider ID: N/A

6655 ALVARADO RD

SAN DIEGO, CA 92120

Effective as of 01-FEB-24

SHAH, SHAILJA, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-AUG-21

SHPANER, ALEXANDER, MD†

Provider ID: N/A

6719 ALVARADO RD STE
206

SAN DIEGO, CA 92120

Effective as of 01-SEP-22

STIPHO, SALLY, MD†

Provider ID: N/A

4060 4TH AVE STE 240
SAN DIEGO, CA 92103

Effective as of 01-SEP-20

SYAL, GAURAV, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

SYAL, GAURAV, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JUN-23

THOMAS, CARLTON, MD†

Provider ID: N/A

292 EUCLID AVE STE 115
SAN DIEGO, CA 92114

Effective as of 01-JAN-21

THOMAS, CARLTON, MD†

Provider ID: N/A

292 EUCLID AVE STE 115
SAN DIEGO, CA 92114

Effective as of 01-JAN-14

THOMAS, CARLTON, MD†

Provider ID: N/A

292 EUCLID AVE STE 115
SAN DIEGO, CA 92114

Effective as of 01-SEP-15

THOMAS, CARLTON, MD†

Provider ID: N/A

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

Effective as of 01-MAR-16

YOUSSEF, FADY, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JUN-23

YOUSSEF, FADY, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

GENERAL DENTISTRY

MEHROTRA, SACHI, DDS

Provider ID: N/A

5830 OBERLIN DR STE 202
SAN DIEGO, CA 92121

Effective as of 01-DEC-23

GENERAL PRACTICE

MILLER, MIKAELA, MD

Provider ID: N/A

4290 POLK AVE
SAN DIEGO, CA 92105

Effective as of 01-AUG-24

RECALDE, FRANCISCO, MD†

Provider ID: N/A

3811 EL CAJON BLVD
SAN DIEGO, CA 92105

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-JAN-21

GENETICS MEDICAL

JONES, MARILYN, MD†

Provider ID: N/A

☐ 4910 DIRECTORS PL STE
200
SAN DIEGO, CA 92121

Effective as of 01-JUN-21

GYNECOLOGIC ONCOLOGY

BAHADOR, AFSHIN, MD

Provider ID: N/A

☐ 5030 CAMINO DE LA
SIESTA STE 204
SAN DIEGO, CA 92108

Effective as of 01-APR-23

DUGGAN, BRIDGETTE, MD

Provider ID: N/A

☐ 5030 CAMINO DE LA
SIESTA STE 204
SAN DIEGO, CA 92108

Effective as of 01-MAY-23

GYNECOLOGY

WILLIAMS, ALISA, MD†

Provider ID: N/A

☐ 5555 RESERVOIR DR STE
307
SAN DIEGO, CA 92120

Effective as of 01-JAN-20

HEARING AID DEALER / SUPPLIER

ANAYA, MANUEL, MA†

Provider ID: N/A

☐ 9340 CLAIREMONT MESA
BLVD STE D
SAN DIEGO, CA 92123

Effective as of 01-JAN-21

ANDERSON, ELAINE, MA†

Provider ID: N/A

☐ 9340 CLAIREMONT MESA
BLVD STE D
SAN DIEGO, CA 92123

Effective as of 01-SEP-22

ANDERSON, ELAINE, MA†

Provider ID: N/A

☐ 6367 ALVARADO CT
SAN DIEGO, CA 92120

Effective as of 01-JAN-21

ANDERSON, ELAINE, MA†

Provider ID: N/A

☐ 6367 ALVARADO CT STE 101
SAN DIEGO, CA 92120

Effective as of 01-SEP-22

DANDURAND, JOHN, MA†

Provider ID: N/A

☐ 6367 ALVARADO CT
SAN DIEGO, CA 92120

Teleservice

Effective as of 01-JAN-21

DANDURAND, JOHN, MA†

Provider ID: N/A

☐ 9340 CLAIREMONT MESA
BLVD STE D
SAN DIEGO, CA 92123

Teleservice

Effective as of 01-MAY-22

DAVIS, KELLE, MA†

Provider ID: N/A

☐ 9340 CLAIREMONT MESA
BLVD
SAN DIEGO, CA 92123

Effective as of 01-JAN-21

DAVIS, KELLE, MA†

Provider ID: N/A

☐ 6367 ALVARADO CT STE 101
SAN DIEGO, CA 92120

Effective as of 01-SEP-22

DAVIS, KELLE, MA†

Provider ID: N/A

☐ 9340 CLAIREMONT MESA
BLVD STE D
SAN DIEGO, CA 92123

Effective as of 01-SEP-22

GALLAGHER, JEFFERY, MA

Provider ID: N/A

☐ 5405 OBERLIN DR FL 2
SAN DIEGO, CA 92121

Effective as of 01-AUG-24

HEMATOLOGY / ONCOLOGY

AHMED, SYED, MD

Provider ID: N/A

☐ 7432 LA MANTANZA
SAN DIEGO, CA 92127

Effective as of 01-FEB-24

ANDREY, JEFFREY, MD†

Provider ID: N/A

☐ 3965 5TH AVE STE 230
SAN DIEGO, CA 92103*

Effective as of 01-APR-23

ANDREY, JEFFREY, MD†

Provider ID: N/A

☐ 3965 5TH AVE STE 230
SAN DIEGO, CA 92103

Effective as of 01-SEP-22

BASERI, BABAK, MD†

Provider ID: N/A

☐ 3965 5TH AVE STE 230
SAN DIEGO, CA 92103*

Effective as of 01-APR-23

BASERI, BABAK, MD†

CI. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

3965 5TH AVE STE 230
SAN DIEGO, CA 92103
Effective as of 01-JUL-22

BASERI, BABAK, MD†

Provider ID: N/A

3965 5TH AVE STE 230
SAN DIEGO, CA 92103
Effective as of 01-APR-24

BESSUDO, ALBERTO, MD†

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Teleservice
Effective as of 01-NOV-21

CHEN, YU-WEI, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

COGGAN, JAMES, DO

Provider ID: N/A

3075 HEALTH CENTER DR
STE 102
SAN DIEGO, CA 92123
Effective as of 01-NOV-22

EISENBERG, STEVEN, DO†

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Effective as of 01-JAN-21

FINDAKLY, DAWOOD, MD

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127*
Effective as of 01-OCT-24

FISHER, JENNIFER, MD†

Provider ID: N/A

3075 HEALTH CENTER DR
STE 102
SAN DIEGO, CA 92123
Effective as of 01-JAN-14

FISHER, JENNIFER, MD†

Provider ID: N/A

3075 HEALTH CENTER DR
STE 102
SAN DIEGO, CA 92123
Effective as of 01-DEC-08

FRAKES, LAURIE, MD†

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Teleservice
Effective as of 01-NOV-21

MARJON, PHILIP, MD

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Teleservice
Effective as of 01-APR-24

MARJON, PHILIP, MD†

Provider ID: N/A

3965 5TH AVE STE 230
SAN DIEGO, CA 92103*
Effective as of 01-APR-23

MESLEH SHAYEB, AKRAM, MD†

Provider ID: N/A

9333 GENESEE AVE STE
310
SAN DIEGO, CA 92121
Effective as of 01-NOV-21

NGUYEN, ANTHONY, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-AUG-23

PARSI, HOOMAN, MD

Provider ID: N/A

3965 5TH AVE STE 230
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

QUINN, CATHERINE, MD

Provider ID: N/A

3075 HEALTH CENTER DR
STE 102
SAN DIEGO, CA 92123
Effective as of 01-APR-23

RAZZAQUE, SAQIB, MD

Provider ID: N/A

7377 VIA CRESTA RD
SAN DIEGO, CA 92129
Effective as of 01-FEB-24

REDFERN, CHARLES, MD†

Provider ID: N/A

3075 HEALTH CENTER DR
STE 102
SAN DIEGO, CA 92123
Effective as of 01-SEP-15

REDFERN, CHARLES, MD†

Provider ID: N/A

3075 HEALTH CENTER DR
STE 102
SAN DIEGO, CA 92123
Effective as of 01-JAN-14

RICE, KRISTEN, MD†

Provider ID: N/A

3075 HEALTH CENTER DR
STE 102
SAN DIEGO, CA 92123
Effective as of 01-SEP-15

C1. Lista de proveedores de la red Médico de atención especializada

RICE, KRISTEN, MD†

Provider ID: N/A

3075 HEALTH CENTER DR
STE 102
SAN DIEGO, CA 92123
Effective as of 01-JUN-11

SARWARI, NAWID, MD

Provider ID: N/A

3965 5TH AVE STE 230
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

SAUNDERS, PHILLIP, DO†

Provider ID: N/A

3965 5TH AVE STE 230
SAN DIEGO, CA 92103*
Effective as of 01-APR-23

SAUNDERS, PHILLIP, DO†

Provider ID: N/A

3965 5TH AVE STE 230
SAN DIEGO, CA 92103
Effective as of 01-NOV-22

SCHWERKOSKE, JOHN, MD†

Provider ID: N/A

3965 5TH AVE STE 230
SAN DIEGO, CA 92103
Effective as of 01-SEP-22

SCHWERKOSKE, JOHN, MD†

Provider ID: N/A

3965 5TH AVE STE 230
SAN DIEGO, CA 92103
Effective as of 01-MAY-22

SCHWERKOSKE, JOHN, MD†

Provider ID: N/A

3965 5TH AVE STE 230
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

SHAIKH, ANWER, MD†

Provider ID: N/A

3965 5TH AVE STE 230
SAN DIEGO, CA 92103
Effective as of 01-JUL-22

SHENOY, CASIE, MD†

Provider ID: N/A

3075 HEALTH CENTER DR
STE 102
SAN DIEGO, CA 92123
Effective as of 01-FEB-18

SHIEH, MARIE, MD†

Provider ID: N/A

3075 HEALTH CENTER DR
STE 102
SAN DIEGO, CA 92123
Effective as of 01-DEC-16

SULLIVAN, JESSICA, DO

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

SULLIVAN, JESSICA, DO

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-DEC-23

VENKATESWARAN, APARAJIT, MD

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127*
Effective as of 01-OCT-24

HEPATOLOGY

HASSANEIN, TAREK, MD

Provider ID: N/A

10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126
Effective as of 01-JUN-24

HOSPICE AND PALLIATIVE MEDICINE

RUBENSIK, TAMARA, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-FEB-21

RUBENSIK, TAMARA, MD†

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-FEB-21

HOSPITALIST MD/DO

DJEKIC, KRISTINA, DO†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

FIRESTEIN, CATHERINE, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

HAMMOND, CHARLES, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-APR-21

SHINDO, YURI, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

TONG, ALEXANDER, MD

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

YANG, BENJAMIN, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

YASSIN, HAZEM, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

INFECTIOUS DISEASE

ALDOUS, JEANNETTE, MD†

Provider ID: N/A

950 S EUCLID AVE
SAN DIEGO, CA 92114
Effective as of 01-JUL-22

CAPERNA, JOSEPH, MD†

Provider ID: N/A

2333 1ST AVE STE 104
SAN DIEGO, CA 92101
Effective as of 01-JUL-21

KUPPALLI, KRUTIKA, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-23

MARTIN, THOMAS, MD†

Provider ID: N/A

4168 FRONT ST FL 3
SAN DIEGO, CA 92103
Effective as of 01-MAR-21

MARTIN, THOMAS, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAR-21

RAMIREZSANCHEZ, CLAUDIA, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

INTERNAL MEDICINE

AIZIN, VITALI, MD

Provider ID: N/A

3802 NATIONAL AVE
SAN DIEGO, CA 92113*
Effective as of 01-OCT-23

AL-SALEH, YADANI, MD†

Provider ID: N/A

3737 MORAGA AVE STE
B103
SAN DIEGO, CA 92117
Effective as of 01-MAR-23

BALL, SHELDON, MD

Provider ID: N/A

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-OCT-22

BALL, SHELDON, MD

Provider ID: N/A

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-OCT-22

BRAZEL, DANIELLE, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-JAN-24

BRAZEL, DANIELLE, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

CHAU, JOHN, MD†

Provider ID: N/A

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-MAY-23

CHAU, JOHN, MD†

Provider ID: N/A

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-MAY-23

CHONGKRAIRATANAKUL, TEPSIRI, MD†

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-MAY-24

CHUNG, KIYON, MD†

Provider ID: N/A

4060 4TH AVE STE 650
SAN DIEGO, CA 92103*
Effective as of 01-NOV-12

CSAPOCZI, PETER, MD

Provider ID: N/A

950 S EUCLID AVE
SAN DIEGO, CA 92114
Teleservice
Effective as of 01-JAN-21

DASHI, ARBEN, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

DAVIS, JASON, MD†

Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-NOV-23

DAVIS, JASON, MD†

Provider ID: N/A

7910 FROST ST STE 250
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

DAVIS, JASON, MD†

Provider ID: N/A

4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

FARAVARDEH, ARMAN, MD†

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-NOV-16

GADIYARAM, VARUNA, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

GELBERG, ANNA, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

GRUNVALD, EDUARDO, MD†

Provider ID: N/A

4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122
Effective as of 01-DEC-21

GRUNVALD, EDUARDO, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-DEC-21

HAMMES, JOHN, MD†

Provider ID: N/A

4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Effective as of 01-NOV-23

HAMMES, JOHN, MD†

Provider ID: N/A

4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Effective as of 01-OCT-21

HASTIE, ELIZABETH, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

JAIN, SUPRABHA, MD

Provider ID: N/A

6496 WEATHERS PL STE
100
SAN DIEGO, CA 92121
Teleservice
Effective as of 01-OCT-22

JEBAIN, JEBAIN, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-24

JEBAIN, JEBAIN, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-AUG-24

KATSNELSON, MARCELLA, DO

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

KOOKOOTSEDES, GAYLE, MD†

Provider ID: N/A

3633 CAMINO DEL RIO S
STE 300
SAN DIEGO, CA 92108
Effective as of 01-MAR-21

LAMANTIA, MICHELE, MD†

Provider ID: N/A

950 S EUCLID AVE
SAN DIEGO, CA 92114*
Effective as of 01-AUG-17

LEVIN, MARINA, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-SEP-24

LEVIN, MARINA, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-24

LIU, ANDREW, MD

Provider ID: N/A

6402 EL CAJON BLVD STE
100&102
SAN DIEGO, CA 92115
Effective as of 01-SEP-23

LIU, ANDREW, MD

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-SEP-23

LIU, ANDREW, MD

Provider ID: N/A

4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

C1. Lista de proveedores de la red Médico de atención especializada

LUND, GUY, MD†

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-MAY-24

MARTINEZ, ARMANDO, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

MOOLANI, UJJALA, MD

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-MAY-23

MOOLANI, UJJALA, MD

Provider ID: N/A

6402 EL CAJON BLVD STE
102
SAN DIEGO, CA 92115
Effective as of 01-MAY-23

NAMAZY, DAVID, MD†

Provider ID: N/A

6402 EL CAJON BLVD STE
100
SAN DIEGO, CA 92115
Effective as of 01-JAN-24

NARAYANAN, MEENA, MD†

Provider ID: N/A

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114*
Effective as of 01-JAN-21

NGUYEN, VIET, MD†

Provider ID: N/A

4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Effective as of 01-OCT-20

NGUYEN, TRI, MD†

Provider ID: N/A

4206 44TH ST
SAN DIEGO, CA 92115*

Teleservice

Effective as of 01-SEP-22

NOKES, BRANDON, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-21

PITT, WILLIAM, MD†

Provider ID: N/A

6386 ALVARADO CT STE
101
SAN DIEGO, CA 92120
Effective as of 01-JAN-23

TANTISIRA, LALITA, MD†

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-JAN-21

TANTISIRA, LALITA, MD†

Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

TOPPEN, WILLIAM, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

TRIVEDI, MEHUL, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

TRIVEDI, MEHUL, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-JAN-24

YANG, JENNY, MD†

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-AUG-21

YANG, JENNY, MD†

Provider ID: N/A

4520 EXECUTIVE DR STE
P2
SAN DIEGO, CA 92121
Effective as of 01-AUG-21

INTERNAL MEDICINE CRITICAL CARE MEDICINE

BOROK, ZEA, MD†

Provider ID: N/A

4520 EXECUTIVE DR STE
P2
SAN DIEGO, CA 92121
Effective as of 01-SEP-21

BOROK, ZEA, MD†

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

BOROK, ZEA, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

JAFFE, GILAD, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

C1. Lista de proveedores de la red Médico de atención especializada

JAFFE, GILAD, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-SEP-23

MERCANDETTI, ALEX, MD†

Provider ID: N/A

3965 5TH AVE STE 430
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-APR-19

SULLIVAN, LAUREN, MD

Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-SEP-23

SULLIVAN, LAUREN, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

SULLIVAN, LAUREN, MD

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

INTERVENTIONAL CARDIOLOGY

CARAMBAS, CLARITA, MD†

Provider ID: N/A

9190 MIRA MESA BLVD
SAN DIEGO, CA 92126
Effective as of 01-SEP-22

CHUNG, KIYON, MD†

Provider ID: N/A

4060 4TH AVE STE 650
SAN DIEGO, CA 92103

Effective as of 01-JUL-22

CRUZ RODRIGUEZ, JOSE, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

FRIEDMAN, RICHARD, MD†

Provider ID: N/A

4060 4TH AVE STE 650
SAN DIEGO, CA 92103
Effective as of 01-JUL-22

FRIEDMAN, RICHARD, MD†

Provider ID: N/A

4060 4TH AVE STE 650
SAN DIEGO, CA 92103
Effective as of 01-FEB-07

GLASSMAN, JERROLD, MD†

Provider ID: N/A

4060 4TH AVE STE 650
SAN DIEGO, CA 92103
Effective as of 01-FEB-07

GLASSMAN, JERROLD, MD†

Provider ID: N/A

4060 4TH AVE STE 650
SAN DIEGO, CA 92103
Effective as of 01-JUL-22

GOLLAPUDI, RAGHAVA, MD†

Provider ID: N/A

7901 FROST ST
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

GOLLAPUDI, RAGHAVA, MD†

Provider ID: N/A

3131 BERGER AVE STE 200
SAN DIEGO, CA 92123
Effective as of 01-MAR-13

GOLLAPUDI, RAGHAVA, MD†

Provider ID: N/A

6402 EL CAJON BLVD STE
102
SAN DIEGO, CA 92115
Effective as of 01-JAN-21

JOHN, ALAN, MD

Provider ID: N/A

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Effective as of 01-MAY-23

MOHAMEDALI, BURHAN, MD†

Provider ID: N/A

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Effective as of 01-JAN-21

MULLVAIN, JEFFRY, MD†

Provider ID: N/A

4060 4TH AVE STE 500
SAN DIEGO, CA 92103
Effective as of 01-SEP-15

NGUYEN, BRYANT, MD†

Provider ID: N/A

4440 EUCLID AVE STE A
SAN DIEGO, CA 92115
Effective as of 01-JAN-21

PITT, WILLIAM, MD†

Provider ID: N/A

6386 ALVARADO CT STE
101
SAN DIEGO, CA 92120
Effective as of 01-SEP-15

RUBIO GARCIA, MANOLO, MD†

Provider ID: N/A

412 WASHINGTON ST
SAN DIEGO, CA 92103
Effective as of 01-DEC-22

RUBIO GARCIA, MANOLO, MD†

Provider ID: N/A

**C1. Lista de proveedores de la red
Médico de atención especializada**

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Effective as of 01-MAY-23

RUBIO GARCIA, MANOLO, MD†

Provider ID: N/A
292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Effective as of 01-DEC-22

SALAMI, ALI, MD†

Provider ID: N/A
501 WASHINGTON ST STE
512
SAN DIEGO, CA 92103
Effective as of 01-SEP-15

SCLAR, CRAIG, MD

Provider ID: N/A
3880 MURPHY CANYON
RD STE 120
SAN DIEGO, CA 92123
Teleservice
Effective as of 01-DEC-23

SCLAR, CRAIG, MD

Provider ID: N/A
7830 CLAIREMONT MESA
BLVD STE 100
SAN DIEGO, CA 92111
Effective as of 01-MAR-24

SCOTT, EMILY, MD

Provider ID: N/A
40604TH AVE., SUITE 500
SAN DIEGO, CA 92103
Effective as of 01-SEP-24

SHAH, KULIN, MD†

Provider ID: N/A
292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Effective as of 01-APR-23

SHEREV, DIMITRI, MD†

Provider ID: N/A
6402 EL CAJON BLVD STE
102
SAN DIEGO, CA 92115
Effective as of 01-JAN-24

SUDHAKAR, DEEPTHI, MD†

Provider ID: N/A
292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Effective as of 01-APR-23

**LICENSED CLINICAL
SOCIAL WORKER**

ALVAREZ, DIANA, LCSW

Provider ID: N/A
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-APR-21

BASHAM, CLAUDIA, LCSW

Provider ID: N/A
3025 BEYER BLVD STE E101
SAN DIEGO, CA 92154
Teleservice
Effective as of 01-NOV-21

BIGGER, ALAINA, LCSW

Provider ID: N/A
4849 RONSON CT STE 207
SAN DIEGO, CA 92111
Effective as of 01-AUG-23

BROWN, EDEN, LCSW†

Provider ID: N/A
16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-FEB-22

CAZARES, DARIANA, LCSW

Provider ID: N/A
4690 EL CAJON BLVD

SAN DIEGO, CA 92115
Effective as of 01-SEP-24

DIAZ, JAENAI, LCSW

Provider ID: N/A
350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

DSOUZA, NICOLE, LCSW†

Provider ID: N/A
330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

ESCAMILLA, KARLA, LCSW†

Provider ID: N/A
950 S EUCLID AVE
SAN DIEGO, CA 92114
Effective as of 01-DEC-21

GONZALEZ, ADRIANA, LCSW

Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

GONZALEZ, ADRIANA, LCSW

Provider ID: N/A
4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-JUN-23

HAMM, DEANNA, LCSW

Provider ID: N/A
350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

**JASSO-RAMIREZ, MARTHA,
LCSW**

Provider ID: N/A
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-SEP-21

KHAMISA, SORAIYA, LCSW

Provider ID: N/A

4520 EXECUTIVE DR STE A
SAN DIEGO, CA 92121

Effective as of 01-JUN-23

LOWE, LINDSAY, LCSW

Provider ID: N/A

350 DICKINSON ST
SAN DIEGO, CA 92103

Effective as of 01-JAN-24

RABBAN, DIANA, LCSW

Provider ID: N/A

286 EUCLID AVE STE 302
SAN DIEGO, CA 92114

Teleservice

Effective as of 01-NOV-22

SACHS, MELISSA, LCSW†

Provider ID: N/A

4690 EL CAJON BLVD
SAN DIEGO, CA 92115

Teleservice

Effective as of 01-MAR-21

SCHWARTZMAN, BENJAMIN, LCSW

Provider ID: N/A

4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123

Effective as of 01-JAN-23

SCHWARTZMAN, BENJAMIN, LCSW

Provider ID: N/A

4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123

Effective as of 01-JAN-23

SCHWARTZMAN, BENJAMIN,

LCSW

Provider ID: N/A

4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123

Effective as of 01-DEC-22

SCHWARTZMAN, BENJAMIN, LCSW

Provider ID: N/A

4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123

Effective as of 01-FEB-23

TABRIZI, SYAMAK, LCSW

Provider ID: N/A

286 EUCLID AVE STE 302
SAN DIEGO, CA 92114

Effective as of 01-AUG-24

WRIGHT, STEPHANIE, LCSW

Provider ID: N/A

10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126

Effective as of 01-JAN-24

LICENSED PROFESSIONAL CLINICAL COUNSELOR

TITOVA, ANASTASIA, LPCC

Provider ID: N/A

4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123

Effective as of 01-FEB-23

TITOVA, ANASTASIA, LPCC

Provider ID: N/A

4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123

Effective as of 01-JAN-23

MARRIAGE FAMILY THERAPIST

GULOTTA, SAMANTHA, MFT

Provider ID: N/A

9909 MIRA MESA BLVD
STE 200
SAN DIEGO, CA 92131

Effective as of 01-JUN-23

HOLLEMAN, KEVIN, DO

Provider ID: N/A

8775 AERO DR STE 238
SAN DIEGO, CA 92123

Effective as of 01-APR-23

HOLLEMAN, KEVIN, DO

Provider ID: N/A

8775 AERO DR STE 238
SAN DIEGO, CA 92123

Effective as of 01-JUN-24

KUEK, JOHN, MFT

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-APR-21

LIDLAW, JOHN, MFT

Provider ID: N/A

10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126

Effective as of 01-JAN-24

SCHLOSSER, TARA, MFT

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103

Effective as of 01-AUG-23

SUTTLE, CAROLYN, MFT†

Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

VILLAGOMEZ, JOSHUA, MFT
Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

ZAYAS, MARIO, MFT
Provider ID: N/A

3025 BEYER BLVD STE
E-101
SAN DIEGO, CA 92154
Effective as of 01-JAN-21

MATERNAL AND FETAL MEDICINE

AHN, JENNIFER, MD†
Provider ID: N/A

12264 EL CAMINO REAL
STE 204
SAN DIEGO, CA 92130
Effective as of 01-FEB-21

BERGGREN, ERICA, MD†
Provider ID: N/A

12264 EL CAMINO REAL
STE 204
SAN DIEGO, CA 92130
Effective as of 01-JAN-21

DOWLING, DAVID, MD†
Provider ID: N/A

12264 EL CAMINO REAL
STE 204
SAN DIEGO, CA 92130
Effective as of 01-JAN-21

EMERUWA, UKACHI, MD
Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103

Effective as of 01-JUN-23

EMERUWA, UKACHI, MD
Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-JUN-23

EMERUWA, UKACHI, MD
Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

GOLLIN, YVONNE, MD†
Provider ID: N/A

12264 EL CAMINO REAL
STE 204
SAN DIEGO, CA 92130
Effective as of 01-JAN-21

MEDICAL ONCOLOGY

EISENBERG, STEVEN, DO†
Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Effective as of 01-JAN-21

FRAKES, LAURIE, MD†
Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127

Teleservice

Effective as of 01-JAN-21

KOSSMAN, STEVEN, MD†
Provider ID: N/A

3075 HEALTH CENTER DR
STE 102
SAN DIEGO, CA 92123
Effective as of 01-SEP-15

SHAIKH, ANWER, MD†
Provider ID: N/A

3965 5TH AVE STE 230
SAN DIEGO, CA 92103*
Effective as of 01-APR-23

SHENOY, CASIE, MD†
Provider ID: N/A

3075 HEALTH CENTER DR
STE 102
SAN DIEGO, CA 92123
Effective as of 01-JAN-18

NEPHROLOGY

AL-DAHCHAN, ZAID, MD
Provider ID: N/A

4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

AL-DAHCHAN, ZAID, MD
Provider ID: N/A

6402 EL CAJON BLVD STE
102
SAN DIEGO, CA 92115
Effective as of 01-MAY-23

AL-DAHCHAN, ZAID, MD
Provider ID: N/A

6402 EL CAJON BLVD STE
100
SAN DIEGO, CA 92115
Effective as of 01-MAY-23

AL-DAHCHAN, ZAID, MD
Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-MAY-23

BEHREND, TERRY, MD†
Provider ID: N/A

6402 EL CAJON BLVD STE
100

C1. Lista de proveedores de la red Médico de atención especializada

SAN DIEGO, CA 92115
Effective as of 01-MAR-16

BEHREND, TERRY, MD†

Provider ID: N/A

📍 6402 EL CAJON BLVD STE
100

SAN DIEGO, CA 92115
Effective as of 01-JUL-22

BEHREND, TERRY, MD†

Provider ID: N/A

📍 8010 FROST ST STE 510
SAN DIEGO, CA 92123

Effective as of 01-JAN-21

BEHREND, TERRY, MD†

Provider ID: N/A

📍 6402 EL CAJON BLVD STE
100

SAN DIEGO, CA 92115
Effective as of 01-JAN-21

BEHREND, TERRY, MD†

Provider ID: N/A

📍 6402 EL CAJON BLVD STE
100

SAN DIEGO, CA 92115
Effective as of 01-JAN-21

BOISKIN, MARK, MD

Provider ID: N/A

📍 9610 GRANITE RIDGE DR
STE B

SAN DIEGO, CA 92123
Effective as of 01-JAN-24

CALDERONMOLINA, JUAN, MD

Provider ID: N/A

📍 9610 GRANITE RIDGE DR
STE B

SAN DIEGO, CA 92123
Effective as of 01-JAN-24

CHONGKRAIRATANAKUL, TEPSIRI, MD

Provider ID: N/A

📍 8010 FROST ST STE 100
SAN DIEGO, CA 92123

Effective as of 01-JUN-24

CHONGKRAIRATANAKUL, TEPSIRI, MD†

Provider ID: N/A

📍 8010 FROST ST STE 510
SAN DIEGO, CA 92123

Effective as of 01-SEP-21

DAVIS, JASON, MD†

Provider ID: N/A

📍 8010 FROST ST STE 510
SAN DIEGO, CA 92123

Effective as of 01-SEP-20

DAVIS, JASON, MD†

Provider ID: N/A

📍 4060 4TH AVE STE 220
SAN DIEGO, CA 92103

Effective as of 01-JUL-22

DAVIS, JASON, MD†

Provider ID: N/A

📍 4060 4TH AVE STE 220
SAN DIEGO, CA 92103

Effective as of 01-MAR-15

DAVIS, JASON, MD†

Provider ID: N/A

📍 4060 4TH AVE STE 220
SAN DIEGO, CA 92103

Effective as of 01-JUN-23

DAVIS, JASON, MD†

Provider ID: N/A

📍 4060 4TH AVE STE 220
SAN DIEGO, CA 92103

Effective as of 01-NOV-23

DAVIS, JASON, MD†

Provider ID: N/A

📍 4060 4TH AVE STE 220
SAN DIEGO, CA 92103

Effective as of 01-SEP-15

FARAVARDEH, ARMAN, MD

Provider ID: N/A

📍 8010 FROST ST STE 100
SAN DIEGO, CA 92123

Effective as of 01-JUL-24

FARAVARDEH, ARMAN, MD

Provider ID: N/A

📍 8010 FROST ST STE 100
SAN DIEGO, CA 92123

Effective as of 01-JUN-24

FARAVARDEH, ARMAN, MD†

Provider ID: N/A

📍 8010 FROST ST STE 510
SAN DIEGO, CA 92123

Effective as of 01-JAN-21

FARAVARDEH, ARMAN, MD

Provider ID: N/A

📍 8010 FROST ST STE 100
SAN DIEGO, CA 92123

Effective as of 01-JAN-24

FARAVARDEH, ARMAN, MD†

Provider ID: N/A

📍 8010 FROST ST STE 510
SAN DIEGO, CA 92123

Effective as of 01-NOV-16

HAMMES, JOHN, MD†

Provider ID: N/A

📍 4060 4TH AVE STE 220
SAN DIEGO, CA 92103

Effective as of 01-MAR-15

HAMMES, JOHN, MD†

Provider ID: N/A

📍 4060 4TH AVE STE 220
SAN DIEGO, CA 92103

**C1. Lista de proveedores de la red
Médico de atención especializada**

Effective as of 01-JUL-22

HAMMES, JOHN, MD[†]

Provider ID: N/A

📍 4060 4TH AVE STE 220
SAN DIEGO, CA 92103*
Effective as of 01-JAN-24

HUSSAIN, SHAHID, MD

Provider ID: N/A

📍 6402 EL CAJON BLVD STE
100
SAN DIEGO, CA 92115
Teleservice
Effective as of 01-JUL-24

HUSSAIN, SHAHID, MD

Provider ID: N/A

📍 6402 EL CAJON BLVD STE
100
SAN DIEGO, CA 92115
Teleservice
Effective as of 01-JUL-24

HUSSAIN, SHAHID, MD

Provider ID: N/A

📍 6402 EL CAJON BLVD STE
100
SAN DIEGO, CA 92115
Teleservice
Effective as of 01-MAY-24

HUSSAIN, SHAHID, MD

Provider ID: N/A

📍 6402 EL CAJON BLVD STE
100
SAN DIEGO, CA 92115
Teleservice
Effective as of 01-AUG-23

HUSSAIN, SHAHID, MD

Provider ID: N/A

📍 6402 EL CAJON BLVD STE
100

SAN DIEGO, CA 92115

Teleservice

Effective as of 01-APR-24

KHAING, KATHY, MD[†]

Provider ID: N/A

📍 8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

LE, CHARLES, MD[†]

Provider ID: N/A

📍 4440 EUCLID AVE STE A
SAN DIEGO, CA 92115
Effective as of 01-JAN-21

LE, CHARLES, MD[†]

Provider ID: N/A

📍 4440 EUCLID AVE
SAN DIEGO, CA 92115
Effective as of 01-JUL-21

LUND, GUY, MD

Provider ID: N/A

📍 8010 FROST ST STE 100
SAN DIEGO, CA 92123
Effective as of 01-JUL-24

LUND, GUY, MD

Provider ID: N/A

📍 8010 FROST ST STE 100
SAN DIEGO, CA 92123
Effective as of 01-JUN-24

LUND, GUY, MD[†]

Provider ID: N/A

📍 8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-NOV-16

NAMAZY, DAVID, MD[†]

Provider ID: N/A

📍 6402 EL CAJON BLVD STE
100
SAN DIEGO, CA 92115

Effective as of 01-JUL-22

NAMAZY, DAVID, MD[†]

Provider ID: N/A

📍 6402 EL CAJON BLVD STE
100
SAN DIEGO, CA 92115
Effective as of 01-JUN-23

NAMAZY, DAVID, MD[†]

Provider ID: N/A

📍 6402 EL CAJON BLVD STE
100
SAN DIEGO, CA 92115
Effective as of 01-APR-17

NGUYEN, VIET, MD[†]

Provider ID: N/A

📍 4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Effective as of 01-SEP-22

PATEL, BIJAL, MD

Provider ID: N/A

📍 8010 FROST ST STE 100
SAN DIEGO, CA 92123
Effective as of 01-JUN-24

QUEVEDO, JUAN, MD[†]

Provider ID: N/A

📍 995 GATEWAY CENTER
WAY STE 207
SAN DIEGO, CA 92102
Effective as of 01-SEP-22

QUEVEDO, JUAN, MD[†]

Provider ID: N/A

📍 995 GATEWAY CENTER
WAY STE 207
SAN DIEGO, CA 92102
Effective as of 01-NOV-23

QUEVEDO, JUAN, MD[†]

Provider ID: N/A

📍 995 GATEWAY CENTER

C1. Lista de proveedores de la red Médico de atención especializada

WAY STE 207
SAN DIEGO, CA 92102
Effective as of 01-SEP-20

QUEVEDO, JUAN, MD†

Provider ID: N/A
📍 995 GATEWAY CENTER
WAY STE 207
SAN DIEGO, CA 92102
Effective as of 01-AUG-21

RAHIMI, SINA, DO†

Provider ID: N/A
📍 4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-MAR-23

SACAMAY, TAGUMPAY, MD†

Provider ID: N/A
📍 4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Effective as of 01-FEB-07

SETHI, SUPREET, MD

Provider ID: N/A
📍 4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-JUN-23

STEER, DYLAN, MD†

Provider ID: N/A
📍 4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Effective as of 01-SEP-15

THOMAS, THEODORE, MD†

Provider ID: N/A
📍 4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

ZHONG, YAN, MD†

Provider ID: N/A
📍 4060 4TH AVE STE 220

SAN DIEGO, CA 92103
Teleservice
Effective as of 01-NOV-22

ZHONG, YAN, MD†

Provider ID: N/A
📍 4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-MAY-22

ZHONG, YAN, MD†

Provider ID: N/A
📍 4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-JUL-22

ZHONG, YAN, MD†

Provider ID: N/A
📍 4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-MAR-22

NEUROLOGY

BINDAL, ANKUR, MD†

Provider ID: N/A
📍 6496 WEATHERS PL STE
100
SAN DIEGO, CA 92121
Effective as of 01-SEP-22

BOBO, JERRY, MD†

Provider ID: N/A
📍 6496 WEATHERS PL STE
100
SAN DIEGO, CA 92121
Effective as of 01-SEP-22

FREDERICK, ALIYA, MD

Provider ID: N/A
📍 6655 ALVARADO RD

SAN DIEGO, CA 92120
Effective as of 01-FEB-24

GRISOLIA, JAMES, MD†

Provider ID: N/A
📍 4033 3RD AVE STE 410
SAN DIEGO, CA 92103
Effective as of 01-SEP-20

GUPTA, VISHAL, DO

Provider ID: N/A
📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-23

GUTFLAIS, ERIC, MD

Provider ID: N/A
📍 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

HAAS, RICHARD, MD

Provider ID: N/A
📍 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

HAAS, RICHARD, MD†

Provider ID: N/A
📍 200 W ARBOR DR FL 1
SAN DIEGO, CA 92103
Effective as of 01-OCT-21

HAAS, RICHARD, MD†

Provider ID: N/A
📍 4510 EXECUTIVE DR STE
325
SAN DIEGO, CA 92121
Effective as of 01-OCT-21

HEADLEY, ALISON, MD

Provider ID: N/A
📍 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

C1. Lista de proveedores de la red Médico de atención especializada

HUSSAIN, SHAHID, MD

Provider ID: N/A

6402 EL CAJON BLVD STE
100
SAN DIEGO, CA 92115

Teleservice

Effective as of 01-MAR-24

KARANJIA, NAVAZ, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

KARANJIA, NAVAZ, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-FEB-22

KHAMISHON, BORIS, MD†

Provider ID: N/A

6699 ALVARADO RD STE
2301
SAN DIEGO, CA 92120

Effective as of 01-JAN-21

KHAMISHON, BORIS, MD†

Provider ID: N/A

6699 ALVARADO RD STE
2301
SAN DIEGO, CA 92120

Effective as of 01-AUG-20

KHAMISHON, BORIS, MD†

Provider ID: N/A

6699 ALVARADO RD STE
2301
SAN DIEGO, CA 92120

Effective as of 01-SEP-22

KHAMISHON, BORIS, MD†

Provider ID: N/A

6699 ALVARADO RD STE

2301

SAN DIEGO, CA 92120

Effective as of 01-JAN-14

KURESHI, SOHAIB, MD†

Provider ID: N/A

3750 CONVOY ST STE 301
SAN DIEGO, CA 92111

Effective as of 01-SEP-20

LASKER, BRUCE, MD†

Provider ID: N/A

3737 MORAGA AVE STE A5
SAN DIEGO, CA 92117

Effective as of 01-FEB-07

MALIK, SUDHIR, MD†

Provider ID: N/A

4033 3RD AVE STE 420
SAN DIEGO, CA 92103

Effective as of 01-SEP-22

MALIK, SUDHIR, MD†

Provider ID: N/A

4033 3RD AVE STE 420
SAN DIEGO, CA 92103

Effective as of 01-OCT-19

MALIK, SUDHIR, MD†

Provider ID: N/A

4033 3RD AVE STE 420
SAN DIEGO, CA 92103

Effective as of 01-DEC-20

QAYOUMI, WALI, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

QAYOUMI, WALI, MD†

Provider ID: N/A

4510 EXECUTIVE DR STE
325

SAN DIEGO, CA 92121

Effective as of 01-OCT-21

RAYNOWSKA, JENELLE, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

RAYNOWSKA, JENELLE, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-APR-23

RIGGINS, NINA, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

SCHORR, EMILY, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-MAR-24

SCHORR, EMILY, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-MAR-24

SCHORR, EMILY, MD

Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121

Effective as of 01-MAR-24

SCHULTE, JESSICA, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

SIAVOSHI, SARA, DO

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

SIAVOSHI, SARA, DO†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-FEB-22

SIAVOSHI, SARA, DO†

Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-FEB-22

WIEGAND, SARAH, DO

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

NEUROLOGY CHILD

SATTAR, SHIFTEH, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

NUCLEAR MEDICINE

ALEXANDER, SINDU, MD†

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

ALEXANDER, SINDU, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

CHOI, ESTHER, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-APR-23

CHOI, ESTHER, MD

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

GAMIE, SHERIEF, MD

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-AUG-24

GAMIE, SHERIEF, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-AUG-24

GAMIE, SHERIEF, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-24

KIPPER, MICHAEL, MD

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

METH, ERNIE, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 1
SAN DIEGO, CA 92123
Teleservice

Effective as of 01-NOV-21

SHARIF TABRIZI, AHMAD, MD

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

SHARIF TABRIZI, AHMAD, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

OBSTETRICS / GYNECOLOGY

AL-MSHHDANI, AYSER, MD

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-OCT-23

ASLIAN, AZITA, MD†

Provider ID: N/A

950 S EUCLID AVE
SAN DIEGO, CA 92114
Effective as of 01-SEP-22

ASLIAN, AZITA, MD†

Provider ID: N/A

950 S EUCLID AVE
SAN DIEGO, CA 92114*
Effective as of 01-JUL-24

BLAKE, GARY, MD†

Provider ID: N/A

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-JUL-22

BRAHMBHATT, BHOOMI, MD

Provider ID: N/A

2918 5TH AVE STE 100
SAN DIEGO, CA 92103
Effective as of 01-APR-23

C1. Lista de proveedores de la red Médico de atención especializada

CARDENAS, MICHAEL, MD

Provider ID: N/A

📍 2918 5TH AVE STE 100
SAN DIEGO, CA 92103

Effective as of 01-FEB-24

CARDENAS, MICHAEL, MD†

Provider ID: N/A

📍 4168 FRONT ST
SAN DIEGO, CA 92103

Effective as of 01-NOV-21

CARDENAS, MICHAEL, MD†

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-NOV-21

CASTILLO, MARIA, MD†

Provider ID: N/A

📍 7930 FROST ST STE 103
SAN DIEGO, CA 92123

Effective as of 01-FEB-21

CHAC, RICK, MD†

Provider ID: N/A

📍 550 WASHINGTON ST STE
331

SAN DIEGO, CA 92103

Effective as of 01-NOV-22

CHUAN, SANDY, MD†

Provider ID: N/A

📍 11425 EL CAMINO REAL
SAN DIEGO, CA 92130

Effective as of 01-FEB-16

DAVIS, TRACIE, MD

Provider ID: N/A

📍 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-OCT-23

DELCORE, LAURA, MD†

Provider ID: N/A

📍 4168 FRONT ST
SAN DIEGO, CA 92103

Effective as of 01-AUG-22

DELCORE, LAURA, MD†

Provider ID: N/A

📍 3750 CONVOY ST STE 312
SAN DIEGO, CA 92111

Effective as of 01-AUG-22

DELCORE, LAURA, MD†

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-AUG-22

DELCORE, LAURA, MD†

Provider ID: N/A

📍 16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-AUG-22

DELCORE, LAURA, MD†

Provider ID: N/A

📍 6030 VILLAGE WAY
SAN DIEGO, CA 92130

Effective as of 01-AUG-22

DRIEBE, AMY, MD†

Provider ID: N/A

📍 6030 VILLAGE WAY
SAN DIEGO, CA 92130

Effective as of 01-AUG-22

DRIEBE, AMY, MD†

Provider ID: N/A

📍 16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-AUG-22

DRIEBE, AMY, MD†

Provider ID: N/A

📍 3750 CONVOY ST STE 312
SAN DIEGO, CA 92111

Effective as of 01-AUG-22

DRIEBE, AMY, MD†

Provider ID: N/A

📍 330 LEWIS ST
SAN DIEGO, CA 92103

Effective as of 01-AUG-22

FOLCHTORRES-AGUIAR, BEATRIZ, MD†

Provider ID: N/A

📍 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-AUG-22

FOYOUZI-YOUSEFI, NASTARAN, MD

Provider ID: N/A

📍 11425 EL CAMINO REAL
SAN DIEGO, CA 92130

Effective as of 01-JUN-23

FRUGONI, GINA, MD†

Provider ID: N/A

📍 4168 FRONT ST
SAN DIEGO, CA 92103

Effective as of 01-JAN-21

GELLENS, ANDREW, MD†

Provider ID: N/A

📍 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-NOV-21

HARVEY, SCOTT, MD†

Provider ID: N/A

📍 4168 FRONT ST
SAN DIEGO, CA 92103

Effective as of 01-MAY-21

HARVEY, SCOTT, MD†

Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-21

HUI, KIM, MD†

Provider ID: N/A

2918 5TH AVE STE 100
SAN DIEGO, CA 92103
Effective as of 01-SEP-15

JAIME, CINDY, MD†

Provider ID: N/A

2918 5TH AVE STE 100
SAN DIEGO, CA 92103
Effective as of 01-JUN-18

JENKINS, ENCHANTA, MD†

Provider ID: N/A

4050 BEYER BLVD
SAN DIEGO, CA 92173
Effective as of 01-JUN-22

MACKAY, GILLIAN, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-DEC-23

MACKAY, GILLIAN, MD

Provider ID: N/A

6030 VILLAGE WAY
SAN DIEGO, CA 92130
Effective as of 01-DEC-23

MELENDEZ, ARIANA, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

MELENDEZ, ARIANA, MD

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

MELENDEZBERRIOS, IARA, MD

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice

Effective as of 01-AUG-24

MENDEZ, DIEGO, MD

Provider ID: N/A

950 S EUCLID AVE
SAN DIEGO, CA 92114
Effective as of 01-APR-23

MEURICE, MARIELLE

ERENDIRA LUCILLE, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

MEURICE, MARIELLE

ERENDIRA LUCILLE, MD†

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

PARK, SUSANNA, MD

Provider ID: N/A

11425 EL CAMINO REAL
SAN DIEGO, CA 92130
Effective as of 01-APR-16

PHAN, TIFFANI, MD

Provider ID: N/A

10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126
Effective as of 01-JUL-24

PICKETT, CHARLOTTE, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-JUL-23

PICKETT, CHARLOTTE, MD

Provider ID: N/A

6030 VILLAGE WAY
SAN DIEGO, CA 92130
Effective as of 01-JUL-23

PICKETT, CHARLOTTE, MD

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

PICKETT, CHARLOTTE, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

PICKETT, CHARLOTTE, MD

Provider ID: N/A

3750 CONVOY ST STE 312
SAN DIEGO, CA 92111
Effective as of 01-JUL-23

PINSON, KELSEY, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

PINSON, KELSEY, MD†

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

PINSON, KELSEY, MD†

Provider ID: N/A

4910 DIRECTORS PL STE
200
SAN DIEGO, CA 92121
Effective as of 01-SEP-21

**C1. Lista de proveedores de la red
Médico de atención especializada**

TAJРАН, DEENA, MD†

Provider ID: N/A

10737 CAMINO RUIZ STE 114
SAN DIEGO, CA 92126
Effective as of 01-JAN-21

THOMSON, SAMANTHA, MD†

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-OCT-21

THOMSON, SAMANTHA, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-OCT-21

TRUJILLO, JENNIFER, DO†

Provider ID: N/A

950 S EUCLID AVE
SAN DIEGO, CA 92114*
Effective as of 01-JUL-22

**VAN DEN HEUVEL, KELLY,
MD†**

Provider ID: N/A

2918 5TH AVE STE 100
SAN DIEGO, CA 92103
Effective as of 01-SEP-15

VU, LAC, MD

Provider ID: N/A

5555 RESERVOIR DR STE
205
SAN DIEGO, CA 92120
Effective as of 01-JUL-23

WILLIAMS, ALISA, MD†

Provider ID: N/A

5555 RESERVOIR DR STE
307
SAN DIEGO, CA 92120*
Effective as of 01-JAN-20

**OCCUPATIONAL
MEDICINE**

JACKSON, CODY, MD

Provider ID: N/A

3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-MAY-22

**OCCUPATIONAL
THERAPIST**

ARRIESGADO, MINNETT, OT

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-JUN-23

BROWN, JOHNNY, OT

Provider ID: N/A

1666 PRECISION PARK LN
SAN DIEGO, CA 92173
Effective as of 01-AUG-24

CHOW, JENNIFER, OT

Provider ID: N/A

3750 CONVOY ST STE 201B
SAN DIEGO, CA 92111
Effective as of 01-DEC-23

CHOW, JENNIFER, OT

Provider ID: N/A

3750 CONVOY ST STE 201B
SAN DIEGO, CA 92111
Effective as of 01-DEC-23

CUA, NICOLE, OT

Provider ID: N/A

3750 CONVOY ST STE 201B
SAN DIEGO, CA 92111
Effective as of 01-MAR-24

FARHAT, KELLI, OT

Provider ID: N/A

3750 CONVOY ST STE 201B
SAN DIEGO, CA 92111
Effective as of 01-APR-22

HUDSON, BONNIE, OT

Provider ID: N/A

4445 EASTGATE MALL STE
103
SAN DIEGO, CA 92121
Effective as of 01-NOV-21

HUDSON, BONNIE, OT

Provider ID: N/A

88 E BONITA RD
STE C
SAN DIEGO, CA 92121
Effective as of 01-NOV-21

LOPEZ, ALYSSA-NICOLE, OT

Provider ID: N/A

3750 CONVOY ST STE 201B
SAN DIEGO, CA 92111
Effective as of 01-DEC-23

MANECKE, KRISTEN, OT

Provider ID: N/A

9333 GENESEE AVE STE
350B
SAN DIEGO, CA 92121
Effective as of 01-SEP-22

OPHTHALMOLOGY

ARNETT, JUSTIN, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

ARNETT, JUSTIN, MD

Provider ID: N/A

3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Effective as of 01-SEP-23

C1. Lista de proveedores de la red Médico de atención especializada

ARNETT, JUSTIN, MD

Provider ID: N/A

📍 4060 4TH AVE STE 610
SAN DIEGO, CA 92103

Effective as of 01-SEP-23

ARYA, MALVIKA, MD

Provider ID: N/A

📍 4060 4TH AVE STE 610
SAN DIEGO, CA 92103

Effective as of 01-SEP-23

ARYA, MALVIKA, MD

Provider ID: N/A

📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Effective as of 01-SEP-23

ARYA, MALVIKA, MD

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-SEP-23

AVALLONE, THOMAS, MD

Provider ID: N/A

📍 5330 CARROLL CANYON
RD STE 210

SAN DIEGO, CA 92121

Effective as of 01-MAR-24

AVALLONE, THOMAS, MD†

Provider ID: N/A

📍 3939 3RD AVE
SAN DIEGO, CA 92103

Effective as of 01-AUG-24

BINDER, NICHOLAS, MD†

Provider ID: N/A

📍 6945 EL CAJON BLVD
SAN DIEGO, CA 92115

Effective as of 01-JAN-21

BINDER, NICHOLAS, MD†

Provider ID: N/A

📍 6945 EL CAJON BLVD
SAN DIEGO, CA 92115

Effective as of 01-MAR-18

BINDER, NICHOLAS, MD†

Provider ID: N/A

📍 6945 EL CAJON BLVD
SAN DIEGO, CA 92115

Effective as of 01-SEP-22

BINDER, NICHOLAS, MD†

Provider ID: N/A

📍 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

Effective as of 01-SEP-22

BOLO, KYLE, MD

Provider ID: N/A

📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Effective as of 01-SEP-23

BOLO, KYLE, MD

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-SEP-23

BOLO, KYLE, MD

Provider ID: N/A

📍 4060 4TH AVE STE 610
SAN DIEGO, CA 92103

Effective as of 01-SEP-23

CHANG, TOM, MD†

Provider ID: N/A

📍 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

Effective as of 01-SEP-22

CHOPLIN, NEIL, MD†

Provider ID: N/A

📍 3939 3RD AVE
SAN DIEGO, CA 92103

Effective as of 01-FEB-07

CHOPLIN, NEIL, MD†

Provider ID: N/A

📍 3939 3RD AVE
SAN DIEGO, CA 92103

Effective as of 01-APR-22

CHOPLIN, NEIL, MD†

Provider ID: N/A

📍 3939 3RD AVE
SAN DIEGO, CA 92103

Effective as of 01-JUL-21

COCKERHAM, KIMBERLY, MD

Provider ID: N/A

📍 3590 CAMINO DEL RIO N
STE 200

SAN DIEGO, CA 92108

Effective as of 01-MAY-24

COURIS, MICHAEL, MD†

Provider ID: N/A

📍 3969 4TH AVE STE 301
SAN DIEGO, CA 92103

Effective as of 01-FEB-07

CU-UNJIENG, ANDREW, MD†

Provider ID: N/A

📍 4060 4TH AVE STE 405
SAN DIEGO, CA 92103

Effective as of 01-SEP-15

ESLANI, MEDI, MD

Provider ID: N/A

📍 4060 4TH AVE STE 610
SAN DIEGO, CA 92103

Effective as of 01-SEP-23

ESLANI, MEDI, MD

Provider ID: N/A

📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Effective as of 01-SEP-23

C1. Lista de proveedores de la red Médico de atención especializada

ESLANI, MEDI, MD

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

GUALTIERI, CHRISTOPHER, MD†

Provider ID: N/A

📍 3969 4TH AVE STE 300
SAN DIEGO, CA 92103
Effective as of 01-FEB-07

GUALTIERI, CHRISTOPHER, MD†

Provider ID: N/A

📍 3969 4TH AVE STE 300
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

HAAK, LOGAN, MD†

Provider ID: N/A

📍 1855 1ST AVE STE 200B
SAN DIEGO, CA 92101
Effective as of 01-JAN-24

HANDLER, SUZANNE, MD†

Provider ID: N/A

📍 3969 4TH AVE STE 301
SAN DIEGO, CA 92103
Effective as of 01-SEP-15

HUDSON, HENRY, MD†

Provider ID: N/A

📍 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-JAN-22

HUDSON, HENRY, MD†

Provider ID: N/A

📍 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-APR-23

HUYNH, PAUL, MD†

Provider ID: N/A

📍 4844 UNIVERSITY AVE STE
A
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-OCT-22

HUYNH, PAUL, MD†

Provider ID: N/A

📍 4844 UNIVERSITY AVE STE
A
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-JAN-21

HUYNH, PAUL, MD†

Provider ID: N/A

📍 4844 UNIVERSITY AVE STE
A
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-JAN-21

JACOBSEN, BRADLEY, MD

Provider ID: N/A

📍 7695 CARDINAL CT STE 100
SAN DIEGO, CA 92123
Effective as of 01-OCT-23

JACOBSEN, BRADLEY, MD

Provider ID: N/A

📍 7695 CARDINAL CT STE 100
SAN DIEGO, CA 92123
Effective as of 01-JUN-24

KEEFE, KELLY, MD†

Provider ID: N/A

📍 3969 4TH AVE STE 301
SAN DIEGO, CA 92103
Effective as of 01-SEP-15

KHAN, FAHAD, MD†

Provider ID: N/A

📍 233 LEWIS ST

SAN DIEGO, CA 92103
Effective as of 01-SEP-22

KHAN, FAHAD, MD†

Provider ID: N/A

📍 233 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-DEC-22

KHATIB, NORA, MD†

Provider ID: N/A

📍 4060 4TH AVE STE 640
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

KHATIB, NORA, MD†

Provider ID: N/A

📍 4060 4TH AVE STE 640
SAN DIEGO, CA 92103
Effective as of 01-MAR-24

KYTASTY, CHRISTINA, DO

Provider ID: N/A

📍 5330 CARROLL CANYON
RD STE 210
SAN DIEGO, CA 92121
Effective as of 01-MAY-24

KYTASTY, CHRISTINA, DO

Provider ID: N/A

📍 3939 3RD AVE
SAN DIEGO, CA 92103
Effective as of 01-MAY-24

LANG, PAUL, MD

Provider ID: N/A

📍 4060 4TH AVE STE 610
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

LANG, PAUL, MD

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

C1. Lista de proveedores de la red Médico de atención especializada

MCGRAW, JOSEPH, MD†

Provider ID: N/A

📄 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

MCGRAW, JOSEPH, MD†

Provider ID: N/A

📄 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-SEP-22

MORRISON-REYES, JOSHUA, MD†

Provider ID: N/A

📄 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-SEP-22

MORRISON-REYES, JOSHUA, MD†

Provider ID: N/A

📄 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-APR-23

MORRISON-REYES, JOSHUA, MD†

Provider ID: N/A

📄 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-JUN-18

MORRISON-REYES, JOSHUA, MD†

Provider ID: N/A

📄 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-MAR-23

MORRISON-REYES, JOSHUA, MD†

Provider ID: N/A

📄 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-JAN-21

MORTON, ASA, MD†

Provider ID: N/A

📄 3939 3RD AVE
SAN DIEGO, CA 92103
Effective as of 01-SEP-15

MORTON, ASA, MD†

Provider ID: N/A

📄 3939 3RD AVE
SAN DIEGO, CA 92103
Effective as of 01-MAY-24

MORTON, ASA, MD

Provider ID: N/A

📄 3939 3RD AVE STE B
SAN DIEGO, CA 92103
Effective as of 01-APR-24

MORTON, ASA, MD†

Provider ID: N/A

📄 3939 3RD AVE
SAN DIEGO, CA 92103
Effective as of 01-APR-22

MORTON, ASA, MD

Provider ID: N/A

📄 3939 3RD AVE BLDG B
SAN DIEGO, CA 92103
Effective as of 01-MAR-24

MOSS, JASON, MD†

Provider ID: N/A

📄 5555 RESERVOIR DR STE
201
SAN DIEGO, CA 92120
Effective as of 01-JAN-23

NGUYEN, VINCENT, MD†

Provider ID: N/A

📄 7695 CARDINAL CT STE 100
SAN DIEGO, CA 92123

Effective as of 01-APR-20

NGUYEN, VINCENT, MD

Provider ID: N/A

📄 7695 CARDINAL CT STE S
SAN DIEGO, CA 92123
Effective as of 01-JAN-23

PATEL, SARJAN, MD†

Provider ID: N/A

📄 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

PATEL, GITANE, MD†

Provider ID: N/A

📄 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-MAR-18

PATEL, SARJAN, MD†

Provider ID: N/A

📄 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-AUG-20

PATEL, SARJAN, MD†

Provider ID: N/A

📄 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-JAN-14

PATEL, GITANE, MD†

Provider ID: N/A

📄 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-SEP-22

PATEL, SARJAN, MD†

Provider ID: N/A

📄 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-SEP-22

PERRY, ARTHUR, MD

CI. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-APR-23

PHAN, RYAN, MD

Provider ID: N/A

4844 UNIVERSITY AVE STE
A
SAN DIEGO, CA 92105
Effective as of 01-APR-23

PHAN, RYAN, MD

Provider ID: N/A

4844 UNIVERSITY AVE STE
A
SAN DIEGO, CA 92105
Effective as of 01-JAN-24

PHAN, RYAN, MD

Provider ID: N/A

10737 CAMINO RUIZ STE
100
SAN DIEGO, CA 92126
Effective as of 01-APR-23

PHAN, RYAN, MD†

Provider ID: N/A

10737 CAMINO RUIZ
SAN DIEGO, CA 92126
Effective as of 01-SEP-22

PHAN, RYAN, MD†

Provider ID: N/A

10737 CAMINO RUIZ
SAN DIEGO, CA 92126
Effective as of 01-OCT-22

PONS, MAURICIO, MD

Provider ID: N/A

1666 PRECISION PARK LN
SAN DIEGO, CA 92173
Effective as of 01-MAY-23

PRABHU, SUJATA, MD†

Provider ID: N/A

6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-SEP-22

PRABHU, SUJATA, MD†

Provider ID: N/A

6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-AUG-20

PRABHU, SUJATA, MD†

Provider ID: N/A

6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-FEB-18

PRABHU, SUJATA, MD†

Provider ID: N/A

6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-JAN-21

PRABHU, SUJATA, MD†

Provider ID: N/A

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

PRABHU, SUJATA, MD†

Provider ID: N/A

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-DEC-20

PRABHU, SUJATA, MD†

Provider ID: N/A

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-APR-22

PUIG LLANO, MANUEL, MD

Provider ID: N/A

4060 4TH AVE STE 610
SAN DIEGO, CA 92103

Effective as of 01-JUL-23

ROBINSON, FANE, MD†

Provider ID: N/A

7695 CARDINAL CT STE 100
SAN DIEGO, CA 92123
Effective as of 01-SEP-15

ROBINSON, FANE, MD

Provider ID: N/A

7695 CARDINAL CT STE S
SAN DIEGO, CA 92123
Effective as of 01-MAY-23

ROESKE, RICHMOND, MD

Provider ID: N/A

3939 3RD AVE
SAN DIEGO, CA 92103
Effective as of 01-MAR-24

ROESKE, RICHMOND, MD

Provider ID: N/A

5330 CARROLL CANYON
RD STE 210
SAN DIEGO, CA 92121
Effective as of 01-JUL-24

ROESKE, RICHMOND, MD

Provider ID: N/A

5330 CARROLL CANYON
RD STE 210
SAN DIEGO, CA 92121
Effective as of 01-SEP-23

ROESKE, RICHMOND, MD

Provider ID: N/A

3939 3RD AVE
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

ROESKE, RICHMOND, MD

Provider ID: N/A

3939 3RD AVE
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

CI. Lista de proveedores de la red Médico de atención especializada

SATTERFIELD, KELLIE, MD

Provider ID: N/A

3939 3RD AVE
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

SATTERFIELD, KELLIE, MD

Provider ID: N/A

5330 CARROLL CANYON
RD STE 210
SAN DIEGO, CA 92121
Effective as of 01-MAR-24

SATTERFIELD, KELLIE, MD

Provider ID: N/A

5330 CARROLL CANYON
RD STE 210
SAN DIEGO, CA 92121
Effective as of 01-JUL-24

SATTERFIELD, KELLIE, MD

Provider ID: N/A

5330 CARROLL CANYON
RD STE 210
SAN DIEGO, CA 92121
Effective as of 01-DEC-23

SHEILS, CATHERINE, MD

Provider ID: N/A

5330 CARROLL CANYON
RD STE 210
SAN DIEGO, CA 92121
Effective as of 01-FEB-24

SHEILS, CATHERINE, MD

Provider ID: N/A

5330 CARROLL CANYON
RD STE 210
SAN DIEGO, CA 92121
Effective as of 01-JUL-24

SHEILS, CATHERINE, MD

Provider ID: N/A

5330 CARROLL CANYON

RD STE 210
SAN DIEGO, CA 92121
Effective as of 01-JAN-24

SHEILS, CATHERINE, MD

Provider ID: N/A

5330 CARROLL CANYON
RD STE 210
SAN DIEGO, CA 92121
Effective as of 01-JAN-24

SHEILS, CATHERINE, MD

Provider ID: N/A

5330 CARROLL CANYON
RD STE 210
SAN DIEGO, CA 92121
Effective as of 01-JAN-24

SHEILS, CATHERINE, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

SHEILS, CATHERINE, MD

Provider ID: N/A

3939 3RD AVE
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

SHEILS, CATHERINE, MD

Provider ID: N/A

3939 3RD AVE
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

SHEILS, CATHERINE, MD

Provider ID: N/A

3939 3RD AVE
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

SHOJI, MARISSA, MD

Provider ID: N/A

4060 4TH AVE STE 610

SAN DIEGO, CA 92103
Effective as of 01-SEP-23

SHOJI, MARISSA, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

SMITH, MARK, MD

Provider ID: N/A

7695 CARDINAL CT STE S
SAN DIEGO, CA 92123
Effective as of 01-JAN-23

SMITH, WILLIAM, MD

Provider ID: N/A

5330 CARROLL CANYON
RD STE 210
SAN DIEGO, CA 92121
Effective as of 01-JUL-24

SMITH, WILLIAM, MD

Provider ID: N/A

5330 CARROLL CANYON
RD STE 210
SAN DIEGO, CA 92121
Effective as of 01-DEC-23

SONG, DELU, MD

Provider ID: N/A

7695 CARDINAL CT STE 100
SAN DIEGO, CA 92123
Effective as of 01-OCT-23

SONG, DELU, MD

Provider ID: N/A

7695 CARDINAL CT STE S
SAN DIEGO, CA 92123
Effective as of 01-JUN-24

SONG, DELU, MD

Provider ID: N/A

7695 CARDINAL CT STE 100
SAN DIEGO, CA 92123

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-DEC-23

WARLEN, MARK, MD†

Provider ID: N/A

📍 3720 3RD AVE
SAN DIEGO, CA 92103
Effective as of 01-FEB-07

YAMADA, KENTARO, MD†

Provider ID: N/A

📍 1040 UNIVERSITY AVE STE
B209A
SAN DIEGO, CA 92103
Effective as of 01-DEC-22

YAMADA, KENTARO, MD†

Provider ID: N/A

📍 1040 UNIVERSITY AVE STE
B209A
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

ZABANEH, ALEXANDER, MD†

Provider ID: N/A

📍 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-JAN-21

ZABANEH, ALEXANDER, MD†

Provider ID: N/A

📍 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-JAN-21

ZHAO, TAILUN, MD

Provider ID: N/A

📍 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-JAN-24

OPTOMETRIST

AOTO, KIM, OD†

Provider ID: N/A

📍 6945 EL CAJON BLVD

SAN DIEGO, CA 92115

Effective as of 01-SEP-22

AOTO, KIM, OD†

Provider ID: N/A

📍 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-SEP-22

AOTO, KIM, OD†

Provider ID: N/A

📍 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-JAN-21

AOTO, KIM, OD†

Provider ID: N/A

📍 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

AOTO, KIM, OD†

Provider ID: N/A

📍 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

AOTO, KIM, OD†

Provider ID: N/A

📍 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

DYER, SHARON, OD†

Provider ID: N/A

📍 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

DYER, SHARON, OD

Provider ID: N/A

📍 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-FEB-24

EL-MOGHRABI, ROULA, OD†

Provider ID: N/A

📍 9855 ERMA RD STE 105
SAN DIEGO, CA 92131
Effective as of 01-SEP-22

HAN, SUL, OD†

Provider ID: N/A

📍 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-DEC-22

HO, HOANG MINH, OD

Provider ID: N/A

📍 10737 CAMINO RUIZ STE
215-220
SAN DIEGO, CA 92126
Effective as of 01-JAN-21

HO, HOANG MINH, OD

Provider ID: N/A

📍 4206 44TH ST
SAN DIEGO, CA 92115
Effective as of 01-JAN-21

HO, HOANG MINH, OD

Provider ID: N/A

📍 7345 LINDA VISTA RD STE A
SAN DIEGO, CA 92111
Effective as of 01-JAN-21

JOMOC, CAITLIN, OD

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-FEB-24

JOMOC, CAITLIN, OD

Provider ID: N/A

📍 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-FEB-24

JULAZADEH, SARA, OD†

Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

3939 3RD AVE
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

KHALIL, VADY, OD†

Provider ID: N/A

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-NOV-22

KHALIL, VADY, OD†

Provider ID: N/A

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-NOV-22

KIM, PHILIP, OD†

Provider ID: N/A

4060 4TH AVE STE 610
SAN DIEGO, CA 92103
Effective as of 01-MAR-22

MARR, RYAN, OD

Provider ID: N/A

6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-JUL-24

MARR, RYAN, OD

Provider ID: N/A

6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-DEC-22

MARR, RYAN, OD

Provider ID: N/A

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-DEC-22

MARR, RYAN, OD

Provider ID: N/A

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-JUL-24

RING, ROBERT, OD

Provider ID: N/A

13223 BLACK MOUNTAIN
RD STE 6
SAN DIEGO, CA 92129
Effective as of 01-FEB-24

SCHWAB, GARY, OD†

Provider ID: N/A

4290 POLK AVE
SAN DIEGO, CA 92105
Effective as of 01-JUL-22

SCHWAB, GARY, OD†

Provider ID: N/A

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-JUL-22

TAUNTON, PHILIP, OD†

Provider ID: N/A

3939 3RD AVE
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

TAUNTON, PHILIP, OD†

Provider ID: N/A

3939 3RD AVE
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

TONNU, ANH, OD†

Provider ID: N/A

6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-JAN-21

TONNU, ANH, OD†

Provider ID: N/A

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-JAN-21

TONNU, ANH, OD†

Provider ID: N/A

6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-AUG-24

TONNU, ANH, OD†

Provider ID: N/A

6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-SEP-22

TONNU, ANH, OD†

Provider ID: N/A

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

VINH, JOHN, OD†

Provider ID: N/A

2240 E PLAZA BLVD
STE F AND G
SAN DIEGO, CA 92102
Effective as of 01-JAN-21

VINH, JOHN, OD†

Provider ID: N/A

2240 E PLAZA BLVD
STE F AND G
SAN DIEGO, CA 92102
Effective as of 01-SEP-20

YU, CAROL, OD

Provider ID: N/A

4060 4TH AVE STE 610
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

YU, CAROL, OD


Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

YU, CAROL, OD


Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-SEP-23

ZVANUT, DONALD, OD


Provider ID: N/A

 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-AUG-24

ORAL MAXILLOFACIAL SURGEON

ELI, BRADLEY, DMD


Provider ID: N/A

 5830 OBERLIN DR STE 202
SAN DIEGO, CA 92121
Effective as of 01-DEC-23

OTOLARYNGOLOGY


ABDOU, RAMI, MD†

Provider ID: N/A

 5405 OBERLIN DR
SAN DIEGO, CA 92121
Effective as of 01-AUG-22


BANTHIA, VISHAL, MD†

Provider ID: N/A

 5405 OBERLIN DR FL 2
SAN DIEGO, CA 92121
Teleservice
Effective as of 01-AUG-21

BANTHIA, VISHAL, MD†

Provider ID: N/A

 5405 OBERLIN DR FL 2
SAN DIEGO, CA 92121
Teleservice
Effective as of 01-SEP-21

BRUMUND, KEVIN, MD

Provider ID: N/A

 16950 VIA TAZON

SAN DIEGO, CA 92127
Effective as of 01-MAY-23


BRUMUND, KEVIN, MD

Provider ID: N/A

 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23


BUSH, JAMES, MD†

Provider ID: N/A

 3805 FRONT ST
SAN DIEGO, CA 92103*
Effective as of 01-AUG-20

CALIFANO, JOSEPH, MD

Provider ID: N/A

 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23


CALIFANO, JOSEPH, MD

Provider ID: N/A

 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23


CALIFANO, JOSEPH, MD

Provider ID: N/A

 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

CALZADA, AUDREY, MD†

Provider ID: N/A

 5405 OBERLIN DR
SAN DIEGO, CA 92121
Teleservice
Effective as of 01-JAN-21

CALZADA, AUDREY, MD†


Provider ID: N/A

 5405 OBERLIN DR

SAN DIEGO, CA 92121
Teleservice
Effective as of 01-OCT-19


CALZADA, AUDREY, MD†

Provider ID: N/A

 5405 OBERLIN DR FL 2
SAN DIEGO, CA 92121
Effective as of 01-OCT-22


CHANG, EDWARD, MD

Provider ID: N/A

 5405 OBERLIN DR FL 2
SAN DIEGO, CA 92121
Effective as of 01-SEP-24


CHANG, EDWARD, MD

Provider ID: N/A

 5405 OBERLIN DR FL 2
SAN DIEGO, CA 92121
Effective as of 01-MAR-24


CHANG, EDWARD, MD

Provider ID: N/A

 5405 OBERLIN DR FL 2
SAN DIEGO, CA 92121
Effective as of 01-SEP-24


CHANG, EDWARD, MD

Provider ID: N/A

 5405 OBERLIN DR FL 2
SAN DIEGO, CA 92121
Effective as of 01-AUG-24


COFFEY, CHARLES, MD

Provider ID: N/A

 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

COFFEY, CHARLES, MD

Provider ID: N/A

 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-MAY-23

COFFEY, CHARLES, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-MAY-23

DECONDE, ADAM, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-MAY-23

DECONDE, ADAM, MD

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Effective as of 01-MAY-23

DECONDE, ADAM, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-MAY-23

DONALDSON, CHADWICK, MD†

Provider ID: N/A

4033 3RD AVE STE 104
SAN DIEGO, CA 92103

Effective as of 01-OCT-21

DRISKILL, BRENT, MD†

Provider ID: N/A

4033 3RD AVE STE 104
SAN DIEGO, CA 92103

Effective as of 01-OCT-21

DRISKILL, BRENT, MD†

Provider ID: N/A

4033 3RD AVE STE 104
SAN DIEGO, CA 92103

Effective as of 01-JAN-21

FRIEDMAN, RICK, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-MAY-23

FRIEDMAN, RICK, MD

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Effective as of 01-MAY-23

FRIEDMAN, RICK, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-MAY-23

GILANI, SAPIDEH, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-MAY-23

GILANI, SAPIDEH, MD

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Effective as of 01-MAY-23

GILANI, SAPIDEH, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-MAY-23

GREENE, JACQUELINE, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-MAY-23

GREENE, JACQUELINE, MD

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Effective as of 01-MAY-23

GREENE, JACQUELINE, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-MAY-23

GUO, THERESA, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-MAY-23

GUO, THERESA, MD

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Effective as of 01-MAY-23

HARRIS, JEFFREY, MD

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Effective as of 01-MAY-23

HARRIS, JEFFREY, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-MAY-23

HAUFF, SAMANTHA, MD†

Provider ID: N/A

4282 GENESEE AVE STE
202

SAN DIEGO, CA 92117

Effective as of 01-AUG-20

C1. Lista de proveedores de la red Médico de atención especializada

HAUFF, SAMANTHA, MD†

Provider ID: N/A

📍 4282 GENESEE AVE STE
202
SAN DIEGO, CA 92117
Effective as of 01-MAY-22

HAUFF, SAMANTHA, MD

Provider ID: N/A

📍 4282 GENESEE AVE STE
201
SAN DIEGO, CA 92117
Effective as of 01-JAN-23

HAUFF, SAMANTHA, MD†

Provider ID: N/A

📍 4282 GENESEE AVE STE
202
SAN DIEGO, CA 92117
Effective as of 01-JAN-21

HAUFF, SAMANTHA, MD

Provider ID: N/A

📍 4282 GENESEE AVE STE
201
SAN DIEGO, CA 92117
Effective as of 01-APR-23

HOM, DAVID, MD†

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

HOM, DAVID, MD

Provider ID: N/A

📍 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

HOM, DAVID, MD

Provider ID: N/A

📍 16950 VIA TAZON

SAN DIEGO, CA 92127
Effective as of 01-MAY-23

HUGHES, CHARLOTTE, MD

Provider ID: N/A

📍 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

HUGHES, CHARLOTTE, MD

Provider ID: N/A

📍 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

HUGHES, CHARLOTTE, MD

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

HUSSEMAN, JACOB, MD

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-23

HUSSEMAN, JACOB, MD

Provider ID: N/A

📍 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-AUG-23

JANSEN, CORNELIUS, MD

Provider ID: N/A

📍 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

JANSEN, CORNELIUS, MD

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

JANSEN, CORNELIUS, MD

Provider ID: N/A

📍 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

KARI, ELINA, MD

Provider ID: N/A

📍 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

KARI, ELINA, MD†

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

KARI, ELINA, MD

Provider ID: N/A

📍 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

MAGIT, ANTHONY, MD

Provider ID: N/A

📍 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

MAGIT, ANTHONY, MD

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

MAGIT, ANTHONY, MD†

Provider ID: N/A

📍 3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123
Effective as of 01-OCT-20

C1. Lista de proveedores de la red Médico de atención especializada

MAGIT, ANTHONY, MD

Provider ID: N/A

8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

MATSUOKA, AKIHIRO, MD

Provider ID: N/A

8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

MATSUOKA, AKIHIRO, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

MATSUOKA, AKIHIRO, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

MIYA, GARY, MD†

Provider ID: N/A

4060 4TH AVE STE 410
SAN DIEGO, CA 92103
Effective as of 01-JAN-18

NGUYEN, QUYEN, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

NGUYEN, QUYEN, MD

Provider ID: N/A

8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

NGUYEN, QUYEN, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

SALL, EDWARD, DDS

Provider ID: N/A

5471 KEARNY VILLA RD STE 201
SAN DIEGO, CA 92123
Effective as of 01-SEP-22

SCHALCH LEPE, PAUL, MD

Provider ID: N/A

8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

SCHALCH LEPE, PAUL, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

SCHALCH LEPE, PAUL, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

TORCHINSKY, CYRUS, MD†

Provider ID: N/A

4060 4TH AVE STE 410
SAN DIEGO, CA 92103
Effective as of 01-FEB-18

TORCHINSKY, CYRUS, MD†

Provider ID: N/A

4060 4TH AVE STE 410
SAN DIEGO, CA 92103
Effective as of 01-JAN-23

TORCHINSKY, CYRUS, MD†

Provider ID: N/A

4060 4TH AVE STE 410
SAN DIEGO, CA 92103*
Effective as of 01-SEP-15

VAHABZADEH-HAGH, ANDREW, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

VAHABZADEH-HAGH, ANDREW, MD

Provider ID: N/A

8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

VAHABZADEH-HAGH, ANDREW, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

WATSON, DEBORAH, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

WATSON, DEBORAH, MD

Provider ID: N/A

8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

WATSON, DEBORAH, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-MAY-23

WEISSBROD, PHILIP, MD

Provider ID: N/A

200 W ARBOR DR STE 505
SAN DIEGO, CA 92103

Effective as of 01-MAY-23

WEISSBROD, PHILIP, MD

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Effective as of 01-MAY-23

WEISSBROD, PHILIP, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-MAY-23

YAN, CAROL, MD

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-MAY-23

YAN, CAROL, MD

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Effective as of 01-MAY-23

YAN, CAROL, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-MAY-23

PATHOLOGY ANATOMIC CLINICAL

LIN, GRACE, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-FEB-22

MAHOOTI, SEPI, MD†

Provider ID: N/A

16835 W BERNARDO DR
STE 212
SAN DIEGO, CA 92127

Teleservice

Effective as of 01-DEC-22

SONG, WEI, MD

Provider ID: N/A

10300 CAMPUS POINT DR
SAN DIEGO, CA 92121

Effective as of 01-JUL-23

STEPHENS, LAURA, MD

Provider ID: N/A

10300 CAMPUS POINT DR
SAN DIEGO, CA 92121

Effective as of 01-JUL-23

USMANI, AMENA, MD

Provider ID: N/A

10300 CAMPUS POINT DR
SAN DIEGO, CA 92121

Effective as of 01-APR-23

PEDIATRIC RADIOLOGY

DWEK, JERRY, MD†

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103

Effective as of 01-JAN-22

DWEK, JERRY, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

DWEK, JERRY, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JAN-22

EVORA, DARRYL, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JAN-22

EVORA, DARRYL, MD†

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103

Effective as of 01-JAN-22

EVORA, DARRYL, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

KONING, JEFFREY, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

KONING, JEFFREY, MD†

Provider ID: N/A

330 LEWIS ST STE 202
SAN DIEGO, CA 92103

Effective as of 01-JAN-22

KONING, JEFFREY, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JAN-22

KRUK, PETER, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-FEB-24

PUGMIRE, BRIAN, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

PUGMIRE, BRIAN, MD†

Provider ID: N/A

330 LEWIS ST STE 202
SAN DIEGO, CA 92103

Effective as of 01-OCT-21

PUGMIRE, BRIAN, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-OCT-21

PEDIATRICS

ALLSUP, VICTORIA, MD

Provider ID: N/A

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Effective as of 01-NOV-23

ALLSUP, VICTORIA, MD

Provider ID: N/A

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Effective as of 01-NOV-23

ANDREE, GREGOR, MD

Provider ID: N/A

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Effective as of 01-SEP-22

ANDREE, GREGOR, MD

Provider ID: N/A

4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105

Effective as of 01-SEP-22

BAI-TONG, SHIYU, MD

Provider ID: N/A

3750 CONVOY ST STE 312
SAN DIEGO, CA 92111

Effective as of 01-AUG-24

DOAN STEPHENS, CRYSTAL, MD†

Provider ID: N/A

4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

Effective as of 01-SEP-22

DOAN STEPHENS, CRYSTAL, MD†

Provider ID: N/A

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Effective as of 01-SEP-22

GIBONEY, JENNIFER, MD

Provider ID: N/A

4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

Effective as of 01-FEB-23

GIBONEY, JENNIFER, MD

Provider ID: N/A

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Effective as of 01-FEB-23

GROBMAN, LILLIAN, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-MAR-22

HUBBARD, EUSTRATIA, MD

Provider ID: N/A

3750 CONVOY ST STE 312

SAN DIEGO, CA 92111

Effective as of 01-AUG-24

KARMAKAR, KANKA, MD

Provider ID: N/A

10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

Teleservice

Effective as of 01-JAN-21

LEFF, MICHELLE, MD

Provider ID: N/A

3750 CONVOY ST STE 312
SAN DIEGO, CA 92111

Effective as of 01-AUG-24

MARC-AURELE, KRISHELLE, MD

Provider ID: N/A

7910 FROST ST STE 230
SAN DIEGO, CA 92123

Effective as of 01-SEP-23

MATOBA, NANA, MD

Provider ID: N/A

3750 CONVOY ST STE 312
SAN DIEGO, CA 92111

Effective as of 01-AUG-24

SAUER, CHARLES, DO

Provider ID: N/A

3750 CONVOY ST STE 312
SAN DIEGO, CA 92111

Effective as of 01-AUG-24

SONG, RICHARD, MD

Provider ID: N/A

7910 FROST ST STE 230
SAN DIEGO, CA 92123

Effective as of 01-SEP-23

SUTTNER, DENISE, MD

Provider ID: N/A

7910 FROST ST STE 230

C1. Lista de proveedores de la red Médico de atención especializada

SAN DIEGO, CA 92123
Effective as of 01-SEP-23

WEISS, KATHERINE, MD

Provider ID: N/A

7910 FROST ST STE 230
SAN DIEGO, CA 92123
Effective as of 01-SEP-23

ZAHEER, AARON, MD†

Provider ID: N/A

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

ZAHEER, AARON, MD†

Provider ID: N/A

4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
Effective as of 01-SEP-22

PHYS MED/ REHAB PAIN MEDICINE

HURSCHMAN, ALAN, MD†

Provider ID: N/A

5395 RUFFIN RD STE 204
SAN DIEGO, CA 92123
Effective as of 01-AUG-24

KATZEN, SETH, DO

Provider ID: N/A

9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-MAY-23

KATZEN, SETH, DO

Provider ID: N/A

9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-MAR-24

KOLODGE, GAVIN, DO

Provider ID: N/A

3750 CONVOY ST STE 201
SAN DIEGO, CA 92111
Effective as of 01-JUN-23

RICHARDSON, HENRY, MD†

Provider ID: N/A

3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110
Effective as of 01-JUN-23

PHYS MED/ REHAB SPORTS MEDICINE

CHANG, ENOCH, MD

Provider ID: N/A

6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120
Effective as of 01-AUG-24

PHYSICAL MEDICINE / REHABILITATION

BULLOCK, ANDREW, DO†

Provider ID: N/A

1855 1ST AVE STE 200
SAN DIEGO, CA 92101
Effective as of 01-JUL-22

BULLOCK, ANDREW, DO†

Provider ID: N/A

1855 1ST AVE STE 200
SAN DIEGO, CA 92101
Effective as of 01-JAN-21

BULLOCK, ANDREW, DO

Provider ID: N/A

1855 1ST AVE STE 200B
SAN DIEGO, CA 92101
Effective as of 01-APR-24

CHANG, ENOCH, MD

Provider ID: N/A

6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120
Effective as of 01-JUN-24

CHANG, ENOCH, MD

Provider ID: N/A

6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120
Effective as of 01-SEP-23

CHANG, ENOCH, MD

Provider ID: N/A

6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120
Effective as of 01-AUG-23

GAVRILYUK, OLEG, MD†

Provider ID: N/A

6699 ALVARADO RD STE
2302
SAN DIEGO, CA 92120
Effective as of 01-SEP-22

GAVRILYUK, OLEG, MD†

Provider ID: N/A

6699 ALVARADO RD STE
2302
SAN DIEGO, CA 92120
Effective as of 01-SEP-20

KATZEN, SETH, DO

Provider ID: N/A

9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-NOV-22

KATZEN, SETH, DO

Provider ID: N/A

9333 GENESEE AVE STE
350

C1. Lista de proveedores de la red Médico de atención especializada

SAN DIEGO, CA 92121
Effective as of 01-APR-23

KOLODGE, GAVIN, DO

Provider ID: N/A
☑ 3750 CONVOY ST STE 201
SAN DIEGO, CA 92111
Effective as of 01-SEP-23

MERCADO, JEFFRY, MD

Provider ID: N/A
☑ 6719 ALVARADO RD STE
308
SAN DIEGO, CA 92120
Effective as of 01-JUL-24

SCOTT, ROBERT, MD

Provider ID: N/A
☑ 6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

TAHAEI, SEYED, MD†

Provider ID: N/A
☑ 3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110
Teleservice
Effective as of 01-OCT-22

PHYSICIANS ASSISTANT

ABRAHAMSEN, KELSEY, PA

Provider ID: N/A
☑ 555 W C ST STE 102
SAN DIEGO, CA 92101
Effective as of 01-JAN-21

ABRAHAMSEN, KELSEY, PA

Provider ID: N/A
☑ 4142 ADAMS AVE STE 102
SAN DIEGO, CA 92116
Effective as of 01-APR-22

ABRAHAMSEN, KELSEY, PA

Provider ID: N/A
☑ 3737 MORAGA AVE STE
B103
SAN DIEGO, CA 92117
Effective as of 01-JAN-21

AHN, JORDAN, PA

Provider ID: N/A
☑ 3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-JUN-24

ALBRIGHT, KELSEY, PA†

Provider ID: N/A
☑ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

ALYAS, ALISIA, PA

Provider ID: N/A
☑ 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-JUN-21

ALYAS, ALISIA, PA

Provider ID: N/A
☑ 4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-JUN-21

ANDERSON, MATTHEW, PA

Provider ID: N/A
☑ 3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Effective as of 01-FEB-24

ANDERSON, CARLEY, PA†

Provider ID: N/A
☑ 11865 CARMEL MOUNTAIN
RD STE 1104
SAN DIEGO, CA 92128

Effective as of 01-DEC-21

ARMENTA, JORGE, PA

Provider ID: N/A
☑ 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-MAY-21

ARROYO, VANIA, PA

Provider ID: N/A
☑ 3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Effective as of 01-MAR-23

BASIN, NATALIE, PA†

Provider ID: N/A
☑ 12843 EL CAMINO REAL
STE 203
SAN DIEGO, CA 92130
Teleservice
Effective as of 01-FEB-21

BERRY, MEGHAN, PA

Provider ID: N/A
☑ 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-AUG-24

BRAVO, RICARDO, PA

Provider ID: N/A
☑ 3490 PALM AVE
SAN DIEGO, CA 92154
Effective as of 01-JUL-23


BROWN, COLLEEN, PA

Provider ID: N/A
☑ 3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-APR-24

BRUECKNER, TAMMIE, PA

Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-AUG-24

CRITES, LAURA, PA

Provider ID: N/A


 3737 MORAGA AVE STE
B103
SAN DIEGO, CA 92117

Teleservice

Effective as of 01-SEP-22

DANESHVAR, ABRAHAM, PA†


Provider ID: N/A

 9610 GRANITE RIDGE DR
STE B
SAN DIEGO, CA 92123

Effective as of 01-SEP-22

DARZI, MARIAM, PA


Provider ID: N/A

 4060 FAIRMONT AVE
SAN DIEGO, CA 92105

Effective as of 01-OCT-23

DU, SARAH, PA

Provider ID: N/A

 5405 OBERLIN DR FL 2
SAN DIEGO, CA 92121

Teleservice

Effective as of 01-APR-24

ELLIOTT, GRACE, PA

Provider ID: N/A


 3180 UNIVERSITY AVE STE
120
SAN DIEGO, CA 92104

Teleservice

Effective as of 01-JUN-24

ELLIOTT, GRACE, PA

Provider ID: N/A

 3737 MORAGA AVE STE
B103
SAN DIEGO, CA 92117

Teleservice

Effective as of 01-JUN-24

ENCE, EMILY, PA

Provider ID: N/A

 3900 5TH AVE STE 110
SAN DIEGO, CA 92103

Effective as of 01-JAN-21

ESTES, SAMANTHA, PA†

Provider ID: N/A

 3969 4TH AVE STE 208
SAN DIEGO, CA 92103

Effective as of 01-JAN-21

ESTES, SAMANTHA, PA†

Provider ID: N/A

 3969 4TH AVE STE 208
SAN DIEGO, CA 92103

Effective as of 01-MAR-23

FLORES, BRIANNA, PA

Provider ID: N/A


 3900 5TH AVE STE 110
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-JUN-24

GUTH, CARA, PA†

Provider ID: N/A


 9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121

Teleservice

Effective as of 01-JAN-24

GUTH, CARA, PA†

Provider ID: N/A

 9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121

Teleservice

Effective as of 01-JUL-21

GUZMAN, HORTENCIA, PA

Provider ID: N/A

 3490 PALM AVE
SAN DIEGO, CA 92154

Effective as of 01-JUL-23

HABBOUSH, RANA, PA

Provider ID: N/A

 4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-OCT-23

HABBOUSH, RANA, PA

Provider ID: N/A

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-OCT-23

HARMEYER, JENNA, PA

Provider ID: N/A

 3750 CONVOY ST STE 201
SAN DIEGO, CA 92111

Effective as of 01-OCT-23

HARRIS, CHRISTINA, PA

Provider ID: N/A

 3900 5TH AVE STE 110
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-APR-24

HAZAN, ALISON, PA

Provider ID: N/A

 12843 EL CAMINO REAL
STE 203

SAN DIEGO, CA 92130

Effective as of 01-DEC-21

HIGGINS, JOSHUA, PA†

Provider ID: N/A

 203 W F ST
SAN DIEGO, CA 92101

Effective as of 01-JAN-22

C1. Lista de proveedores de la red Médico de atención especializada

HIGUERA, EDITH, PA

Provider ID: N/A

📍 4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-OCT-23

HIGUERA, EDITH, PA

Provider ID: N/A

📍 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-OCT-23

HO, HOANG, PA

Provider ID: N/A

📍 4551 EL CAJON BLVD
SAN DIEGO, CA 92115

Teleservice

Effective as of 01-OCT-23

HO, HOANG, PA

Provider ID: N/A

📍 2418 ULRIC ST
SAN DIEGO, CA 92111

Teleservice

Effective as of 01-OCT-23

HUNTER, JACOB, PA

Provider ID: N/A

📍 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Effective as of 01-MAY-23

HUNTER, JACOB, PA†

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-FEB-22

HUNTER, JACOB, PA†

Provider ID: N/A

📍 16950 VIA TAZON

SAN DIEGO, CA 92127

Effective as of 01-MAY-23

KHALEGHI, MANI, PA†

Provider ID: N/A

📍 5395 RUFFIN RD STE 204
SAN DIEGO, CA 92123

Effective as of 01-AUG-24

KHALEGHI, MANI, PA†

Provider ID: N/A

📍 5395 RUFFIN RD STE 204
SAN DIEGO, CA 92123

Effective as of 01-JAN-21

LAM, CLAUDIA, PA

Provider ID: N/A

📍 3811 EL CAJON BLVD
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-JUL-24

LEE, JENNIFER, PA

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-SEP-24

LINDEMANN, CHRISTINA, PA†

Provider ID: N/A

📍 4510 EXECUTIVE DR STE
325
SAN DIEGO, CA 92121

Effective as of 01-AUG-21

LONGOBARDO, FRANCESCA, PA†

Provider ID: N/A

📍 9333 GENESEE AVE STE
350A
SAN DIEGO, CA 92121

Effective as of 01-JAN-21

MADAN, SAKSHI, PA†

Provider ID: N/A

📍 3900 5TH AVE STE 110
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-AUG-22

MARTIN, HALEY, PA

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-MAR-24

MERCER, KELLY, PA†

Provider ID: N/A

📍 4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-APR-21

MERCER, KELLY, PA†

Provider ID: N/A

📍 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-APR-21

MOLINA, MYRNA, PA

Provider ID: N/A

📍 3900 5TH AVE STE 110
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-APR-24

MOORMAN, KRISTA, PA

Provider ID: N/A

📍 3900 5TH AVE STE 110
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-MAR-23

MOREO, HUNTER, PA

Provider ID: N/A

📍 4060 4TH AVE STE 310
SAN DIEGO, CA 92103

Teleservice

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-JUL-24

MOREO, HUNTER, PA

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128

Teleservice

Effective as of 01-JUL-24

MURRAY, BREANNA, PA

Provider ID: N/A

3900 5TH AVE STE 110
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-FEB-21

NELMS, MICHAEL, PA†

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103

Effective as of 01-JAN-21

NGUYEN, THUY-VY, PA†

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-MAR-22

NGUYEN, THUY-VY, PA†

Provider ID: N/A

4060 4TH AVE STE 415
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-NOV-23

NGUYEN, KHANH, PA

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-SEP-24

NGUYEN, THUY-VY, PA†

Provider ID: N/A

9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121

Teleservice

Effective as of 01-NOV-23

NGUYEN, KHANH, PA

Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121

Effective as of 01-SEP-24

NGUYEN, THUY-VY, PA†

Provider ID: N/A

9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121

Teleservice

Effective as of 01-AUG-22

NGUYEN, THUY-VY, PA†

Provider ID: N/A

9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121

Teleservice

Effective as of 01-MAR-22

PAUL, ROBERT, PA

Provider ID: N/A

5395 RUFFIN RD STE 204
SAN DIEGO, CA 92123

Effective as of 01-JUL-24

PELIO, DARREN, PA†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-SEP-22

PELIO, DARREN, PA†

Provider ID: N/A

3900 5TH AVE STE 110

SAN DIEGO, CA 92103

Effective as of 01-SEP-22

PERREAULT, MARK, PA†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-AUG-21

PERREAULT, MARK, PA†

Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121

Effective as of 01-AUG-21

PHAM, JENNIFER, PA

Provider ID: N/A

3900 5TH AVE STE 220
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-OCT-23

PHAM, SANDY, PA

Provider ID: N/A

6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120

Effective as of 01-JUN-24

PHUNG, AIVI, PA†

Provider ID: N/A

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Effective as of 01-SEP-22

PHUNG, AIVI, PA†

Provider ID: N/A

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Effective as of 01-SEP-22

PICKERING, OANA, PA

Provider ID: N/A


555 W C ST STE 102
SAN DIEGO, CA 92101

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-MAY-23

POGGI, SARA, PA

Provider ID: N/A

 5405 OBERLIN DR FL 2
SAN DIEGO, CA 92121

Teleservice

Effective as of 01-APR-24

POST, LACEY, PA

Provider ID: N/A

 12843 EL CAMINO REAL
STE 203

SAN DIEGO, CA 92130

Effective as of 01-DEC-21

PRIJATEL, SABRINA, PA

Provider ID: N/A

 3900 5TH AVE STE 110
SAN DIEGO, CA 92103

Effective as of 01-DEC-21

PYLE, ALEXANDRA, PA

Provider ID: N/A

 9333 GENESEE AVE STE
350

SAN DIEGO, CA 92121

Effective as of 01-JAN-24

PYLE, ALEXANDRA, PA

Provider ID: N/A


 9333 GENESEE AVE STE
350

SAN DIEGO, CA 92121

Effective as of 01-JAN-21

QUIJANO, GLENN, PA


Provider ID: N/A

 5395 RUFFIN RD STE 204
SAN DIEGO, CA 92123

Effective as of 01-MAY-24

QUIJANO, GLENN, PA†

Provider ID: N/A

 2100 5TH AVE STE 200

SAN DIEGO, CA 92101

Teleservice

Effective as of 01-AUG-22

RAI, GEORGINA, PA†


Provider ID: N/A

 3900 5TH AVE STE 110
SAN DIEGO, CA 92103

Effective as of 01-JAN-21

RALL, EMILY, PA


Provider ID: N/A

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

Effective as of 01-JAN-21

SCHOELLER, BIANCA, PA†

Provider ID: N/A

 3180 UNIVERSITY AVE STE
120

SAN DIEGO, CA 92104

Effective as of 01-DEC-21

SHARPE, NORMA, PA

Provider ID: N/A

 316 25TH ST
SAN DIEGO, CA 92102

Teleservice

Effective as of 01-JAN-23

SHIVELY, JEANNINE, PA†

Provider ID: N/A

 3900 5TH AVE STE 110
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-FEB-21

SMITH, ALLISON, PA

Provider ID: N/A

 4060 4TH AVE STE 415
SAN DIEGO, CA 92103

Effective as of 01-MAY-24

SMITH, ALLISON, PA

Provider ID: N/A

 9095 RIO SAN DIEGO DR
STE 300

SAN DIEGO, CA 92108

Effective as of 01-AUG-24

SMITH, ALLISON, PA

Provider ID: N/A


 9339 GENESEE AVE STE
350

SAN DIEGO, CA 92121

Effective as of 01-MAY-24

SMITH, ALLISON, PA

Provider ID: N/A


 9339 GENESEE AVE STE
350

SAN DIEGO, CA 92121

Effective as of 01-MAY-24

SNYDER, AMANDA, PA

Provider ID: N/A


 4033 3RD AVE STE 104
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-OCT-23

SNYDER, AMANDA, PA

Provider ID: N/A

 4033 3RD AVE STE 104
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-JUN-24

SPEH, BRIAN, PA


Provider ID: N/A

 6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-MAR-24

STIFF, TYLER, PA

Provider ID: N/A

 5395 RUFFIN RD STE 201
SAN DIEGO, CA 92123

Teleservice

Effective as of 01-APR-24

C1. Lista de proveedores de la red Médico de atención especializada

SUPERNAW, AMY, PA†

Provider ID: N/A

3900 5TH AVE STE 110
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-FEB-21

TAYLOR, RYAN, PA

Provider ID: N/A

9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121

Effective as of 01-JAN-24

TAYLOR, RYAN, PA

Provider ID: N/A

9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121

Effective as of 01-NOV-23

TAYLOR, RYAN, PA

Provider ID: N/A

9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121

Effective as of 01-NOV-23

TRIMLETT, COLLEEN, PA

Provider ID: N/A

3900 5TH AVE STE 110
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-MAY-21

VALENCIA, JESUS, PA

Provider ID: N/A

995 GATEWAY CENTER
WAY STE 202
SAN DIEGO, CA 92102

Teleservice

Effective as of 01-NOV-23

VANOCKER, KARI, PA

Provider ID: N/A

3750 CONVOY ST STE 201
SAN DIEGO, CA 92111

Effective as of 01-MAR-23

VAQUERA, JACQUELINE, PA

Provider ID: N/A

3811 EL CAJON BLVD
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-AUG-24

WAHLIN, TAMARA, PA

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JUN-23

WAHLIN, TAMARA, PA

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Effective as of 01-JUN-23

WAHLIN, TAMARA, PA

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-JUN-23

WALSH, HEATHER, PA†

Provider ID: N/A

3969 4TH AVE STE 208
SAN DIEGO, CA 92103

Effective as of 01-SEP-21

WEBB, SHANNON, PA

Provider ID: N/A

6605 NANCY RIDGE DR
SAN DIEGO, CA 92121

Teleservice

Effective as of 01-MAR-24

WEBB, SHANNON, PA

Provider ID: N/A

6605 NANCY RIDGE DR
SAN DIEGO, CA 92121

Teleservice

Effective as of 01-MAY-23

WEIR, JACQUELINE, PA†

Provider ID: N/A

9909 MIRA MESA BLVD
STE 200
SAN DIEGO, CA 92131

Effective as of 01-APR-21

WEIR, JACQUELINE, PA†

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103

Effective as of 01-APR-21

WEIR, JACQUELINE, PA†

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103

Effective as of 01-APR-21

WHITEAKER, ARIKA, PA

Provider ID: N/A

12843 EL CAMINO REAL
STE 203
SAN DIEGO, CA 92130

Teleservice

Effective as of 01-JUN-24

WILAND, WINONA, PA

Provider ID: N/A

5405 OBERLIN DR STE 2
SAN DIEGO, CA 92121

Teleservice

Effective as of 01-JUN-23

WRIGHT, DEREK, PA

Provider ID: N/A

3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110

C1. Lista de proveedores de la red Médico de atención especializada

Teleservice

Effective as of 01-NOV-23

WRIGHT, DEREK, PA

Provider ID: N/A

3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110

Teleservice

Effective as of 01-AUG-23

WRIGHT, DEREK, PA

Provider ID: N/A

3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110

Teleservice

Effective as of 01-JUL-23

PODIATRIST

ALMIRANTE, MARIA ELENA, DPM

Provider ID: N/A

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Effective as of 01-JUL-22

ALMIRANTE, MARIA ELENA, DPM

Provider ID: N/A

4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105

Effective as of 01-JUL-22

ALMIRANTE, MARIA ELENA, DPM

Provider ID: N/A

4290 POLK AVE
SAN DIEGO, CA 92105

Effective as of 01-JUL-22

ALMIRANTE, MARIA ELENA, DPM

Provider ID: N/A

1016 OUTER RD
SAN DIEGO, CA 92154
Effective as of 01-JUL-22

BROOKSHIER, TRENT, DPM

Provider ID: N/A

3989 32ND ST
SAN DIEGO, CA 92104

Teleservice

Effective as of 01-DEC-23

BUI, JOSEPH, DPM

Provider ID: N/A

11205 VIA CARROZA
SAN DIEGO, CA 92124

Effective as of 01-APR-23

BUI, JOSEPH, DPM

Provider ID: N/A

5354 UNIVERSITY AVE STE
2
SAN DIEGO, CA 92105
Effective as of 01-AUG-23

COLLINS, MICHAEL, DPM†

Provider ID: N/A

9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-NOV-15

COLLINS, MICHAEL, DPM†

Provider ID: N/A

9333 GENESEE AVE STE
350A
SAN DIEGO, CA 92121
Effective as of 01-SEP-22

COLLINS, MICHAEL, DPM†

Provider ID: N/A

9333 GENESEE AVE STE
350A
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

COLLINS, MICHAEL, DPM†

Provider ID: N/A

9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

COLLINS, MICHAEL, DPM†

Provider ID: N/A

9333 GENESEE AVE STE
350A
SAN DIEGO, CA 92121
Effective as of 01-AUG-23

COLLINS, MICHAEL, DPM†

Provider ID: N/A

9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-APR-23

CULLEN, BENJAMIN, DPM†

Provider ID: N/A

2650 CAMINO DEL RIO N
STE 101
SAN DIEGO, CA 92108
Effective as of 01-APR-17

FOYGELMAN, ALEKSANDR, DPM†

Provider ID: N/A

4712 EL CAJON BLVD STE D
SAN DIEGO, CA 92115
Effective as of 01-JAN-21

FOYGELMAN, ALEKSANDR, DPM†

Provider ID: N/A

4712 EL CAJON BLVD STE D
SAN DIEGO, CA 92115
Effective as of 01-JAN-24

FOYGELMAN, ALEKSANDR, DPM†

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

4712 EL CAJON BLVD STE D
SAN DIEGO, CA 92115
Effective as of 01-JUL-22

FOYGELMAN, ALEKSANDR, DPM†

Provider ID: N/A

4712 EL CAJON BLVD STE D
SAN DIEGO, CA 92115
Effective as of 01-JAN-21

JOLLEY, WALTER, DPM

Provider ID: N/A

5222 BALBOA AVE STE 41
SAN DIEGO, CA 92117
Effective as of 01-APR-15

JOLLEY, WALTER, DPM

Provider ID: N/A

5222 BALBOA AVE STE 41
SAN DIEGO, CA 92117
Effective as of 01-SEP-20

LEE, RYAN, DPM†

Provider ID: N/A

2650 CAMINO DEL RIO N
STE 101
SAN DIEGO, CA 92108
Effective as of 01-APR-17

MANCHEL, BRUCE, DPM

Provider ID: N/A

1666 PRECISION PARK LN
SAN DIEGO, CA 92173
Effective as of 01-JUL-24

QUINN, MICHAEL, DPM†

Provider ID: N/A

7485 MISSION VALLEY RD
STE 104A
SAN DIEGO, CA 92108
Effective as of 01-FEB-07

QUINN, MICHAEL, DPM†

Provider ID: N/A

7485 MISSION VALLEY RD
STE 104A
SAN DIEGO, CA 92108
Effective as of 01-JUL-17

RICE, BRITTANY, DPM†

Provider ID: N/A

2650 CAMINO DEL RIO N
STE 200
SAN DIEGO, CA 92108
Effective as of 01-OCT-17

TOUMA, ELIE, DPM

Provider ID: N/A

6719 ALVARADO RD STE
303
SAN DIEGO, CA 92120
Effective as of 01-APR-23

VALLONE, ROBERT, DPM†

Provider ID: N/A

3363 4TH AVE
SAN DIEGO, CA 92103
Effective as of 01-SEP-17

WILSON, MATTHEW, DPM†

Provider ID: N/A

5555 RESERVOIR DR STE
104
SAN DIEGO, CA 92120
Effective as of 01-FEB-22

PREVENTATIVE MEDICINE GENERAL

HERR, RAYMOND, MD

Provider ID: N/A

3737 MORAGA AVE STE
B103
SAN DIEGO, CA 92117
Teleservice
Effective as of 01-MAR-23

JACKSON, CODY, MD

Provider ID: N/A

3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-SEP-22

JACKSON, CODY, MD

Provider ID: N/A

6386 ALVARADO CT STE
101
SAN DIEGO, CA 92120
Teleservice
Effective as of 01-SEP-22

NAJAR, FAUZI, MD

Provider ID: N/A

3490 PALM AVE
SAN DIEGO, CA 92154
Effective as of 01-JUL-23

ROMERO, CAMILA, MD

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

ROMERO, CAMILA, MD

Provider ID: N/A

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

ROMERO, CAMILA, MD

Provider ID: N/A

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

STERN, ANNA, MD

Provider ID: N/A

4142 ADAMS AVE STE 102
SAN DIEGO, CA 92116
Effective as of 01-JAN-21

PSYCHIATRY

**C1. Lista de proveedores de la red
Médico de atención especializada**

BECKER, OLGA, MD

Provider ID: N/A

📍 8775 AERO DR STE 238
SAN DIEGO, CA 92123
Effective as of 01-JUN-24

BECKER, OLGA, MD

Provider ID: N/A

📍 8775 AERO DR STE 238
SAN DIEGO, CA 92123
Effective as of 01-JUN-24

BEVINS, ELIZABETH, MD

Provider ID: N/A

📍 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

BEVINS, ELIZABETH, MD

Provider ID: N/A

📍 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

BINDAL, ANKUR, MD†

Provider ID: N/A

📍 6496 WEATHERS PL STE
100
SAN DIEGO, CA 92121
Effective as of 01-SEP-21

BINDAL, ANKUR, MD†

Provider ID: N/A

📍 6496 WEATHERS PL STE
100
SAN DIEGO, CA 92121
Effective as of 01-SEP-21

BINDAL, ANKUR, MD†

Provider ID: N/A

📍 6496 WEATHERS PL STE
100
SAN DIEGO, CA 92121
Effective as of 01-SEP-22

BINDAL, ANKUR, MD†

Provider ID: N/A

📍 6496 WEATHERS PL STE
100
SAN DIEGO, CA 92121
Effective as of 01-SEP-21

BINDAL, ANKUR, MD†

Provider ID: N/A

📍 6496 WEATHERS PL STE
100
SAN DIEGO, CA 92121
Effective as of 01-SEP-22

BINDAL, ANKUR, MD†

Provider ID: N/A

📍 6496 WEATHERS PL STE
100
SAN DIEGO, CA 92121
Effective as of 01-SEP-21

BOBO, JERRY, MD†

Provider ID: N/A

📍 6496 WEATHERS PL STE
100
SAN DIEGO, CA 92121
Effective as of 01-SEP-22

BOBO, JERRY, MD†

Provider ID: N/A

📍 6496 WEATHERS PL STE
100
SAN DIEGO, CA 92121
Effective as of 01-SEP-22

CHAUHAN, SMIT, MD†

Provider ID: N/A

📍 7850 VISTA HILL AVE
SAN DIEGO, CA 92123
Effective as of 01-MAY-22

CHAUHAN, SMIT, MD†

Provider ID: N/A

📍 7850 VISTA HILL AVE
SAN DIEGO, CA 92123

Effective as of 01-MAY-22

DIXON, THOMAS, MD

Provider ID: N/A

📍 10717 SORRENTO VALLEY
RD
STE 210
SAN DIEGO, CA 92121
Effective as of 01-SEP-24

DIXON, THOMAS, MD

Provider ID: N/A

📍 10717 SORRENTO VALLEY
RD
STE 210
SAN DIEGO, CA 92121
Effective as of 01-SEP-24

FANOUS, ASHRAF, MD

Provider ID: N/A

📍 8775 AERO DR STE 238
SAN DIEGO, CA 92123
Effective as of 01-MAY-23

FANOUS, ASHRAF, MD

Provider ID: N/A

📍 8775 AERO DR STE 238
SAN DIEGO, CA 92123
Effective as of 01-JUN-24

FANOUS, ASHRAF, MD

Provider ID: N/A

📍 8775 AERO DR STE 238
SAN DIEGO, CA 92123
Effective as of 01-MAY-23

FANOUS, ASHRAF, MD

Provider ID: N/A

📍 8775 AERO DR STE 238
SAN DIEGO, CA 92123
Effective as of 01-JUN-24

FITZGERALD, MICHAEL, MD†

Provider ID: N/A

📍 16918 DOVE CANYON RD

C1. Lista de proveedores de la red Médico de atención especializada

STE 100
SAN DIEGO, CA 92127
Effective as of 01-APR-22

FITZGERALD, MICHAEL, MD†
Provider ID: N/A
☑ 16918 DOVE CANYON RD
STE 100
SAN DIEGO, CA 92127
Effective as of 01-APR-22

GLEICHMAN, JULIA, MD†
Provider ID: N/A
☑ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

GLEICHMAN, JULIA, MD†
Provider ID: N/A
☑ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

GUTFLAIS, ERIC, MD
Provider ID: N/A
☑ 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

GUTFLAIS, ERIC, MD
Provider ID: N/A
☑ 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

HANAGAMI, CORI, MD
Provider ID: N/A
☑ 4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123
Effective as of 01-FEB-23

HANAGAMI, CORI, MD
Provider ID: N/A
☑ 4550 KEARNY VILLA RD

STE 116
SAN DIEGO, CA 92123
Effective as of 01-JAN-23

HANAGAMI, CORI, MD
Provider ID: N/A
☑ 4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123
Effective as of 01-JAN-23

HANAGAMI, CORI, MD
Provider ID: N/A
☑ 4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123
Effective as of 01-JAN-23

HANAGAMI, CORI, MD
Provider ID: N/A
☑ 4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123
Effective as of 01-JAN-23

HANAGAMI, CORI, MD
Provider ID: N/A
☑ 4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123
Effective as of 01-FEB-23

HERSEVOORT, SHAWN, MD
Provider ID: N/A
☑ 4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123
Effective as of 01-FEB-23

HERSEVOORT, SHAWN, MD
Provider ID: N/A
☑ 4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123
Effective as of 01-JAN-23

HERSEVOORT, SHAWN, MD
Provider ID: N/A
☑ 4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123
Effective as of 01-JAN-23

HERSEVOORT, SHAWN, MD
Provider ID: N/A
☑ 4550 KEARNY VILLA RD
STE 116
SAN DIEGO, CA 92123
Effective as of 01-FEB-23

HOLLEMAN, KEVIN, DO
Provider ID: N/A
☑ 8775 AERO DR STE 238
SAN DIEGO, CA 92123
Effective as of 01-APR-23

HOLLEMAN, KEVIN, DO
Provider ID: N/A
☑ 8775 AERO DR STE 238
SAN DIEGO, CA 92123
Effective as of 01-JUN-24

HOLLEMAN, KEVIN, DO
Provider ID: N/A
☑ 8775 AERO DR STE 238
SAN DIEGO, CA 92123
Effective as of 01-APR-23

HOLLEMAN, KEVIN, DO
Provider ID: N/A
☑ 8775 AERO DR STE 238
SAN DIEGO, CA 92123
Effective as of 01-JUN-24

JOHN, TANNER, MD
Provider ID: N/A
☑ 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
Teleservice
Effective as of 01-OCT-23

C1. Lista de proveedores de la red Médico de atención especializada

JOHN, TANNER, MD

Provider ID: N/A

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

Teleservice

Effective as of 01-OCT-23

JOSHI, YASH, MD

Provider ID: N/A

350 DICKINSON ST
SAN DIEGO, CA 92103

Effective as of 01-JAN-24

JOSHI, YASH, MD

Provider ID: N/A

350 DICKINSON ST
SAN DIEGO, CA 92103

Effective as of 01-JAN-24

KARANJIA, NAVAZ, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-FEB-22

KARANJIA, NAVAZ, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

KARANJIA, NAVAZ, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

KARANJIA, NAVAZ, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-FEB-22

KARIPPOT, ANOOP, MD†

Provider ID: N/A

10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131

Teleservice

Effective as of 01-SEP-15

KARIPPOT, ANOOP, MD†

Provider ID: N/A

10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131

Teleservice

Effective as of 01-JUN-22

KARIPPOT, ANOOP, MD†

Provider ID: N/A

10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131

Teleservice

Effective as of 01-SEP-15

KARIPPOT, ANOOP, MD†

Provider ID: N/A

10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131

Teleservice

Effective as of 01-JUN-22

KARRIS, BIANCA, MD

Provider ID: N/A

8775 AERO DR STE 238
SAN DIEGO, CA 92123

Effective as of 01-MAR-23

KARRIS, BIANCA, MD

Provider ID: N/A

8775 AERO DR STE 238
SAN DIEGO, CA 92123

Effective as of 01-JUN-24

KARRIS, BIANCA, MD

Provider ID: N/A

8775 AERO DR STE 238
SAN DIEGO, CA 92123
Effective as of 01-MAR-23

KARRIS, BIANCA, MD

Provider ID: N/A

8775 AERO DR STE 238
SAN DIEGO, CA 92123
Effective as of 01-JUN-24

KEIFER, JASON, MD

Provider ID: N/A

4452 PARK BLVD STE 302
SAN DIEGO, CA 92116
Effective as of 01-APR-23

KEIFER, JASON, MD

Provider ID: N/A

4452 PARK BLVD STE 302
SAN DIEGO, CA 92116
Effective as of 01-APR-23

LEDBETTER, ALEX, DO

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-JAN-24

LEDBETTER, ALEX, DO

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-JAN-24

LI, XIA, MD†

Provider ID: N/A

16918 DOVE CANYON RD
STE 100
SAN DIEGO, CA 92127
Effective as of 01-AUG-21

LI, XIA, MD†

Provider ID: N/A

16918 DOVE CANYON RD

C1. Lista de proveedores de la red Médico de atención especializada

STE 100
SAN DIEGO, CA 92127
Effective as of 01-AUG-21

MIRON, JEAN-PHILIPPE, MD
Provider ID: N/A

16918 DOVE CANYON RD
STE 100
SAN DIEGO, CA 92127
Effective as of 01-MAR-24

MIRON, JEAN-PHILIPPE, MD
Provider ID: N/A

16918 DOVE CANYON RD
STE 100
SAN DIEGO, CA 92127
Effective as of 01-MAR-24

MOORE, SHAVON, MD†
Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-NOV-21

MOORE, SHAVON, MD†
Provider ID: N/A

4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-NOV-21

MORRIS, RAPHAEL, MD
Provider ID: N/A

12264 EL CAMINO REAL
STE 202
SAN DIEGO, CA 92130
Effective as of 01-NOV-22

MORRIS, RAPHAEL, MD
Provider ID: N/A

12264 EL CAMINO REAL
STE 203
SAN DIEGO, CA 92130
Effective as of 01-JAN-21

MORRIS, RAPHAEL, MD

Provider ID: N/A

12264 EL CAMINO REAL
STE 203
SAN DIEGO, CA 92130
Effective as of 01-JAN-21

MORRIS, RAPHAEL, MD
Provider ID: N/A

12264 EL CAMINO REAL
STE 202
SAN DIEGO, CA 92130
Effective as of 01-NOV-22

NICHOLS, ALPHONSO, MD
Provider ID: N/A

10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131
Teleservice
Effective as of 01-JAN-23

NICHOLS, ALPHONSO, MD
Provider ID: N/A

10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131
Teleservice
Effective as of 01-JUL-22

NICHOLS, ALPHONSO, MD
Provider ID: N/A

10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131
Teleservice
Effective as of 01-JAN-23

NICHOLS, ALPHONSO, MD
Provider ID: N/A

10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131
Teleservice
Effective as of 01-JUL-22

OJHA, PRITI, MD

Provider ID: N/A
1666 PRECISION PARK LN
SAN DIEGO, CA 92173
Effective as of 01-JUN-23

OJHA, PRITI, MD
Provider ID: N/A

1666 PRECISION PARK LN
SAN DIEGO, CA 92173
Effective as of 01-JUN-23

PARASHAR, ANUSHREE, MD
Provider ID: N/A

8775 AERO DR STE 238 FL 3
SAN DIEGO, CA 92123
Effective as of 01-JUN-24

PARASHAR, ANUSHREE, MD
Provider ID: N/A

8775 AERO DR STE 238
SAN DIEGO, CA 92123
Effective as of 01-MAR-23

PARASHAR, ANUSHREE, MD
Provider ID: N/A

8775 AERO DR STE 238 FL 3
SAN DIEGO, CA 92123
Effective as of 01-JUN-24

PARASHAR, ANUSHREE, MD
Provider ID: N/A

8775 AERO DR STE 238
SAN DIEGO, CA 92123
Effective as of 01-MAR-23

PLOESSER, MARKUS, MD
Provider ID: N/A

1855 1ST AVE STE 200B
SAN DIEGO, CA 92101
Effective as of 01-FEB-23

PLOESSER, MARKUS, MD
Provider ID: N/A

1855 1ST AVE STE 200B

**C1. Lista de proveedores de la red
Médico de atención especializada**

SAN DIEGO, CA 92101
Effective as of 01-FEB-23

PLOESSER, MARKUS, MD

Provider ID: N/A

📍 1855 1ST AVE STE 200B
SAN DIEGO, CA 92101
Effective as of 01-FEB-23

PLOESSER, MARKUS, MD

Provider ID: N/A

📍 1855 1ST AVE STE 200B
SAN DIEGO, CA 92101
Effective as of 01-FEB-23

QAYOUMI, WALI, MD

Provider ID: N/A

📍 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

QAYOUMI, WALI, MD†

Provider ID: N/A

📍 4510 EXECUTIVE DR STE
325
SAN DIEGO, CA 92121
Effective as of 01-OCT-21

QAYOUMI, WALI, MD

Provider ID: N/A

📍 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

QAYOUMI, WALI, MD†

Provider ID: N/A

📍 4510 EXECUTIVE DR STE
325
SAN DIEGO, CA 92121
Effective as of 01-OCT-21

**RIBEIRO CALDAS DOMINGUES,
ISABEL, MD†**

Provider ID: N/A

📍 350 DICKINSON ST

SAN DIEGO, CA 92103
Effective as of 01-FEB-21

**RIBEIRO CALDAS DOMINGUES,
ISABEL, MD†**

Provider ID: N/A

📍 350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-FEB-21

**SALGUEROGALLAND,
MARIOLUIS, MD**

Provider ID: N/A

📍 4157 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-JUN-23

**SALGUEROGALLAND,
MARIOLUIS, MD**

Provider ID: N/A

📍 4175 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-JUN-23

**SALGUEROGALLAND,
MARIOLUIS, MD**

Provider ID: N/A

📍 4185 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-JUN-23

**SALGUEROGALLAND,
MARIOLUIS, MD†**

Provider ID: N/A

📍 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-SEP-21

**SALGUEROGALLAND,
MARIOLUIS, MD**

Provider ID: N/A

📍 4187 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-JUN-23

**SALGUEROGALLAND,
MARIOLUIS, MD**

Provider ID: N/A

📍 4157 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-JUN-23

**SALGUEROGALLAND,
MARIOLUIS, MD†**

Provider ID: N/A

📍 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-SEP-21

**SALGUEROGALLAND,
MARIOLUIS, MD**

Provider ID: N/A

📍 4185 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-JUN-23

**SALGUEROGALLAND,
MARIOLUIS, MD**

Provider ID: N/A

📍 4175 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-JUN-23

**SALGUEROGALLAND,
MARIOLUIS, MD**

Provider ID: N/A

📍 4187 FAIRMOUNT AVE
SAN DIEGO, CA 92105

C1. Lista de proveedores de la red Médico de atención especializada

Teleservice

Effective as of 01-JUN-23

TADROS, EMAD, MD†

Provider ID: N/A

📍 4060 4TH AVE STE 102
SAN DIEGO, CA 92103

Effective as of 01-JAN-23

TADROS, EMAD, MD†

Provider ID: N/A

📍 4060 4TH AVE STE 102
SAN DIEGO, CA 92103

Effective as of 01-FEB-07

TADROS, EMAD, MD†

Provider ID: N/A

📍 4060 4TH AVE STE 102
SAN DIEGO, CA 92103

Effective as of 01-JAN-23

TADROS, EMAD, MD†

Provider ID: N/A

📍 4060 4TH AVE STE 102
SAN DIEGO, CA 92103

Effective as of 01-FEB-07

WEISSMAN, CORY, MD†

Provider ID: N/A

📍 16918 DOVE CANYON RD
STE 100
SAN DIEGO, CA 92127

Effective as of 01-DEC-21

WEISSMAN, CORY, MD†

Provider ID: N/A

📍 16918 DOVE CANYON RD
STE 100
SAN DIEGO, CA 92127

Effective as of 01-DEC-21

YAGUDAYEVA, RAISA, DO†

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-MAY-22

YAGUDAYEVA, RAISA, DO†

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-MAY-22

PSYCHIATRY CHILD

KARIPPOT, ANOOP, MD†

Provider ID: N/A

📍 10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131

Teleservice

Effective as of 01-JAN-23

KARIPPOT, ANOOP, MD†

Provider ID: N/A

📍 10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131

Teleservice

Effective as of 01-JUN-22

KARIPPOT, ANOOP, MD†

Provider ID: N/A

📍 10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131

Teleservice

Effective as of 01-SEP-15

KARIPPOT, ANOOP, MD†

Provider ID: N/A

📍 10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131

Teleservice

Effective as of 01-SEP-15

KARIPPOT, ANOOP, MD†

Provider ID: N/A

📍 10672 WEXFORD ST STE
280

SAN DIEGO, CA 92131

Teleservice

Effective as of 01-JAN-23

KARIPPOT, ANOOP, MD†

Provider ID: N/A

📍 10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131

Teleservice

Effective as of 01-JUN-22

NICHOLS, ALPHONSO, MD

Provider ID: N/A

📍 10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131

Teleservice

Effective as of 01-JUL-22

NICHOLS, ALPHONSO, MD

Provider ID: N/A

📍 10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131

Teleservice

Effective as of 01-JAN-23

NICHOLS, ALPHONSO, MD

Provider ID: N/A

📍 10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131

Teleservice

Effective as of 01-JUL-22

NICHOLS, ALPHONSO, MD

Provider ID: N/A

📍 10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131

Teleservice

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-JAN-23

PSYCHIATRY SLEEP MEDICINE

KARIPPOT, ANOOP, MD†

Provider ID: N/A

📍 10672 WEXFORD ST STE
280
SAN DIEGO, CA 92131

Teleservice

Effective as of 01-JAN-23

PSYCHOLOGIST

BADER, RACHEL, PSYD

Provider ID: N/A

📍 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Effective as of 01-JUN-23

BADER, RACHEL, PSYD

Provider ID: N/A

📍 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Effective as of 01-JUN-23

BAHENA-COLLEY, SANDRA, PSYD†

Provider ID: N/A

📍 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-APR-21

BAHENA-COLLEY, SANDRA, PSYD†

Provider ID: N/A

📍 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-APR-21

BHAJU, JESHMIN, PhD†

Provider ID: N/A

📍 330 LEWIS ST
SAN DIEGO, CA 92103

Effective as of 01-AUG-22

BHAJU, JESHMIN, PhD†

Provider ID: N/A

📍 330 LEWIS ST
SAN DIEGO, CA 92103

Effective as of 01-AUG-22

BOGUNIA, ARIKA, PSYD†

Provider ID: N/A

📍 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Effective as of 01-NOV-22

BOGUNIA, ARIKA, PSYD†

Provider ID: N/A

📍 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Effective as of 01-NOV-22

BOGUNIA, ARIKA, PSYD†

Provider ID: N/A

📍 4189 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Effective as of 01-NOV-22

BOGUNIA, ARIKA, PSYD†

Provider ID: N/A

📍 4185 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Effective as of 01-NOV-22

BOGUNIA, ARIKA, PSYD†

Provider ID: N/A

📍 4157 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Effective as of 01-NOV-22

BOGUNIA, ARIKA, PSYD†

Provider ID: N/A

📍 4185 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Effective as of 01-NOV-22

BOGUNIA, ARIKA, PSYD†

Provider ID: N/A

📍 4157 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Effective as of 01-NOV-22

BOGUNIA, ARIKA, PSYD†

Provider ID: N/A

📍 4189 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Effective as of 01-NOV-22

CARBONELL, SONIA, PSYD†

Provider ID: N/A

📍 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-JUL-21

CARBONELL, SONIA, PSYD†

Provider ID: N/A

📍 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-JUL-21

ESTRADA PATINO, ANGELA, PSYD

Provider ID: N/A

📍 4080 CENTRE ST STE 104
SAN DIEGO, CA 92103

Effective as of 01-MAR-23

ESTRADA PATINO, ANGELA, PSYD

Provider ID: N/A

📍 4080 CENTRE ST STE 104
SAN DIEGO, CA 92103

Effective as of 01-MAR-23

GALANT, DANIEL, PhD

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-APR-21

GALANT, DANIEL, PhD

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-APR-21

GOMEZ, JUANITA, PhD†

Provider ID: N/A

6030 VILLAGE WAY
SAN DIEGO, CA 92130

Effective as of 01-AUG-22

GOMEZ, JUANITA, PhD†

Provider ID: N/A

6030 VILLAGE WAY
SAN DIEGO, CA 92130

Effective as of 01-AUG-22

MINASSIAN, ARPI, PhD†

Provider ID: N/A

350 DICKINSON ST
SAN DIEGO, CA 92103

Effective as of 01-NOV-21

MINASSIAN, ARPI, PhD†

Provider ID: N/A

350 DICKINSON ST
SAN DIEGO, CA 92103

Effective as of 01-NOV-21

MIRANDA, CYNTHIA, PhD†

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-APR-21

MIRANDA, CYNTHIA, PhD†

Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Teleservice

Effective as of 01-APR-21

PARK, JESSIE, PSYD†

Provider ID: N/A

4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122

Effective as of 01-DEC-21

PARK, JESSIE, PSYD†

Provider ID: N/A

4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122

Effective as of 01-DEC-21

TARLE, STEPHANIE, PhD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-DEC-23

TARLE, STEPHANIE, PhD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-DEC-23

VANFOSSEN, BRIAN, PhD†

Provider ID: N/A

3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110

Teleservice

Effective as of 01-SEP-22

VANFOSSEN, BRIAN, PhD†

Provider ID: N/A

3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110

Teleservice

Effective as of 01-NOV-23

VANFOSSEN, BRIAN, PhD†

Provider ID: N/A

3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110

Teleservice

Effective as of 01-SEP-22

VANFOSSEN, BRIAN, PhD†

Provider ID: N/A

3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110

Teleservice

Effective as of 01-NOV-23

PULMONARY DISEASES

BAILEY, JACOB, MD

Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121

Effective as of 01-JUN-23

BAILEY, JACOB, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JUN-23

BAO, GANG, MD†

Provider ID: N/A

6699 ALVARADO RD STE
2306
SAN DIEGO, CA 92120

Teleservice

Effective as of 01-SEP-22

LE, HUAN, MD†

Provider ID: N/A

5507 EL CAJON BLVD STE
C
SAN DIEGO, CA 92115

Teleservice

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-JUL-22

LE, HUAN, MD†

Provider ID: N/A

5507 EL CAJON BLVD STE
C
SAN DIEGO, CA 92115

Teleservice

Effective as of 01-JAN-21

LE, HUAN, MD†

Provider ID: N/A

5507 EL CAJON BLVD STE
C
SAN DIEGO, CA 92115

Teleservice

Effective as of 01-JAN-21

LE, HUAN, MD†

Provider ID: N/A

5507 EL CAJON BLVD STE
C
SAN DIEGO, CA 92115

Teleservice

Effective as of 01-JAN-14

MCGUIRE, WILLIAM, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JUN-23

MUNOZ PINEDA, JORGE, MD

Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121

Effective as of 01-DEC-23

MUNOZ PINEDA, JORGE, MD

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103

Effective as of 01-DEC-23

MUNOZ PINEDA, JORGE, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-DEC-23

PEARCE, ALEX, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JUN-23

POKALA, SATHYA, MD

Provider ID: N/A

8031 LINDA VISTA RD STE
100
SAN DIEGO, CA 92111

Teleservice

Effective as of 01-JUN-24

RANCHES, GREGORY, MD†

Provider ID: N/A

501 WASHINGTON ST STE
725
SAN DIEGO, CA 92103

Effective as of 01-AUG-20

RANCHES, GREGORY, MD†

Provider ID: N/A

501 WASHINGTON ST STE
725
SAN DIEGO, CA 92103

Effective as of 01-APR-19

RANCHES, GREGORY, MD†

Provider ID: N/A

501 WASHINGTON ST STE
508
SAN DIEGO, CA 92103

Effective as of 01-MAY-20

RESNIKOFF, PAMELA, MD†

Provider ID: N/A

501 WASHINGTON ST STE
725
SAN DIEGO, CA 92103

Effective as of 01-MAR-22

SPITZ, BRADLEY, MD

Provider ID: N/A

501 WASHINGTON ST STE
725
SAN DIEGO, CA 92103

Effective as of 01-MAY-23

SPITZ, BRADLEY, MD

Provider ID: N/A

501 WASHINGTON ST STE
725
SAN DIEGO, CA 92103

Effective as of 01-MAY-23

WONG, STEVEN, MD†

Provider ID: N/A

501 WASHINGTON ST STE
725
SAN DIEGO, CA 92103

Effective as of 01-APR-19

WONG, STEVEN, MD†

Provider ID: N/A

501 WASHINGTON ST STE
725
SAN DIEGO, CA 92103

Effective as of 01-APR-19

RADIATION ONCOLOGY

BRUGGEMAN, ANDREW, MD†

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127

Effective as of 01-JAN-21

BRUGGEMAN, ANDREW, MD†

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127

Effective as of 01-MAR-21

**C1. Lista de proveedores de la red
Médico de atención especializada**

BRUGGEMAN, ANDREW, MD

Provider ID: N/A

3075 HEALTH CENTER DR
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

CARMONA, RUBEN, MD

Provider ID: N/A

7901 FROST ST
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

COLEMAN, LORI, MD†

Provider ID: N/A

3075 HEALTH CENTER DR
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

FULLER, DONALD, MD†

Provider ID: N/A

5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123
Effective as of 01-SEP-22

FULLER, DONALD, MD†

Provider ID: N/A

5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

FULLER, DONALD, MD†

Provider ID: N/A

5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123
Effective as of 01-JUL-22

FULLER, DONALD, MD†

Provider ID: N/A

5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123
Effective as of 01-SEP-22

FULLER, DONALD, MD†

Provider ID: N/A

3366 5TH AVE

SAN DIEGO, CA 92103
Effective as of 01-JAN-24

FULLER, DONALD, MD†

Provider ID: N/A

3366 5TH AVE
SAN DIEGO, CA 92103
Effective as of 01-JUL-22

FULLER, DONALD, MD†

Provider ID: N/A

3366 5TH AVE
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

FULLER, DONALD, MD†

Provider ID: N/A

3366 5TH AVE
SAN DIEGO, CA 92103
Effective as of 01-MAY-24

FULLER, DONALD, MD

Provider ID: N/A

5395 RUFFIN RD
SAN DIEGO, CA 92123
Effective as of 01-MAY-24

**HATTANGADI-GLUTH, JONA,
MD†**

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Effective as of 01-JAN-21

HOOPES, DAVID, MD†

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Effective as of 01-JAN-21

HOOPES, DAVID, MD†

Provider ID: N/A

16918 DOVE CANYON RD

STE 103
SAN DIEGO, CA 92127
Effective as of 01-SEP-22

IJAZ, TAHIR, MD

Provider ID: N/A

5395 RUFFIN RD
SAN DIEGO, CA 92123
Effective as of 01-MAY-24

IJAZ, TAHIR, MD†

Provider ID: N/A

3366 5TH AVE
SAN DIEGO, CA 92103
Effective as of 01-MAY-24

IJAZ, TAHIR, MD†

Provider ID: N/A

3366 5TH AVE
SAN DIEGO, CA 92103*
Effective as of 01-SEP-15

IJAZ, TAHIR, MD†

Provider ID: N/A

3366 5TH AVE
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

IJAZ, TAHIR, MD†

Provider ID: N/A

3366 5TH AVE
SAN DIEGO, CA 92103
Effective as of 01-JUL-22

IJAZ, TAHIR, MD†

Provider ID: N/A

5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123
Effective as of 01-JUL-22

IJAZ, TAHIR, MD†

Provider ID: N/A

5395 RUFFIN RD STE 202
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

C1. Lista de proveedores de la red Médico de atención especializada

IJAZ, TAHIR, MD†

Provider ID: N/A

📍 5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123

Effective as of 01-SEP-22

IJAZ, TAHIR, MD†

Provider ID: N/A

📍 3366 5TH AVE
SAN DIEGO, CA 92103

Effective as of 01-SEP-22

JABBARI, SIAVASH, MD†

Provider ID: N/A

📍 3075 HEALTH CENTER DR
LEVEL 0
SAN DIEGO, CA 92123

Effective as of 01-OCT-22

MACEWAN, IAIN, MD†

Provider ID: N/A

📍 16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127

Effective as of 01-JAN-21

MELL, LOREN, MD†

Provider ID: N/A

📍 16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127

Effective as of 01-JAN-21

MURPHY, KEVIN, MD†

Provider ID: N/A

📍 16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127

Effective as of 01-JAN-21

PEJAVAR, SUNANDA, MD†

Provider ID: N/A

📍 3075 HEALTH CENTER DR
SAN DIEGO, CA 92123

Effective as of 01-JAN-21

SANDHU, AJAY PAL, MD†

Provider ID: N/A

📍 16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127

Effective as of 01-JAN-21

SHARABI, ANDREW, MD†

Provider ID: N/A

📍 16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127

Effective as of 01-JAN-21

SHIRAZI, REZA, MD†

Provider ID: N/A

📍 5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123

Effective as of 01-SEP-22

SHIRAZI, REZA, MD†

Provider ID: N/A

📍 5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123

Effective as of 01-JUL-22

SHIRAZI, REZA, MD†

Provider ID: N/A

📍 5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123

Effective as of 01-JAN-21

SHIRAZI, REZA, MD†

Provider ID: N/A

📍 3366 5TH AVE
SAN DIEGO, CA 92103

Effective as of 01-JUL-22

SHIRAZI, REZA, MD†

Provider ID: N/A

📍 5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123

Effective as of 01-SEP-22

SHIRAZI, REZA, MD†

Provider ID: N/A

📍 3366 5TH AVE
SAN DIEGO, CA 92103

Effective as of 01-JAN-21

SHIRAZI, REZA, MD†

Provider ID: N/A

📍 3366 5TH AVE
SAN DIEGO, CA 92103

Effective as of 01-MAY-24

SHIRAZI, REZA, MD

Provider ID: N/A

📍 5395 RUFFIN RD
SAN DIEGO, CA 92123

Effective as of 01-MAY-24

SHIRAZI, REZA, MD†

Provider ID: N/A

📍 3366 5TH AVE
SAN DIEGO, CA 92103

Effective as of 01-SEP-22

SIMPSON, DANIEL, MD†

Provider ID: N/A

📍 16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127

Effective as of 01-JAN-21

STRAKA, CHRISTOPHER, MD†

Provider ID: N/A

📍 16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127

Teleservice

Effective as of 01-JAN-21

STRAKA, CHRISTOPHER, MD†

Provider ID: N/A

📍 16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127

C1. Lista de proveedores de la red Médico de atención especializada

Teleservice

Effective as of 01-APR-23

TYE, KAREN, MD

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127

Teleservice

Effective as of 01-JUN-23

TYE, KAREN, MD

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127

Teleservice

Effective as of 01-SEP-23

VAKILIAN, SIAVOSH, MD

Provider ID: N/A

5395 RUFFIN RD
SAN DIEGO, CA 92123

Effective as of 01-MAY-24

VAKILIAN, SIAVOSH, MD†

Provider ID: N/A

5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123

Teleservice

Effective as of 01-MAY-21

VAKILIAN, SIAVOSH, MD†

Provider ID: N/A

3366 5TH AVE
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-SEP-22

VAKILIAN, SIAVOSH, MD†

Provider ID: N/A

3366 5TH AVE
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-MAY-21

VAKILIAN, SIAVOSH, MD†

Provider ID: N/A

3366 5TH AVE
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-MAY-24

VAKILIAN, SIAVOSH, MD†

Provider ID: N/A

3366 5TH AVE
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-JUL-21

VAKILIAN, SIAVOSH, MD†

Provider ID: N/A

5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123

Teleservice

Effective as of 01-JUL-21

VAKILIAN, SIAVOSH, MD†

Provider ID: N/A

5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123

Teleservice

Effective as of 01-SEP-22

VOLPP, PAUL, MD†

Provider ID: N/A

3075 HEALTH CENTER DR
SAN DIEGO, CA 92123

Effective as of 01-JAN-21

WHITE, EVAN, MD†

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127

Teleservice

Effective as of 01-NOV-22

YORK, JOHN, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-DEC-23

YORK, JOHN, MD

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103

Effective as of 01-DEC-23

RADIOLOGY DIAGNOSTIC

AGANOVIC, LEJLA, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Effective as of 01-APR-23

AGANOVIC, LEJLA, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103

Effective as of 01-APR-23

AGANOVIC, LEJLA, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

ANDERSON, GREGORY, MD

Provider ID: N/A

150 W WASHINGTON ST
SAN DIEGO, CA 92103

Effective as of 01-MAY-24

ANDERSON, GREGORY, MD†

Provider ID: N/A

3939 RUFFIN RD STE 102
SAN DIEGO, CA 92123

Effective as of 01-AUG-22

CI. Lista de proveedores de la red Médico de atención especializada

ANDERSON, GREGORY, MD†

Provider ID: N/A

📍 3939 RUFFIN RD STE 102
SAN DIEGO, CA 92123
Effective as of 01-AUG-23

ANDERSON, GREGORY, MD

Provider ID: N/A

📍 9095 RIO SAN DIEGO DR
STE 150
SAN DIEGO, CA 92108
Effective as of 01-OCT-23

BOLAR, DIVYA, MD

Provider ID: N/A

📍 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

BOLAR, DIVYA, MD

Provider ID: N/A

📍 408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

BOLAR, DIVYA, MD

Provider ID: N/A

📍 8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

BOSWELL, GILBERT, MD

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-APR-23

BOSWELL, GILBERT, MD

Provider ID: N/A

📍 330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

BRANCH, CODY, MD†

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-21

BRANCH, CODY, MD

Provider ID: N/A

📍 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

BROUHA, SHARON, MD

Provider ID: N/A

📍 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

BROUHA, SHARON, MD

Provider ID: N/A

📍 8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

BROUHA, SHARON, MD

Provider ID: N/A

📍 408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

BUI, KEVIN, MD

Provider ID: N/A

📍 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

BUI, KEVIN, MD†

Provider ID: N/A

📍 330 LEWIS ST STE 202
SAN DIEGO, CA 92103
Effective as of 01-JUL-21

BUI, KEVIN, MD†

Provider ID: N/A

📍 200 W ARBOR DR

SAN DIEGO, CA 92103
Effective as of 01-JUL-21

CARSWELL, AIMEE, MD

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

CARSWELL, AIMEE, MD

Provider ID: N/A

📍 330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

CARSWELL, AIMEE, MD

Provider ID: N/A

📍 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

CHANG, JENNIFER, MD

Provider ID: N/A

📍 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

CHANG, JENNIFER, MD

Provider ID: N/A

📍 408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

CHANG, JENNIFER, MD

Provider ID: N/A

📍 8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

CHEN, KAREN, MD

Provider ID: N/A

📍 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

C1. Lista de proveedores de la red Médico de atención especializada

CHEN, CHRISTINE, MD

Provider ID: N/A

📄 150 W WASHINGTON ST
SAN DIEGO, CA 92103
Effective as of 01-JUL-24

CHENG, KAREN, MD

Provider ID: N/A

📄 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

CHENG, KAREN, MD†

Provider ID: N/A

📄 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-21

CHENG, KAREN, MD†

Provider ID: N/A

📄 330 LEWIS ST STE 202
SAN DIEGO, CA 92103
Effective as of 01-AUG-21

CHENG, KAREN, MD

Provider ID: N/A

📄 8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

CHENG, KAREN, MD

Provider ID: N/A

📄 408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

CHO, AARON, MD

Provider ID: N/A

📄 408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

CHO, AARON, MD

Provider ID: N/A

📄 8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

CHO, AARON, MD

Provider ID: N/A

📄 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

CHUNG, CHRISTINE, MD

Provider ID: N/A

📄 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

CHUNG, CHRISTINE, MD

Provider ID: N/A

📄 8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

CHUNG, CHRISTINE, MD

Provider ID: N/A

📄 408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

COOPER, JAMES, MD

Provider ID: N/A

📄 150 W WASHINGTON ST
SAN DIEGO, CA 92103
Effective as of 01-MAY-24

COOPER, JAMES, MD†

Provider ID: N/A

📄 3939 RUFFIN RD STE 102
SAN DIEGO, CA 92123
Effective as of 01-MAY-22

DORROS, STEPHEN, MD

Provider ID: N/A

📄 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

DORROS, STEPHEN, MD

Provider ID: N/A

📄 408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

DORROS, STEPHEN, MD

Provider ID: N/A

📄 8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

EAJAZI, ALIREZA, MD†

Provider ID: N/A

📄 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-21

EAJAZI, ALIREZA, MD†

Provider ID: N/A

📄 330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-AUG-21

EGHTEDARI, MOHAMMAD, MD

Provider ID: N/A

📄 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

EGHTEDARI, MOHAMMAD, MD

Provider ID: N/A

📄 8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

EGHTEDARI, MOHAMMAD, MD

Provider ID: N/A

📄 408 DICKINSON ST

C1. Lista de proveedores de la red Médico de atención especializada

SAN DIEGO, CA 92103
Effective as of 01-APR-23

FARID, NIKDOKHT, MD

Provider ID: N/A
408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

FARID, NIKDOKHT, MD

Provider ID: N/A
8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

FARID, NIKDOKHT, MD

Provider ID: N/A
6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

FAZELI, SOUDABEH, MD

Provider ID: N/A
6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

FAZELI, SOUDABEH, MD

Provider ID: N/A
330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

FAZELI, SOUDABEH, MD

Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

FEDERHART, JAY, MD

Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-24

FEDERHART, JAY, MD

Provider ID: N/A
330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-AUG-24

FEDERHART, JAY, MD

Provider ID: N/A
6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-AUG-24

FLISZAR, EVELYNE, MD

Provider ID: N/A
6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

FLISZAR, EVELYNE, MD

Provider ID: N/A
8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

FLISZAR, EVELYNE, MD

Provider ID: N/A
408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

FOWLER, KATHRYN, MD

Provider ID: N/A
408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

FOWLER, KATHRYN, MD

Provider ID: N/A
8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

GENTILI, AMILCARE, MD

Provider ID: N/A
8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

GENTILI, AMILCARE, MD

Provider ID: N/A
408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

GENTILI, AMILCARE, MD

Provider ID: N/A
6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

HAHN, LEWIS, MD

Provider ID: N/A
6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

HAHN, LEWIS, MD

Provider ID: N/A
408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

HAHN, MICHAEL, MD

Provider ID: N/A
408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

HAHN, LEWIS, MD

Provider ID: N/A
8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

HAHN, MICHAEL, MD

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

HANDWERKER, JASON, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

HANDWERKER, JASON, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

HANDWERKER, JASON, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

HAWLEY, DANIEL, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

HAWLEY, DANIEL, MD

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

HAWLEY, DANIEL, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

HOROWITZ, MICHAEL, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

HOROWITZ, MICHAEL, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

HOROWITZ, MICHAEL, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

HSIAO, ALBERT, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

HSIAO, ALBERT, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

HSIAO, ALBERT, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

HUANG, BRADY, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

HUANG, BRADY, MD

Provider ID: N/A

408 DICKINSON ST

SAN DIEGO, CA 92103
Effective as of 01-APR-23

HUANG, BRADY, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

HUGHES, TUDOR, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

JACOBS, KATHLEEN, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

JACOBS, KATHLEEN, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

JACOBS, KATHLEEN, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

JACOBSON, JON, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

JACOBSON, JON, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-JUN-23

JACOBSON, JON, MD

Provider ID: N/A

📄 330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

JAFFRAY, PAUL, MD

Provider ID: N/A

📄 330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

JAFFRAY, PAUL, MD

Provider ID: N/A

📄 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

JAFFRAY, PAUL, MD

Provider ID: N/A

📄 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

KANSAGRA, AKASH, MD

Provider ID: N/A

📄 11199 SORRENTO VALLEY
RD STE 203
SAN DIEGO, CA 92121
Effective as of 01-JUN-23

KAROW, DAVID, MD

Provider ID: N/A

📄 408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

KAROW, DAVID, MD

Provider ID: N/A

📄 8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

KAROW, DAVID, MD

Provider ID: N/A

📄 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

KAROW, DAVID, MD†

Provider ID: N/A

📄 330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

KAROW, DAVID, MD†

Provider ID: N/A

📄 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-APR-23

KARUNAMUNI, JENNIFER, MD

Provider ID: N/A

📄 330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

KARUNAMUNI, JENNIFER, MD

Provider ID: N/A

📄 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-APR-23

KHURANA, AMAN, MD

Provider ID: N/A

📄 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-AUG-24

KIM, ERIC, MD

Provider ID: N/A

📄 150 W WASHINGTON ST
SAN DIEGO, CA 92103
Effective as of 01-JUL-24

KIM, ERIC, MD†

Provider ID: N/A

📄 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-21

KIM, ERIC, MD†

Provider ID: N/A

📄 330 LEWIS ST STE 202
SAN DIEGO, CA 92103
Effective as of 01-AUG-21

KLIGERMAN, SETH, MD

Provider ID: N/A

📄 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

KLIGERMAN, SETH, MD

Provider ID: N/A

📄 8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

KLIGERMAN, SETH, MD

Provider ID: N/A

📄 408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

KONDILI, DHIMITER, MD†

Provider ID: N/A

📄 330 LEWIS ST STE 202
SAN DIEGO, CA 92103
Effective as of 01-AUG-21

KONDILI, DHIMITER, MD†

Provider ID: N/A

📄 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-21

LAKE, MENORE, MD

Provider ID: N/A

📄 330 LEWIS ST
SAN DIEGO, CA 92103

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-JUN-23

LAKE, MENORE, MD

Provider ID: N/A

📄 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

LEE, ROLAND, MD

Provider ID: N/A

📄 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

LEE, ROLAND, MD

Provider ID: N/A

📄 408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

LEE, ROLAND, MD

Provider ID: N/A

📄 8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

LIM, VIVIAN, MD

Provider ID: N/A

📄 8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

LIM, VIVIAN, MD

Provider ID: N/A

📄 408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

LIM, VIVIAN, MD

Provider ID: N/A

📄 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

MAREK BYKOWSKI, JULIE, MD

Provider ID: N/A

📄 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

MAREK BYKOWSKI, JULIE, MD

Provider ID: N/A

📄 408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

MAREK BYKOWSKI, JULIE, MD

Provider ID: N/A

📄 8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

MARKS, ROBERT, MD

Provider ID: N/A

📄 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

MARKS, ROBERT, MD

Provider ID: N/A

📄 330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

MCDONALD, MARIN, MD†

Provider ID: N/A

📄 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-FEB-22

MCDONALD, MARIN, MD

Provider ID: N/A

📄 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

MCDONALD, MARIN, MD†

Provider ID: N/A

📄 330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-FEB-22

MCDONALD, MARIN, MD

Provider ID: N/A

📄 8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

MCDONALD, MARIN, MD

Provider ID: N/A

📄 408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

MCNAMEE, CAIRINE, MD

Provider ID: N/A

📄 408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

MCNAMEE, CAIRINE, MD

Provider ID: N/A

📄 8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

MCNAMEE, CAIRINE, MD†

Provider ID: N/A

📄 330 LEWIS ST STE 202
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

MCNAMEE, CAIRINE, MD


Provider ID: N/A

📄 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

MCNAMEE, CAIRINE, MD†


Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-NOV-21


MURPHY, PAUL, MD

Provider ID: N/A

 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24


MURPHY, PAUL, MD

Provider ID: N/A

 8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23


MURPHY, PAUL, MD

Provider ID: N/A

 408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23


NORBASH, ALEXANDER, MD

Provider ID: N/A

 408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23


NORBASH, ALEXANDER, MD

Provider ID: N/A

 8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

NORBASH, ALEXANDER, MD

Provider ID: N/A

 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

OBOYLE, MARY, MD


Provider ID: N/A

 6655 ALVARADO RD

SAN DIEGO, CA 92120
Effective as of 01-FEB-24


OBOYLE, MARY, MD†

Provider ID: N/A

 330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-FEB-22


OBOYLE, MARY, MD†

Provider ID: N/A

 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-FEB-22


OBOYLE, MARY, MD

Provider ID: N/A

 8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23


OBOYLE, MARY, MD

Provider ID: N/A

 408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23


OBOYLE, MARY, MD†

Provider ID: N/A

 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-FEB-22

OJEDA-FOURNIER, HAYDEE, MD

Provider ID: N/A

 408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

OJEDA-FOURNIER, HAYDEE, MD

Provider ID: N/A


 8929 UNIVERSITY CENTER

LN

SAN DIEGO, CA 92122
Effective as of 01-APR-23


OJEDA-FOURNIER, HAYDEE, MD

Provider ID: N/A

 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24


PATHRIA, MINI, MD

Provider ID: N/A

 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24


PATHRIA, MINI, MD

Provider ID: N/A

 8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23


PATHRIA, MINI, MD

Provider ID: N/A

 408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23


RAKOW-PENNER, REBECCA, MD

Provider ID: N/A

 408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

RAKOW-PENNER, REBECCA, MD

Provider ID: N/A

 8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

**C1. Lista de proveedores de la red
Médico de atención especializada**

**RAKOW-PENNER, REBECCA,
MD**

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

RATTNER, ZACHARY, MD†

Provider ID: N/A

995 GATEWAY CENTER
WAY STE 207
SAN DIEGO, CA 92102
Effective as of 01-SEP-22

RATTNER, ZACHARY, MD†

Provider ID: N/A

995 GATEWAY CENTER
WAY STE 207
SAN DIEGO, CA 92102
Effective as of 01-SEP-20

RATTNER, ZACHARY, MD†

Provider ID: N/A

995 GATEWAY CENTER
WAY STE 207
SAN DIEGO, CA 92102
Effective as of 01-JAN-21

RATTNER, ZACHARY, MD†

Provider ID: N/A

995 GATEWAY CENTER
WAY STE 207
SAN DIEGO, CA 92102
Effective as of 01-JUL-23

RATTNER, ZACHARY, MD†

Provider ID: N/A

995 GATEWAY CENTER
WAY STE 207
SAN DIEGO, CA 92102
Effective as of 01-AUG-21

RESNICK, DONALD, MD

Provider ID: N/A

6655 ALVARADO RD

SAN DIEGO, CA 92120
Effective as of 01-FEB-24

RESNICK, DONALD, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

RESNICK, DONALD, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

RITCHIE, DAVID, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

ROTHENBERG, EDWARD, MD

Provider ID: N/A

150 W WASHINGTON ST
SAN DIEGO, CA 92103
Effective as of 01-JUL-24

SABIR, SHARJEEL, MD

Provider ID: N/A

150 W WASHINGTON ST
SAN DIEGO, CA 92103
Effective as of 01-JUL-24

SADAT, SAYED, DO

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

SADAT, SAYED, DO

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

SADAT, SAYED, DO

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

SAMPATH, SRIHARI, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

SAMPATH, SRINATH, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

SAMPATH, SRIHARI, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

SAMPATH, SRINATH, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

SANTILLAN, CYNTHIA, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

SANTILLAN, CYNTHIA, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

C1. Lista de proveedores de la red Médico de atención especializada

SEARLEMAN, ADAM, MD

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

SEARLEMAN, ADAM, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

SLATER, JERRY, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-21

SLATER, JERRY, MD†

Provider ID: N/A

330 LEWIS ST STE 202
SAN DIEGO, CA 92103
Effective as of 01-AUG-21

SMITAMAN, EDWARD, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

SMITAMAN, EDWARD, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

SMITAMAN, EDWARD, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

SPENGLER, NATHAN, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

SPENGLER, NATHAN, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

SPENGLER, NATHAN, MD

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

STEPENOSKY, JAMES, DO

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-AUG-24

STEPENOSKY, JAMES, DO

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-24

STRAKA, CHRISTOPHER, MD†

Provider ID: N/A

16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Teleservice
Effective as of 01-FEB-21

SWEET, JASON, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-MAR-24

TAMAYO-MURILLO, DORATHY, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

TAMAYO-MURILLO, DORATHY, MD

Provider ID: N/A

8929 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

TAMAYO-MURILLO, DORATHY, MD

Provider ID: N/A

408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

TRINH, BRIAN, MD

Provider ID: N/A

150 W WASHINGTON ST
SAN DIEGO, CA 92103
Effective as of 01-JUL-24

UNSDORFER, KYLE, MD

Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

UNSDORFER, KYLE, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

VAHDAT, NOUSHIN, MD


Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

VAHDAT, NOUSHIN, MD


Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

 330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

VAKILIAN, SIAVOSH, MD†

Provider ID: N/A

 3366 5TH AVE
SAN DIEGO, CA 92103
Teleservice

Effective as of 01-SEP-22

VAKILIAN, SIAVOSH, MD†

Provider ID: N/A

 5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123

Teleservice

Effective as of 01-SEP-22

WONG, FELIX, MD†

Provider ID: N/A

 3939 RUFFIN RD
SAN DIEGO, CA 92123

Effective as of 01-MAY-22

WONG, FELIX, MD

Provider ID: N/A

 9095 RIO SAN DIEGO DR
STE 150

SAN DIEGO, CA 92108

Effective as of 01-OCT-23

WONG, FELIX, MD†

Provider ID: N/A

 3939 RUFFIN RD
SAN DIEGO, CA 92123

Effective as of 01-AUG-23

YORK, VINCENT, MD†


Provider ID: N/A

 330 LEWIS ST STE 202
SAN DIEGO, CA 92103

Effective as of 01-AUG-21


YORK, VINCENT, MD†

Provider ID: N/A

 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-21

YORK, JOHN, MD

Provider ID: N/A

 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

ZAPALA, MATTHEW, MD

Provider ID: N/A

 330 LEWIS ST
SAN DIEGO, CA 92103

Effective as of 01-JUL-24

ZAPALA, MATTHEW, MD

Provider ID: N/A

 200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JUL-24

ZAPALA, MATTHEW, MD

Provider ID: N/A

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Effective as of 01-JUL-24

ZINK-BRODY, GORDON, MD

Provider ID: N/A


 9095 RIO SAN DIEGO DR
STE 150

SAN DIEGO, CA 92108

Effective as of 01-OCT-23

ZINK-BRODY, GORDON, MD†

Provider ID: N/A

 3939 RUFFIN RD STE 102
SAN DIEGO, CA 92123

Effective as of 01-DEC-21

ZINK-BRODY, GORDON, MD†

Provider ID: N/A

 3939 RUFFIN RD STE 102
SAN DIEGO, CA 92123

Effective as of 01-OCT-23

**REGISTERED DIETITIAN /
NUTRITIONIST**

ATKINS, JOYCE, RD

Provider ID: N/A

 3900 5TH AVE STE 110
SAN DIEGO, CA 92103*

Effective as of 01-OCT-24

BRECKON, SAMANTHA, RD

Provider ID: N/A

 3900 5TH AVE STE 110
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-APR-24

BUNDY, KATHLEEN, RD


Provider ID: N/A

 330 LEWIS ST
SAN DIEGO, CA 92103

Effective as of 01-JAN-24

CALLAWAY, MALLORY, RD

Provider ID: N/A


 4303 LA JOLLA VILLAGE
DR STE 2110

SAN DIEGO, CA 92122

Effective as of 01-MAR-22

DRIVICK, VALERIE, RD

Provider ID: N/A


 3900 5TH AVE STE 110
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-APR-21

DRIVICK, VALERIE, RD

Provider ID: N/A

 3900 5TH AVE STE 110
SAN DIEGO, CA 92103

Teleservice

Effective as of 01-SEP-22

C1. Lista de proveedores de la red Médico de atención especializada

FISHER, JENNIFER, RD

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-21

FISHER, JENNIFER, RD

Provider ID: N/A

📍 4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122
Effective as of 01-DEC-21

FISHER, JENNIFER, RD

Provider ID: N/A

📍 4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-JAN-24

GONZALEZ, KRISTEN, RDN

Provider ID: N/A

📍 4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

RUBENSTEIN, KELLY, RD

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

RUBENSTEIN, KELLY, RD

Provider ID: N/A

📍 4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122
Effective as of 01-JAN-24

SALCEDO, CARLA, RD

Provider ID: N/A

📍 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-JAN-24

SALCEDO, CARLA, RD

Provider ID: N/A

📍 4910 DIRECTORS PL
SAN DIEGO, CA 92121
Effective as of 01-JAN-24

SALCEDO, ALEXANDRA, RD

Provider ID: N/A

📍 4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

VALDEZ, KELLY, RD

Provider ID: N/A

📍 4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122
Effective as of 01-SEP-24

VERGARA RODRIGUEZ, DIANA, RD

Provider ID: N/A

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

REGISTERED PHYSICAL THERAPIST

ALLOS, ALEXANDER, PT

Provider ID: N/A

📍 4445 EASTGATE MALL STE
105
SAN DIEGO, CA 92121
Effective as of 01-NOV-23

BOUTELLE, DAVID, PT

Provider ID: N/A

📍 9909 MIRA MESA BLVD
STE 120
SAN DIEGO, CA 92131
Effective as of 01-JAN-24

BOUTELLE, BARBARA, PT

Provider ID: N/A

📍 9909 MIRA MESA BLVD
STE 120
SAN DIEGO, CA 92131
Effective as of 01-JAN-24

BOUTELLE, DAVID, PT

Provider ID: N/A

📍 9888 CARMEL MOUNTAIN
RD STE D
SAN DIEGO, CA 92129
Effective as of 01-JAN-24

BOUTELLE, BARBARA, PT

Provider ID: N/A

📍 9888 CARMEL MOUNTAIN
RD STE D
SAN DIEGO, CA 92129
Effective as of 01-JAN-24

CORTEZ, AARON, PT†

Provider ID: N/A

📍 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-JUN-21

DANG, KAYLEE, PT†

Provider ID: N/A

📍 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-21

FARRAR, COURTNEY, PT†

Provider ID: N/A

📍 7525 METROPOLITAN DR
STE 302
SAN DIEGO, CA 92108
Teleservice
Effective as of 01-JAN-21

FARRAR, COURTNEY, PT†

Provider ID: N/A

📍 3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110
Effective as of 01-AUG-24

**C1. Lista de proveedores de la red
Médico de atención especializada**

FARRAR, COURTNEY, PT†

Provider ID: N/A

3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110

Effective as of 01-DEC-22

FARRAR, COURTNEY, PT†

Provider ID: N/A

7525 METROPOLITAN DR
STE 302
SAN DIEGO, CA 92108

Teleservice

Effective as of 01-AUG-24

FERRER, MIRON, PT

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JAN-24

FUREY, CINDY, PT

Provider ID: N/A

5555 RESERVOIR DR STE
300
SAN DIEGO, CA 92120

Effective as of 01-JAN-21

FUREY, CINDY, PT

Provider ID: N/A

5677 OBERLIN DR STE 106
SAN DIEGO, CA 92121

Effective as of 01-JAN-21

GRIMES, KELLY, PT

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-JUN-23

JOHNSON, KENNADY, PT

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-MAR-24

LEVIE, ADAM, PT

Provider ID: N/A

5643 COPLEY DR STE 230
SAN DIEGO, CA 92111

Teleservice

Effective as of 01-AUG-24

MONROE, MAX, PT

Provider ID: N/A

11750 SORRENTO VALLEY
RD STE 130
SAN DIEGO, CA 92121

Effective as of 01-JAN-24

OKINAGA, PATRICK, PT

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JAN-24

OKINAGA, PATRICK, PT

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-JAN-24

PAPA, AMY, PT

Provider ID: N/A

4445 EASTGATE MALL STE
103
SAN DIEGO, CA 92121

Effective as of 01-AUG-23

PAPA, AMY, PT

Provider ID: N/A

4445 EASTGATE MALL STE
103
SAN DIEGO, CA 92121

Effective as of 01-NOV-21

PERRONE, AIMEE, PT

Provider ID: N/A

4445 EASTGATE MALL STE
103
SAN DIEGO, CA 92121

Effective as of 01-NOV-21

PHILLIP, OMARI, PT†

Provider ID: N/A

4445 EASTGATE MALL STE
103
SAN DIEGO, CA 92121

Effective as of 01-DEC-21

ROSS, JENNY, PT

Provider ID: N/A

7525 METROPOLITAN DR
SAN DIEGO, CA 92108

Effective as of 01-JAN-23

TITH, JENNY, PT

Provider ID: N/A

4445 EASTGATE MALL STE
103
SAN DIEGO, CA 92121

Effective as of 01-MAY-22

TSAI, CINDY, PT

Provider ID: N/A

3750 CONVOY ST STE 201B
SAN DIEGO, CA 92111

Effective as of 01-AUG-23

TSAI, CINDY, PT

Provider ID: N/A

3750 CONVOY ST STE 201B
SAN DIEGO, CA 92111

Effective as of 01-JUN-23

VANDEWIELE, EMILY, PT†

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-OCT-21

VASQUEZ, BENJAMIN, PT

Provider ID: N/A

4910 DIRECTORS PL
SAN DIEGO, CA 92121

Effective as of 01-DEC-23

C1. Lista de proveedores de la red Médico de atención especializada

RHEUMATOLOGY

ASFAR, RAFID, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 400
SAN DIEGO, CA 92123
Effective as of 01-AUG-24

CHITKARA, PUJA, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 400
SAN DIEGO, CA 92123
Effective as of 01-AUG-24

CHITKARA, PUJA, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 400
SAN DIEGO, CA 92123
Effective as of 01-JUN-24

HUYNH, DOQUYEN, MD

Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-APR-23

HUYNH, DOQUYEN, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-APR-23

KHANNA, SURABHI, MD

Provider ID: N/A

4282 GENESEE AVE STE
202
SAN DIEGO, CA 92117
Effective as of 01-JUL-24

KHANNA, SURABHI, MD

Provider ID: N/A

4282 GENESEE AVE STE
202
SAN DIEGO, CA 92117
Effective as of 01-NOV-23

PATEL, PUJA, DO

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-MAY-24

PATEL, PUJA, DO

Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-MAY-24

PATEL, PUJA, DO

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-24

PRESS, RAYMOND, MD†

Provider ID: N/A

3965 5TH AVE STE 430
SAN DIEGO, CA 92103
Effective as of 01-OCT-19

SLEEP MEDICINE

BAO, GANG, MD†

Provider ID: N/A

6699 ALVARADO RD STE
2306
SAN DIEGO, CA 92120
Teleservice
Effective as of 01-JUN-21

DOMBROWSKY, JOSEPH, MD

Provider ID: N/A

5471 KEARNY VILLA RD STE
202
SAN DIEGO, CA 92123
Effective as of 01-APR-24

FINCH, CHRISTINA, MD

Provider ID: N/A

4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

FINCH, CHRISTINA, MD

Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-JUN-23

FLEMING, WESLEY, MD†

Provider ID: N/A

5471 KEARNY VILLA RD STE
202
SAN DIEGO, CA 92123
Teleservice
Effective as of 01-APR-22

PATEL, NIMIT, MD

Provider ID: N/A

5471 KEARNY VILLA RD STE
200
SAN DIEGO, CA 92123
Teleservice
Effective as of 01-JUN-24

SPEECH PATHOLOGIST

AROCHO-SALGADO, MIRELIS, SP

Provider ID: N/A

11440 W BERNARDO CT
STE 300
SAN DIEGO, CA 92127
Effective as of 01-JUN-22

AROCHO-SALGADO, MIRELIS, SP

Provider ID: N/A

11440 W BERNARDO CT
STE 300
SAN DIEGO, CA 92127

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-JUN-22

**AROCHO-SALGADO, MIRELIS,
SP**

Provider ID: N/A

📄 9655 GRANITE RIDGE DR
STE 200
SAN DIEGO, CA 92123

Effective as of 01-JUN-22

**AROCHO-SALGADO, MIRELIS,
SP**

Provider ID: N/A

📄 9655 GRANITE RIDGE DR
STE 200
SAN DIEGO, CA 92123

Effective as of 01-JUN-22

BLUMENFELD, LIZA, SP

Provider ID: N/A

📄 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Effective as of 01-MAY-23

**CALDERON MORALES,
ASTRID, SP**

Provider ID: N/A

📄 7510 CLAIREMONT MESA
BLVD STE 103
SAN DIEGO, CA 92111

Effective as of 01-APR-24

**CALDERON MORALES,
ASTRID, SP**

Provider ID: N/A

📄 9655 GRANITE RIDGE DR
STE 200
SAN DIEGO, CA 92123

Effective as of 01-APR-24

**CALDERON MORALES,
ASTRID, SP**

Provider ID: N/A

📄 11440 W BERNARDO CT
STE 300
SAN DIEGO, CA 92127

Effective as of 01-APR-24

CLARK, MELISSA, SP

Provider ID: N/A

📄 11440 W BERNARDO CT
STE 300
SAN DIEGO, CA 92127

Effective as of 01-APR-22

CLARK, MELISSA, SP

Provider ID: N/A

📄 11440 W BERNARDO CT
STE 300
SAN DIEGO, CA 92127

Effective as of 01-APR-22

CLARK, MELISSA, SP

Provider ID: N/A

📄 9655 GRANITE RIDGE DR
STE 200
SAN DIEGO, CA 92123

Effective as of 01-APR-22

CLARK, MELISSA, SP

Provider ID: N/A

📄 9655 GRANITE RIDGE DR
STE 200
SAN DIEGO, CA 92123

Effective as of 01-APR-22

CLARK, MELISSA, SP

Provider ID: N/A

📄 7510 CLAIREMONT MESA
BLVD STE 102
SAN DIEGO, CA 92111

Effective as of 01-APR-22

CLARK, MELISSA, SP

Provider ID: N/A

📄 7510 CLAIREMONT MESA
BLVD STE 102
SAN DIEGO, CA 92111

Effective as of 01-APR-22

DOCKTER, ANDI, SP†

Provider ID: N/A

📄 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Effective as of 01-MAY-23

DURNAN, CASSANDRA, SP

Provider ID: N/A

📄 8929 AERO DR STE E
SAN DIEGO, CA 92123

Effective as of 01-JUL-24

DURNAN, CASSANDRA, SP

Provider ID: N/A

📄 9655 GRANITE RIDGE DR
STE 200
SAN DIEGO, CA 92123

Effective as of 01-JUL-24

DURNAN, CASSANDRA, SP

Provider ID: N/A

📄 11440 W BERNARDO CT
STE 300
SAN DIEGO, CA 92127

Effective as of 01-JUL-24

KOUKEYAN, KARIN, SP

Provider ID: N/A

📄 11440 W BERNARDO CT
STE 300
SAN DIEGO, CA 92127

Effective as of 01-JAN-23

KOUKEYAN, KARIN, SP

Provider ID: N/A

📄 9655 GRANITE RIDGE DR
STE 200
SAN DIEGO, CA 92123

Effective as of 01-JAN-23

KOUKEYAN, KARIN, SP

Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

7510 CLAIREMONT MESA
BLVD STE 103
SAN DIEGO, CA 92111

Teleservice

Effective as of 01-JAN-23

NAPOLEAN, REBECCA, SP

Provider ID: N/A

7510 CLAIREMONT MESA
BLVD STE 103
SAN DIEGO, CA 92111

Effective as of 01-JUN-22

NAPOLEAN, REBECCA, SP

Provider ID: N/A

7510 CLAIREMONT MESA
BLVD STE 103
SAN DIEGO, CA 92111

Effective as of 01-JUN-22

SCHIEDERMAYER, BENJAMIN, SP†

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Effective as of 01-APR-22

THOMPSON, DANIELLE, SP

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-JAN-24

THOMPSON, DANIELLE, SP

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JAN-24

WALSH, ERIN, SP

Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Effective as of 01-MAY-23

SURGERY COLON SURGERY

EISENSTEIN, SAMUEL, MD†

Provider ID: N/A

4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122

Effective as of 01-DEC-21

EISENSTEIN, SAMUEL, MD†

Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121

Effective as of 01-DEC-21

EISENSTEIN, SAMUEL, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-DEC-21

ISHO, MATHEW, MD†

Provider ID: N/A

4060 4TH AVE STE 510
SAN DIEGO, CA 92103

Effective as of 01-JAN-21

ISHO, MATHEW, MD†

Provider ID: N/A

4060 4TH AVE STE 510
SAN DIEGO, CA 92103

Effective as of 01-NOV-11

ISHO, MATHEW, MD†

Provider ID: N/A

4060 4TH AVE STE 510
SAN DIEGO, CA 92103

Effective as of 01-SEP-15

LOPEZ, NICOLE, MD†

Provider ID: N/A

200 W ARBOR DR

SAN DIEGO, CA 92103

Effective as of 01-DEC-21

LOPEZ, NICOLE, MD†

Provider ID: N/A

4303 LA JOLLA VILLAGE
DR STE 2110

SAN DIEGO, CA 92122

Effective as of 01-DEC-21

PARRY, LISA, MD†

Provider ID: N/A

4303 LA JOLLA VILLAGE
DR STE 2110

SAN DIEGO, CA 92122

Effective as of 01-DEC-21

PARRY, LISA, MD†

Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-APR-21

RAMAMOORTHY, SONIA, MD†

Provider ID: N/A

4303 LA JOLLA VILLAGE
DR STE 2110

SAN DIEGO, CA 92122

Effective as of 01-DEC-21

TOMAN, JEFFREY, MD†

Provider ID: N/A

4060 4TH AVE STE 510
SAN DIEGO, CA 92103

Effective as of 01-SEP-15

SURGERY CRITICAL CARE

ADAMS, LAURA, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-SEP-21

OLSON, ERIK, MD†

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

VENTRO, GEORGE, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

SURGERY GENERAL

ARMANI, AVA, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-21

BARNES, RYAN, DO†

Provider ID: N/A

7910 FROST ST STE 250
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

BATRA, MUNISH, MD

Provider ID: N/A

12264 EL CAMINO REAL
STE 101
SAN DIEGO, CA 92130
Effective as of 01-SEP-17

BATRA, MUNISH, MD

Provider ID: N/A

12264 EL CAMINO REAL
STE 101
SAN DIEGO, CA 92130
Effective as of 01-SEP-17

BATRA, MUNISH, MD

Provider ID: N/A

12264 EL CAMINO REAL
STE 101
SAN DIEGO, CA 92130
Effective as of 01-SEP-17

BATRA, MUNISH, MD

Provider ID: N/A

12264 EL CAMINO REAL
STE 101
SAN DIEGO, CA 92130
Effective as of 01-SEP-17

BENCH, SHAWN, MD†

Provider ID: N/A

7910 FROST ST STE 250
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

BRODERICK, RYAN, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-21

BRODERICK, RYAN, MD†

Provider ID: N/A

4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122
Effective as of 01-DEC-21

CASILLAS BERUMEN, SERGIO, MD

Provider ID: N/A

6402 EL CAJON BLVD STE
100
SAN DIEGO, CA 92115
Effective as of 01-FEB-24

CASILLAS BERUMEN, SERGIO, MD

Provider ID: N/A

6719 ALVARADO RD STE
303
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

DIEFFENBACH, BRYAN, MD

Provider ID: N/A

550 WASHINGTON ST STE
641
SAN DIEGO, CA 92103
Effective as of 01-MAY-24

ELLNER, JULIE, MD

Provider ID: N/A

2878 CAMINO DEL RIO S
STE 303
SAN DIEGO, CA 92108
Effective as of 01-OCT-21

FARINAS, LEAH, MD†

Provider ID: N/A

6699 ALVARADO RD STE
2309
SAN DIEGO, CA 92120
Effective as of 01-OCT-20

GIURGIU, DAN, MD†

Provider ID: N/A

4060 4TH AVE STE 440
SAN DIEGO, CA 92103
Effective as of 01-FEB-07

HALLDORSON, JEFFREY, MD†

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-DEC-17

HALLDORSON, JEFFREY, MD†

Provider ID: N/A

8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-FEB-18

HALLDORSON, JEFFREY, MD

Provider ID: N/A

8010 FROST ST STE 100
SAN DIEGO, CA 92123
Effective as of 01-JUN-24

HART, MARQUIS, MD

Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

 8010 FROST ST STE 100
SAN DIEGO, CA 92123
Effective as of 01-JUN-24

HART, MARQUIS, MD†

Provider ID: N/A

 8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-JUL-21


HART, MARQUIS, MD†

Provider ID: N/A

 8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-JAN-21


HORGAN, SANTIAGO, MD

Provider ID: N/A

 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-21


HORGAN, SANTIAGO, MD

Provider ID: N/A

 4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122
Effective as of 01-DEC-21


JACOBSEN, GARTH, MD†

Provider ID: N/A

 4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122
Effective as of 01-DEC-21

JACOBSEN, GARTH, MD†

Provider ID: N/A

 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-21

JACOBSEN, GARTH, MD†


Provider ID: N/A

 4520 EXECUTIVE DR STE 111

SAN DIEGO, CA 92121
Effective as of 01-DEC-21


KING, JUSTIN, MD†

Provider ID: N/A

 6699 ALVARADO RD STE
2309
SAN DIEGO, CA 92120
Effective as of 01-JAN-21


LANGENBERG, BRET, DO†

Provider ID: N/A

 4033 3RD AVE STE 204
SAN DIEGO, CA 92103
Effective as of 01-JAN-19


MOLDOVAN, STEFAN, MD†

Provider ID: N/A

 6719 ALVARADO RD STE
303
SAN DIEGO, CA 92120
Teleservice
Effective as of 01-AUG-24


MOLDOVAN, STEFAN, MD†

Provider ID: N/A

 6719 ALVARADO RD STE
303
SAN DIEGO, CA 92120
Teleservice
Effective as of 01-MAR-24

MOLDOVAN, STEFAN, MD†

Provider ID: N/A

 6719 ALVARADO RD STE
303
SAN DIEGO, CA 92120
Teleservice
Effective as of 01-MAR-24

MUELLER, GEORGE, MD†

Provider ID: N/A

 7910 FROST ST STE 250
SAN DIEGO, CA 92123
Effective as of 01-JAN-21


POLLACK, LARRY, MD†

Provider ID: N/A

 7910 FROST ST STE 250
SAN DIEGO, CA 92123*
Effective as of 01-JAN-21


PRICE, ERIN, MD†

Provider ID: N/A

 4060 4TH AVE STE 440
SAN DIEGO, CA 92103
Effective as of 01-SEP-20


SANDLER, BRYAN, MD†

Provider ID: N/A

 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-21


SANDLER, BRYAN, MD†

Provider ID: N/A

 4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122
Effective as of 01-DEC-21


SISE, MICHAEL, MD†

Provider ID: N/A

 550 WASHINGTON ST STE
641
SAN DIEGO, CA 92103
Effective as of 01-JAN-23


WOODWARD, STEPHANIE, MD†

Provider ID: N/A

 7910 FROST ST STE 250
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

ZORN, GEORGE, MD†

Provider ID: N/A

 4060 4TH AVE STE 330
SAN DIEGO, CA 92103
Effective as of 01-JAN-14

**C1. Lista de proveedores de la red
Médico de atención especializada**

***SURGERY GENERAL
VASCULAR***

CHAMMAS, JOSEPH, MD†

Provider ID: N/A

6719 ALVARADO RD STE
303

SAN DIEGO, CA 92120

Effective as of 01-JUL-24

DIEFFENBACH, BRYAN, MD

Provider ID: N/A

550 WASHINGTON ST STE
641

SAN DIEGO, CA 92103

Effective as of 01-JAN-24

**MORENO MARTINEZ,
ENRIQUE, MD†**

Provider ID: N/A

6719 ALVARADO RD STE
303

SAN DIEGO, CA 92120

Teleservice

Effective as of 01-MAR-24

SALLOUM, ALEXANDER, MD†

Provider ID: N/A

6719 ALVARADO RD STE
303

SAN DIEGO, CA 92120

Teleservice

Effective as of 01-MAR-24

SALLOUM, ALEXANDER, MD†

Provider ID: N/A

6719 ALVARADO RD STE
303

SAN DIEGO, CA 92120

Teleservice

Effective as of 01-MAR-24

SALLOUM, ALEXANDER, MD

Provider ID: N/A

6402 EL CAJON BLVD STE
102

SAN DIEGO, CA 92115

Effective as of 01-JUN-23

SALLOUM, ALEXANDER, MD†

Provider ID: N/A

6402 EL CAJON BLVD STE
100

SAN DIEGO, CA 92115

Effective as of 01-JAN-23

SISE, MICHAEL, MD†

Provider ID: N/A

550 WASHINGTON ST STE
641

SAN DIEGO, CA 92103

Effective as of 01-FEB-07

SISE, MICHAEL, MD†

Provider ID: N/A

550 WASHINGTON ST STE
641

SAN DIEGO, CA 92103

Effective as of 01-JAN-14

SURGERY HAND

RICKARDS, ENASS, MD†

Provider ID: N/A

9333 GENESEE AVE STE
350

SAN DIEGO, CA 92121

Effective as of 01-JAN-21

SHILLITO, MATTHEW, MD†

Provider ID: N/A

6719 ALVARADO RD STE
200

SAN DIEGO, CA 92120

Effective as of 01-AUG-24

***SURGERY HAND
ORTHOPEDIC***

STEPHENSON, SAMUEL, MD†

Provider ID: N/A

200 W ARBOR DR

SAN DIEGO, CA 92103

Effective as of 01-OCT-21

SURGERY

NEUROLOGICAL

FLORES, BRUNO, MD†

Provider ID: N/A

11199 SORRENTO VALLEY
RD STE 203

SAN DIEGO, CA 92121

Effective as of 01-JAN-23

FLORES, BRUNO, MD†

Provider ID: N/A

5395 RUFFIN RD STE 102
SAN DIEGO, CA 92123

Effective as of 01-FEB-21

FLORES, BRUNO, MD†

Provider ID: N/A

5395 RUFFIN RD STE 102
SAN DIEGO, CA 92123

Effective as of 01-APR-22

GOEL, GUNJAN, MD†

Provider ID: N/A

3750 CONVOY ST STE 301
SAN DIEGO, CA 92111

Effective as of 01-JUL-19

HATEFI, DUSTIN, MD

Provider ID: N/A

200 W ARBOR DR

SAN DIEGO, CA 92103

Effective as of 01-SEP-24

LEVINE, REED, MD

Provider ID: N/A

3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-FEB-24

OSTRUP, RICHARD, MD†

Provider ID: N/A

3750 CONVOY ST STE 301
SAN DIEGO, CA 92111*

Effective as of 01-SEP-20

UDANI, VIKRAM, MD

Provider ID: N/A

11199 SORRENTO VALLEY
RD STE 203
SAN DIEGO, CA 92121

Effective as of 01-JAN-23

ZACHARIAH, MARCUS, MD

Provider ID: N/A

3750 CONVOY ST STE 301
SAN DIEGO, CA 92111

Effective as of 01-MAY-23

SURGERY ORTHOPEDIC

ABITBOL, JEAN-JACQUES, MD†

Provider ID: N/A

7625 MESA COLLEGE DR
STE 315A
SAN DIEGO, CA 92111

Effective as of 01-JUN-22

ANDRY, JAMES, MD

Provider ID: N/A

7910 FROST ST STE 340
SAN DIEGO, CA 92123*

Effective as of 01-MAR-24

ANDRY, JAMES, MD

Provider ID: N/A

7910 FROST ST STE 340
SAN DIEGO, CA 92123

Effective as of 01-MAR-24

BAWA, MANEESH, MD†

Provider ID: N/A

4060 4TH AVE STE 700
SAN DIEGO, CA 92103

Effective as of 01-SEP-15

BEHR, CHRISTOPHER, MD†

Provider ID: N/A

4060 4TH AVE STE 700
SAN DIEGO, CA 92103

Effective as of 01-SEP-15

BLAIS, MICAH, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-JUL-23

BOURLAND, BRYAN, DO

Provider ID: N/A

4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121*

Effective as of 01-SEP-23

BOURLAND, BRYAN, DO

Provider ID: N/A

4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121

Effective as of 01-OCT-23

BRETERON, DANIEL, DO†

Provider ID: N/A

4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121

Effective as of 01-NOV-22

BUKATA, SUSAN, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-MAR-21

BUKATA, SUSAN, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120

Effective as of 01-FEB-24

BURNIKEL, DAVID, MD†

Provider ID: N/A

6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120

Effective as of 01-FEB-23

BURNIKEL, DAVID, MD†

Provider ID: N/A

6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120

Effective as of 01-JAN-21

BURNIKEL, DAVID, MD†

Provider ID: N/A

6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120

Effective as of 01-SEP-23

BURNIKEL, DAVID, MD†

Provider ID: N/A

6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120

Effective as of 01-JUN-24

CAGE, DORI, MD†

Provider ID: N/A

8008 FROST ST STE 403
SAN DIEGO, CA 92123

Effective as of 01-NOV-14

CHOI, JIHOON, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103

Effective as of 01-SEP-21

DAVID, TAL, MD†

CI. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

☒ 4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121
Effective as of 01-NOV-21

DOWNING, KRISTOPHER, MD

Provider ID: N/A

☒ 7910 FROST ST STE 340
SAN DIEGO, CA 92123*
Effective as of 01-MAR-24

DOWNING, KRISTOPHER, MD

Provider ID: N/A

☒ 7910 FROST ST STE 340
SAN DIEGO, CA 92123
Effective as of 01-MAR-24

DUTTON, PASCUAL, MD

Provider ID: N/A

☒ 6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120
Effective as of 01-JAN-24

DUTTON, PASCUAL, MD

Provider ID: N/A

☒ 3444 KEARNY VILLA RD
STE 401
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

DUTTON, PASCUAL, MD

Provider ID: N/A

☒ 3750 CONVOY ST STE 201
SAN DIEGO, CA 92111
Effective as of 01-JAN-24

DUTTON, PASCUAL, MD

Provider ID: N/A

☒ 5395 RUFFIN RD STE 201
SAN DIEGO, CA 92123
Effective as of 01-OCT-23

DUTTON, PASCUAL, MD

Provider ID: N/A

☒ 5395 RUFFIN RD STE 201
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

DUTTON, PASCUAL, MD

Provider ID: N/A

☒ 4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-24

GOEB, YANNICK, MD†

Provider ID: N/A

☒ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

GROTTING, JOHN, MD

Provider ID: N/A

☒ 6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120
Effective as of 01-JAN-24

GROTTING, JOHN, MD†

Provider ID: N/A

☒ 4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-24

GROTTING, JOHN, MD†

Provider ID: N/A

☒ 4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121
Effective as of 01-AUG-23

GROTTING, JOHN, MD

Provider ID: N/A

☒ 3444 KEARNY VILLA RD
STE 401
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

GROTTING, JOHN, MD

Provider ID: N/A

☒ 3750 CONVOY ST STE 201
SAN DIEGO, CA 92111
Effective as of 01-JAN-24

GROTTING, JOHN, MD†

Provider ID: N/A

☒ 4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121
Effective as of 01-NOV-21

GRUHONJIC, IMRAN, DO

Provider ID: N/A

☒ 4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121*
Effective as of 01-OCT-24

HOFMEISTER, ERIC, MD

Provider ID: N/A

☒ 3444 KEARNY VILLA RD
STE 401
SAN DIEGO, CA 92123
Effective as of 01-SEP-23

HONG, THOMAS, MD

Provider ID: N/A

☒ 3750 CONVOY ST STE 201
SAN DIEGO, CA 92111*
Effective as of 01-OCT-24

HONG, THOMAS, MD

Provider ID: N/A

☒ 3750 CONVOY ST STE 201
SAN DIEGO, CA 92111
Effective as of 01-AUG-24

HONG, THOMAS, MD

Provider ID: N/A

☒ 4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-AUG-24

JAIN, RINA, MD†

Provider ID: N/A

📍 3750 CONVOY ST STE 201
SAN DIEGO, CA 92111

Effective as of 01-JAN-21

KANSARA, DEVANSHU, MD†

Provider ID: N/A

📍 7485 MISSION VALLEY RD
STE 104A

SAN DIEGO, CA 92108

Effective as of 01-MAY-22

KANSARA, DEVANSHU, MD†

Provider ID: N/A

📍 7485 MISSION VALLEY RD
STE 104A

SAN DIEGO, CA 92108

Effective as of 01-JUN-22

KASIR, RAFID, MD

Provider ID: N/A

📍 4060 4TH AVE STE 700
SAN DIEGO, CA 92103

Effective as of 01-DEC-23

KIM, PAUL, MD†

Provider ID: N/A

📍 6719 ALVARADO RD STE
308

SAN DIEGO, CA 92120

Effective as of 01-JAN-14

KIM, PAUL, MD†

Provider ID: N/A

📍 6719 ALVARADO RD STE
308

SAN DIEGO, CA 92120

Effective as of 01-SEP-22

KIMBALL, MICHAEL, MD†

Provider ID: N/A

📍 9333 GENESEE AVE STE

350

SAN DIEGO, CA 92121

Effective as of 01-JAN-21

KIMBALL, MICHAEL, MD†

Provider ID: N/A

📍 9333 GENESEE AVE STE
350

SAN DIEGO, CA 92121

Effective as of 01-JAN-21

KIMBALL, MICHAEL, MD†

Provider ID: N/A

📍 9333 GENESEE AVE STE
350

SAN DIEGO, CA 92121

Effective as of 01-JAN-21

KIMBALL, MICHAEL, MD†

Provider ID: N/A

📍 9333 GENESEE AVE STE
350

SAN DIEGO, CA 92121

Effective as of 01-DEC-14

KIMBALL, MICHAEL, MD†

Provider ID: N/A

📍 9333 GENESEE AVE STE
350

SAN DIEGO, CA 92121

Effective as of 01-SEP-20

KIMBALL, MICHAEL, MD†

Provider ID: N/A

📍 9333 GENESEE AVE STE
350

SAN DIEGO, CA 92121

Effective as of 01-JUL-23

KOLODGE, GAVIN, DO†

Provider ID: N/A

📍 9339 GENESEE AVE STE
150

SAN DIEGO, CA 92121

Effective as of 01-NOV-21

KOLODGE, GAVIN, DO

Provider ID: N/A

📍 3750 CONVOY ST STE 201
SAN DIEGO, CA 92111

Effective as of 01-AUG-23

KRUEGER, VAN, MD

Provider ID: N/A

📍 4910 DIRECTORS PL STE
350

SAN DIEGO, CA 92121*

Effective as of 01-OCT-23

KRUEGER, VAN, MD

Provider ID: N/A

📍 4910 DIRECTORS PL STE
350

SAN DIEGO, CA 92121

Effective as of 01-OCT-23

KUSNEZOV, NICHOLAS, MD

Provider ID: N/A

📍 7910 FROST ST STE 340
SAN DIEGO, CA 92123

Teleservice

Effective as of 01-APR-24

LENIHAN, MICHAEL, MD

Provider ID: N/A

📍 3444 KEARNY VILLA RD
STE 401

SAN DIEGO, CA 92123

Effective as of 01-SEP-23

MACK, GREGORY, MD

Provider ID: N/A

📍 8008 FROST ST STE 403
SAN DIEGO, CA 92123

Effective as of 01-JAN-15

MCCANDLESS, JEREMY, MD†

Provider ID: N/A

📍 4060 4TH AVE STE 700
SAN DIEGO, CA 92103

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-OCT-17

MCKNIGHT, BRADEN, MD

Provider ID: N/A

7910 FROST ST STE 340
SAN DIEGO, CA 92123

Teleservice

Effective as of 01-APR-24

MOHLER, LESTER, MD†

Provider ID: N/A

7485 MISSION VALLEY RD
STE 104A

SAN DIEGO, CA 92108

Effective as of 01-JAN-14

MOHLER, LESTER, MD†

Provider ID: N/A

7485 MISSION VALLEY RD
STE 104A

SAN DIEGO, CA 92108

Effective as of 01-FEB-07

MULDOON, MICHAEL, MD†

Provider ID: N/A

3750 CONVOY ST STE 201
SAN DIEGO, CA 92111

Effective as of 01-NOV-21

MULDOON, MICHAEL, MD†

Provider ID: N/A

3750 CONVOY ST STE 201
SAN DIEGO, CA 92111

Effective as of 01-AUG-23

MYER, JONATHAN, MD†

Provider ID: N/A

4910 DIRECTORS PL STE
350

SAN DIEGO, CA 92121

Effective as of 01-NOV-21

MYER, JONATHAN, MD†

Provider ID: N/A

4910 DIRECTORS PL STE

350

SAN DIEGO, CA 92121

Effective as of 01-AUG-23

NELSON, MARK, MD

Provider ID: N/A

7485 MISSION VALLEY RD
STE 104A

SAN DIEGO, CA 92108

Effective as of 01-MAY-24

POMERANTZ, MICHAEL, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 401

SAN DIEGO, CA 92123

Effective as of 01-SEP-23

RAISZADEH, RAMIN, MD†

Provider ID: N/A

6719 ALVARADO RD STE
308

SAN DIEGO, CA 92120

Effective as of 01-JAN-23

RAISZADEH, RAMIN, MD†

Provider ID: N/A

6719 ALVARADO RD STE
308

SAN DIEGO, CA 92120

Effective as of 01-SEP-22

RICKARDS, ENASS, MD†

Provider ID: N/A

9333 GENESEE AVE STE
350

SAN DIEGO, CA 92121

Effective as of 01-APR-23

RICKARDS, ENASS, MD†

Provider ID: N/A

9333 GENESEE AVE STE
350

SAN DIEGO, CA 92121

Effective as of 01-JAN-21

RICKARDS, ENASS, MD†

Provider ID: N/A

9333 GENESEE AVE STE
350

SAN DIEGO, CA 92121

Effective as of 01-FEB-17

RICKARDS, ENASS, MD†

Provider ID: N/A

9333 GENESEE AVE STE
350

SAN DIEGO, CA 92121

Effective as of 01-JUL-23

RICKARDS, ENASS, MD†

Provider ID: N/A

9333 GENESEE AVE STE
350

SAN DIEGO, CA 92121

Effective as of 01-SEP-22

ROBKER, JERRICK, DO†

Provider ID: N/A

4910 DIRECTORS PL STE
350

SAN DIEGO, CA 92121

Effective as of 01-AUG-23

ROBKER, JERRICK, DO†

Provider ID: N/A

4910 DIRECTORS PL STE
350

SAN DIEGO, CA 92121

Effective as of 01-MAY-22

ROSENFELD, ALAN, MD†

Provider ID: N/A

9333 GENESEE AVE STE
350A

SAN DIEGO, CA 92121*

Effective as of 01-SEP-20

ROSENFELD, ALAN, MD†

Provider ID: N/A

**C1. Lista de proveedores de la red
Médico de atención especializada**

9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

ROSENFELD, ALAN, MD†
Provider ID: N/A

9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-15

ROSENFELD, ALAN, MD†
Provider ID: N/A

9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

ROSENFELD, ALAN, MD†
Provider ID: N/A

9333 GENESEE AVE STE
350A
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

ROSENFELD, ALAN, MD†
Provider ID: N/A

9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-APR-23

ROSENFELD, ALAN, MD†
Provider ID: N/A

9333 GENESEE AVE STE
350A
SAN DIEGO, CA 92121
Effective as of 01-AUG-23

SCHULTZ, JEFFREY, MD†
Provider ID: N/A

7485 MISSION VALLEY RD
STE 104A
SAN DIEGO, CA 92108

Effective as of 01-FEB-07

SCHULTZ, JEFFREY, MD†
Provider ID: N/A

7485 MISSION VALLEY RD
STE 104A
SAN DIEGO, CA 92108
Effective as of 01-JAN-14

SCHULTZEL, MARK, MD†
Provider ID: N/A

3750 CONVOY ST STE 201
SAN DIEGO, CA 92111
Effective as of 01-NOV-21

SHAH, KALPIT, MD†
Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

SHILLITO, MATTHEW, MD†
Provider ID: N/A

6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120
Effective as of 01-JAN-21

SHILLITO, MATTHEW, MD†
Provider ID: N/A

6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120
Effective as of 01-SEP-23

SHILLITO, MATTHEW, MD†
Provider ID: N/A

6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120
Effective as of 01-AUG-23

SHILLITO, MATTHEW, MD†
Provider ID: N/A

6719 ALVARADO RD STE

200
SAN DIEGO, CA 92120
Effective as of 01-JUN-24

SIROTA, MICHAEL, MD†
Provider ID: N/A

6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120
Effective as of 01-JUN-24

SIROTA, MICHAEL, MD†
Provider ID: N/A

6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120
Effective as of 01-AUG-24

SIROTA, MICHAEL, MD†
Provider ID: N/A

6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120
Effective as of 01-AUG-23

SIROTA, MICHAEL, MD†
Provider ID: N/A

6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120
Effective as of 01-JAN-21

SULLIVAN, THOMAS, MD
Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

SUN, MICHAEL, MD
Provider ID: N/A

7485 MISSION VALLEY RD
STE 104A
SAN DIEGO, CA 92108
Effective as of 01-DEC-23

C1. Lista de proveedores de la red Médico de atención especializada

TANAKA, SCOTT, MD†

Provider ID: N/A

☐ 4060 4TH AVE STE 700
SAN DIEGO, CA 92103
Effective as of 01-AUG-17

TASTO, JAMES, MD†

Provider ID: N/A

☐ 6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120
Effective as of 01-JAN-21

TASTO, JAMES, MD†

Provider ID: N/A

☐ 6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120*
Effective as of 01-AUG-23

TASTO, JAMES, MD†

Provider ID: N/A

☐ 6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120
Effective as of 01-SEP-23

TAYYAB, NEIL, MD†

Provider ID: N/A

☐ 9333 GENESEE AVE STE
350A
SAN DIEGO, CA 92121
Effective as of 01-AUG-23

TAYYAB, NEIL, MD†

Provider ID: N/A

☐ 9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

TAYYAB, NEIL, MD†

Provider ID: N/A

☐ 9333 GENESEE AVE STE
350A

SAN DIEGO, CA 92121
Effective as of 01-JAN-21

TAYYAB, NEIL, MD†

Provider ID: N/A

☐ 9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Effective as of 01-MAR-16

TAYYAB, NEIL, MD†

Provider ID: N/A

☐ 9333 GENESEE AVE STE
350A
SAN DIEGO, CA 92121
Effective as of 01-SEP-22

TRADONSKY, STEVEN, MD†

Provider ID: N/A

☐ 7485 MISSION VALLEY RD
STE 104A
SAN DIEGO, CA 92108
Effective as of 01-SEP-15

TRADONSKY, STEVEN, MD†

Provider ID: N/A

☐ 7485 MISSION VALLEY RD
STE 104A
SAN DIEGO, CA 92108
Effective as of 01-JAN-14

URBAND, LINDSEY, MD†

Provider ID: N/A

☐ 8008 FROST ST STE 403
SAN DIEGO, CA 92123
Effective as of 01-JUL-19

VALK, JOSIAH, DO

Provider ID: N/A

☐ 4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121*
Effective as of 01-OCT-24

WHEATLEY, BENJAMIN, MD

Provider ID: N/A

☐ 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

WHEATLEY, BENJAMIN, MD

Provider ID: N/A

☐ 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

YOUNGBLOOD, SCOT, MD

Provider ID: N/A

☐ 6719 ALVARADO RD STE
200
SAN DIEGO, CA 92120
Effective as of 01-OCT-23

YOUNGBLOOD, SCOT, MD

Provider ID: N/A

☐ 4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121
Effective as of 01-NOV-23

YOUNGBLOOD, SCOT, MD

Provider ID: N/A

☐ 3750 CONVOY ST STE 201
SAN DIEGO, CA 92111
Effective as of 01-NOV-23

YOUNGBLOOD, SCOT, MD

Provider ID: N/A

☐ 3750 CONVOY ST STE 201
SAN DIEGO, CA 92111
Effective as of 01-OCT-23

YOUNGBLOOD, SCOT, MD

Provider ID: N/A

☐ 4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121
Effective as of 01-OCT-23

YOUNGBLOOD, SCOT, MD

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

4910 DIRECTORS PL STE
350
SAN DIEGO, CA 92121
Effective as of 01-OCT-23

SURGERY PLASTIC

APOSTOLIDES, JOHN, MD

Provider ID: N/A

1322 SCOTT ST STE 102
SAN DIEGO, CA 92106
Effective as of 01-AUG-15

BATRA, MUNISH, MD

Provider ID: N/A

12264 EL CAMINO REAL
STE 101
SAN DIEGO, CA 92130
Effective as of 01-MAR-02

CHAO, JAMES, MD†

Provider ID: N/A

8901 ACTIVITY RD
SAN DIEGO, CA 92126
Effective as of 01-JUL-15

CHEN, STEVEN, MD†

Provider ID: N/A

8901 ACTIVITY RD
SAN DIEGO, CA 92126
Effective as of 01-JUL-15

GOSMAN, AMANDA, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

GOSMAN, AMANDA, MD†

Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-NOV-21

HANDLER, BARRY, MD†

Provider ID: N/A

6699 ALVARADO RD STE
2305
SAN DIEGO, CA 92120
Effective as of 01-SEP-22

KUPFER, DAVID, MD†

Provider ID: N/A

5395 RUFFIN RD STE 201
SAN DIEGO, CA 92123
Effective as of 01-JUL-14

NGUYEN, KHANG, MD

Provider ID: N/A

6610 FLANDERS DR STE 101
SAN DIEGO, CA 92121
Effective as of 01-FEB-23

SURGERY THORACIC

HEMP, JAMES, MD†

Provider ID: N/A

4033 3RD AVE STE 210
SAN DIEGO, CA 92103
Effective as of 01-FEB-07

HUDSON, JESSICA, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

SURGICAL ONCOLOGY

MEHTSUN, WINTA, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JAN-22

UROLOGY

ABITBOL, JEAN-JACQUES, MD†

Provider ID: N/A

5395 RUFFIN RD STE 202
SAN DIEGO, CA 92123*
Effective as of 01-NOV-21

AHMADIEH, KIAN, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-24

ANGER, JENNIFER, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-OCT-21

ANGER, JENNIFER, MD†

Provider ID: N/A

4520 EXECUTIVE DR STE
360
SAN DIEGO, CA 92121
Effective as of 01-OCT-21

BAGRODIA, ADITYA, MD

Provider ID: N/A

6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-AUG-24

BASTUBA, MARTIN, MD†

Provider ID: N/A

6699 ALVARADO RD STE
2207
SAN DIEGO, CA 92120
Effective as of 01-JAN-21

BUTLER, PHILIP, MD

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

BUTLER, PHILIP, MD

Provider ID: N/A

CI. Lista de proveedores de la red Médico de atención especializada

3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

BUTLER, PHILIP, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

BUTLER, PHILIP, MD

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-JAN-24

CHEN, TONY, MD†

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-21

COHEN, EDWARD, MD†

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-SEP-21

COHEN, EDWARD, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-FEB-24

COHEN, EDWARD, MD†

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

COHEN, EDWARD, MD†

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

COHEN, EDWARD, MD†

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-JAN-24

COHEN, EDWARD, MD†

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-NOV-22

COHEN, EDWARD, MD

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-FEB-24

DATO, PAUL, MD

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

DATO, PAUL, MD

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-FEB-24

DICKS, BRIAN, MD

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270

SAN DIEGO, CA 92128
Effective as of 01-FEB-24

DICKS, BRIAN, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

DICKS, BRIAN, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-FEB-24

DICKS, BRIAN, MD†

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-SEP-15

DICKS, BRIAN, MD†

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

DICKS, BRIAN, MD†

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JUL-22

DICKS, BRIAN, MD†

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

DICKS, BRIAN, MD†

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-JAN-21

DICKS, BRIAN, MD†

Provider ID: N/A

📍 4060 4TH AVE STE 310
SAN DIEGO, CA 92103

Effective as of 01-JAN-21

DICKS, BRIAN, MD†

Provider ID: N/A

📍 4060 4TH AVE STE 310
SAN DIEGO, CA 92103

Effective as of 01-SEP-22

HOLDEN, MARC, MD†

Provider ID: N/A

📍 4060 4TH AVE STE 310
SAN DIEGO, CA 92103

Effective as of 01-JAN-21

HOLDEN, MARC, MD†

Provider ID: N/A

📍 4060 4TH AVE STE 310
SAN DIEGO, CA 92103

Effective as of 01-JAN-21

HOLDEN, MARC, MD†

Provider ID: N/A

📍 4060 4TH AVE STE 310
SAN DIEGO, CA 92103

Effective as of 01-NOV-21

HOLDEN, MARC, MD†

Provider ID: N/A

📍 11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128

Effective as of 01-OCT-22

HOLDEN, MARC, MD†

Provider ID: N/A

📍 11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128

Effective as of 01-SEP-22

JUMA, SAAD, MD

Provider ID: N/A

📍 11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128

Effective as of 01-FEB-24

JUMA, SAAD, MD

Provider ID: N/A

📍 3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123

Effective as of 01-FEB-24

JUMA, SAAD, MD

Provider ID: N/A

📍 4060 4TH AVE STE 310
SAN DIEGO, CA 92103

Effective as of 01-JAN-24

KATZ, JONATHAN, MD

Provider ID: N/A

📍 16950 VIA TAZON
SAN DIEGO, CA 92127

Effective as of 01-JUN-23

KEILLER, DANNY, MD

Provider ID: N/A

📍 11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128

Effective as of 01-JAN-24

KEILLER, DANNY, MD

Provider ID: N/A

📍 4060 4TH AVE STE 310
SAN DIEGO, CA 92103

Effective as of 01-FEB-24

KEILLER, DANNY, MD

Provider ID: N/A

📍 3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123

Effective as of 01-JAN-24

KEILLER, DANNY, MD†

Provider ID: N/A

📍 3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123

Effective as of 01-JAN-21

NEUSTEIN, PAUL, MD

Provider ID: N/A

📍 3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123

Effective as of 01-FEB-24

NEUSTEIN, PAUL, MD

Provider ID: N/A

📍 3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123

Effective as of 01-FEB-24

NEUSTEIN, PAUL, MD

Provider ID: N/A

📍 4060 4TH AVE STE 310
SAN DIEGO, CA 92103

Effective as of 01-JAN-24

NGUYEN, HUNG, MD

Provider ID: N/A

📍 4060 4TH AVE STE 310
SAN DIEGO, CA 92103

Effective as of 01-FEB-24

NGUYEN, HUNG, MD

Provider ID: N/A

📍 3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123

Effective as of 01-FEB-24

NGUYEN, HUNG, MD

Provider ID: N/A

📍 3444 KEARNY VILLA RD

CI. Lista de proveedores de la red Médico de atención especializada

STE 202
SAN DIEGO, CA 92123
Effective as of 01-FEB-24

NGUYEN, HUNG, MD†

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128

Teleservice

Effective as of 01-SEP-21

NGUYEN, HUNG, MD†

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128

Teleservice

Effective as of 01-NOV-22

NGUYEN, HUNG, MD†

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128

Teleservice

Effective as of 01-JAN-24

PE, MARK-RALLY, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123

Effective as of 01-FEB-24

PE, MARK-RALLY, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123

Effective as of 01-JAN-24

PE, MARK-RALLY, MD

Provider ID: N/A

11770 BERNARDO PLAZA

CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-JAN-24

ROBERTS, JAMES, MD

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128

Effective as of 01-JAN-24

ROBERTS, JAMES, MD†

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123

Effective as of 01-JAN-21

ROBERTS, JAMES, MD†

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123

Effective as of 01-SEP-22

ROBERTS, JAMES, MD

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103

Effective as of 01-JAN-24

SALEM, CAROL, MD†

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103

Effective as of 01-NOV-21

SALEM, CAROL, MD†

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103

Effective as of 01-OCT-19

SALEM, CAROL, MD†

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-OCT-07

SALEM, CAROL, MD†

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103

Effective as of 01-JAN-21

SALEM, CAROL, MD†

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103

Effective as of 01-JUL-22

SALEM, CAROL, MD†

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103

Effective as of 01-JAN-21

SALEM, CAROL, MD†

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103

Effective as of 01-SEP-22

SALEM, CAROL, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123

Effective as of 01-FEB-24

SALEM, CAROL, MD

Provider ID: N/A

3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123

Effective as of 01-JAN-24

SALEM, CAROL, MD

Provider ID: N/A

11770 BERNARDO PLAZA

CI. Lista de proveedores de la red Médico de atención especializada

CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-JAN-24

SANTOMAURO, MICHAEL, MD†

Provider ID: N/A

3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-NOV-22

SANTOMAURO, MICHAEL, MD†

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-NOV-22

SANTOMAURO, MICHAEL, MD†

Provider ID: N/A

3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-JUL-21

SHEETZ, TYLER, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

UNTERBERG, STEPHEN, MD†

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-DEC-21

UNTERBERG, STEPHEN, MD†

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-JAN-21

UNTERBERG, STEPHEN, MD†

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-SEP-21

UNTERBERG, STEPHEN, MD†

Provider ID: N/A

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-SEP-22

UNTERBERG, STEPHEN, MD†

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-SEP-22

UNTERBERG, STEPHEN, MD†

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-JAN-21

UNTERBERG, STEPHEN, MD†

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-AUG-21

UNTERBERG, STEPHEN, MD†

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-DEC-21

UNTERBERG, STEPHEN, MD†

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-NOV-21

VAPNEK, EVAN, MD

Provider ID: N/A

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

VAPNEK, EVAN, MD†

Provider ID: N/A

4033 3RD AVE STE 400
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

VAPNEK, EVAN, MD

Provider ID: N/A

230 PROSPECT PL STE 210
SAN DIEGO, CA 92118
Effective as of 01-JAN-24

VAPNEK, EVAN, MD†

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-SEP-21

VAPNEK, EVAN, MD†

Provider ID: N/A

3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-SEP-21

VAPNEK, EVAN, MD†

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

VAPNEK, EVAN, MD†

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

VAPNEK, EVAN, MD†

Provider ID: N/A

3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-JUL-22

VAPNEK, EVAN, MD†

Provider ID: N/A

3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

VAPNEK, EVAN, MD†

Provider ID: N/A

3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

VAPNEK, EVAN, MD†

Provider ID: N/A

3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-JAN-23

WANG, LUKE, MD

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

ADDICTIVE MEDICINE

NAFICY, K, MD†

Provider ID: N/A

30448 RANCHO VIEJO RD

STE 150

SAN JUAN CAPISTRANO,
CA 92675

Teleservice

Effective as of 01-MAY-21

CLINICAL

NEUROPSYCHOLOGIST

HOCHBERGER, WILLIAM, PhD

Provider ID: N/A

29122 RANCHO VIEJO RD
STE 102G
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-APR-24

HOCHBERGER, WILLIAM, PhD

Provider ID: N/A

29122 RANCHO VIEJO RD
STE 102G
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-APR-24

KALINIAN, HAYGOUSH, PhD

Provider ID: N/A

30320 RANCHO VIEJO RD
STE 102
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-23

KALINIAN, HAYGOUSH, PhD

Provider ID: N/A

30320 RANCHO VIEJO RD
STE 102
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-23

EMERGENCY MEDICINE

FAHIM, ASHRAF, MD

Provider ID: N/A

27372 CALLE ARROYO
SAN JUAN CAPISTRANO,
CA 92675

Teleservice

Effective as of 01-APR-24

REZVAN, KAVEH, DO†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-OCT-20

FAMILY PRACTICE

LEWIS, GEORGE, MD

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-23

LEWIS, GEORGE, MD

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-23

LEWIS, GEORGE, MD

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-23

OBZEJTA, NATALIA, MD†

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,

**C1. Lista de proveedores de la red
Médico de atención especializada**

CA 92675
Effective as of 01-APR-22

OBZEJTA, NATALIA, MD†

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-APR-22

OBZEJTA, NATALIA, MD†

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-APR-22

PETERSON, TYLER, DO

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-OCT-23

PETERSON, TYLER, DO

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-OCT-23

PETERSON, TYLER, DO

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-OCT-23

RAD, SHERVIN, MD

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JAN-24

RAD, SHERVIN, MD

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JAN-24

RAD, SHERVIN, MD

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JAN-24

TAKHAR, JASMINE, DO

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-DEC-23

TAKHAR, JASMINE, DO

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-DEC-23

TAKHAR, JASMINE, DO

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-DEC-23

INTERNAL MEDICINE

CARABULEA, GABRIEL, MD

Provider ID: N/A

30250 RANCHO VIEJO RD
STE C
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-MAY-23

CARABULEA, GABRIEL, MD

Provider ID: N/A

30250 RANCHO VIEJO RD
STE C
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-MAY-23

KALE, RAHUL, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-SEP-19

KOHLI, SANJIVAN, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-OCT-20

KOHLI, SANJIVAN, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-OCT-20

KOHLI, SANJIVAN, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD

C1. Lista de proveedores de la red Médico de atención especializada

STE 200
SAN JUAN CAPISTRANO,
CA 92675
Effective as of 01-JUN-17

SOONG, YEN-HUI, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-NOV-22

SOONG, YEN-HUI, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-NOV-22

INTERNAL MEDICINE

CRITICAL CARE MEDICINE

KALE, RAHUL, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-OCT-20

KALE, RAHUL, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JUN-17

KALE, RAHUL, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,

CA 92675
Effective as of 01-OCT-20

KOHLI, SANJIVAN, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-SEP-19

REZVAN, KAVEH, DO†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JUN-24

NEPHROLOGY

LEE, BRIAN, MD†

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 100A
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JUN-22

LEE, BRIAN, MD†

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 100A
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JUN-22

LEE, BRIAN, MD†

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 100A
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JUN-22

LEE, BRIAN, MD†

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 100A
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JAN-23

LEE, BRIAN, MD†

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 100A
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JUN-22

LUI, STEPHEN, MD

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 100A
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-MAY-24

PANG, JASON, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-DEC-14

PANG, JASON, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-NOV-14

OPHTHALMOLOGY

KIM, ESTHER, MD

Provider ID: N/A

31451 RANCHO VIEJO RD

C1. Lista de proveedores de la red Médico de atención especializada

STE 101
SAN JUAN CAPISTRANO,
CA 92675
Effective as of 01-OCT-23

KIM, ESTHER, MD

Provider ID: N/A

31451 RANCHO VIEJO RD
STE 101
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JAN-23

WILLIAMS, MARK, MD

Provider ID: N/A

31451 RANCHO VIEJO RD
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JUN-24

WILLIAMS, MARK, MD

Provider ID: N/A

31451 RANCHO VIEJO RD
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-DEC-23

WILLIAMS, MARK, MD

Provider ID: N/A

31451 RANCHO VIEJO RD
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-DEC-23

PODIATRIST

ANGAROLA, JEFF, DPM

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JAN-22

ANGAROLA, JEFF, DPM

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JAN-22

PSYCHIATRY

KURKJIAN, AZAD, MD†

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-MAY-18

KURKJIAN, AZAD, MD†

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-MAY-18

PSYCHIATRY CHILD

KURKJIAN, AZAD, MD†

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-MAY-18

KURKJIAN, AZAD, MD†

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-MAY-18

PSYCHOLOGIST

HANSINK, RAYMOND, PhD†

Provider ID: N/A

30290 RANCHO VIEJO RD
STE 104
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-DEC-20

HANSINK, RAYMOND, PhD†

Provider ID: N/A

30290 RANCHO VIEJO RD
STE 104
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-DEC-20

HANSINK, RAYMOND, PhD†

Provider ID: N/A

30290 RANCHO VIEJO RD
STE 104
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-DEC-20

HANSINK, RAYMOND, PhD†

Provider ID: N/A

30290 RANCHO VIEJO RD
STE 104
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-DEC-20

KALINIAN, HAYGOUSH, PhD

Provider ID: N/A

30320 RANCHO VIEJO RD
STE 102
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-23

KALINIAN, HAYGOUSH, PhD

Provider ID: N/A


30320 RANCHO VIEJO RD
STE 102
SAN JUAN CAPISTRANO,

C1. Lista de proveedores de la red Médico de atención especializada

CA 92675
Effective as of 01-AUG-23

KALINIAN, HAYGOUSH, PhD


Provider ID: N/A

 30320 RANCHO VIEJO RD
STE 102
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-23

KALINIAN, HAYGOUSH, PhD


Provider ID: N/A

 30320 RANCHO VIEJO RD
STE 102
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-23

SEIDER, TALIA, PhD


Provider ID: N/A

 29122 RANCHO VIEJO RD
STE 102G
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-APR-24

SEIDER, TALIA, PhD


Provider ID: N/A

 29122 RANCHO VIEJO RD
STE 102G
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-APR-24

SEIDER, TALIA, PhD

Provider ID: N/A

 29122 RANCHO VIEJO RD
STE 102G
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-APR-24

SEIDER, TALIA, PhD

Provider ID: N/A


 29122 RANCHO VIEJO RD
STE 102G
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-APR-24

PULMONARY DISEASES

KALE, RAHUL, MD†


Provider ID: N/A

 30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JUN-24

KALE, RAHUL, MD†


Provider ID: N/A

 30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JAN-18

KALE, RAHUL, MD†


Provider ID: N/A

 30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JUN-17

KALE, RAHUL, MD†


Provider ID: N/A

 30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-NOV-19

KOHLI, SANJIVAN, MD†


Provider ID: N/A

 30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,

CA 92675
Effective as of 01-JUN-17

KOHLI, SANJIVAN, MD†


Provider ID: N/A

 30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JAN-20

KOHLI, SANJIVAN, MD†


Provider ID: N/A

 30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JAN-18

KOHLI, SANJIVAN, MD†


Provider ID: N/A

 30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JUN-24

PATEL, JAY, MD†

Provider ID: N/A


 30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Teleservice

Effective as of 01-JUN-24

PATEL, JAY, MD†

Provider ID: N/A

 30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Teleservice

Effective as of 01-DEC-22

**C1. Lista de proveedores de la red
Médico de atención especializada**

PATEL, JAY, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Teleservice

Effective as of 01-JUN-24

PATEL, JAY, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Teleservice

Effective as of 01-JUN-23

PATEL, JAY, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Teleservice

Effective as of 01-DEC-22

PATEL, JAY, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Teleservice

Effective as of 01-OCT-22

PATEL, JAY, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Teleservice

Effective as of 01-NOV-22

PATEL, JAY, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Teleservice

Effective as of 01-NOV-22

REZVAN, KAVEH, DO†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-OCT-20

REZVAN, KAVEH, DO†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-18

REZVAN, KAVEH, DO†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-18

REZVAN, KAVEH, DO†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JUN-24

REZVAN, KAVEH, DO†

Provider ID: N/A

30230 RANCHO VIEJO RD

STE 200

SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JUN-24

SOONG, YEN-HUI, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JUN-24

SOONG, YEN-HUI, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JUN-24

SOONG, YEN-HUI, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-DEC-20

SOONG, YEN-HUI, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-FEB-21

SOONG, YEN-HUI, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-FEB-21

**C1. Lista de proveedores de la red
Médico de atención especializada**

SOONG, YEN-HUI, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-MAY-21

SOONG, YEN-HUI, MD†

Provider ID: N/A

30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JAN-23

YEAM, INCHEL, MD†

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JUL-21

YEAM, INCHEL, MD†

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JUL-21

YEAM, INCHEL, MD†

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-DEC-23

YEAM, INCHEL, MD†

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,

CA 92675

Effective as of 01-OCT-16

YEAM, INCHEL, MD†

Provider ID: N/A

31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-OCT-16

SURGERY HAND

SOHN, ROGER, MD†

Provider ID: N/A

31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-SEP-20

SOHN, ROGER, MD†

Provider ID: N/A

31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-SEP-20

SURGERY ORTHOPEDIC

GVOZDYEV, BORYS, MD†

Provider ID: N/A

31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-20

GVOZDYEV, BORYS, MD†

Provider ID: N/A

31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-20

GVOZDYEV, BORYS, MD†

Provider ID: N/A

31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-JAN-23

GVOZDYEV, BORYS, MD†

Provider ID: N/A

31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-20

GVOZDYEV, BORYS, MD†

Provider ID: N/A

31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-OCT-23

HUO, KEUN-HENG, MD†

Provider ID: N/A

31920 DEL OBISPO ST STE
92675
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-AUG-20

HUO, KEUN-HENG, MD

Provider ID: N/A

31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

Effective as of 01-OCT-23

HUO, KEUN-HENG, MD†

Provider ID: N/A

31920 DEL OBISPO ST STE

**C1. Lista de proveedores de la red
Médico de atención especializada**

92675
SAN JUAN CAPISTRANO,
CA 92675
Effective as of 01-AUG-20

HUO, KEUN-HENG, MD†

Provider ID: N/A
31920 DEL OBISPO ST STE
92675
SAN JUAN CAPISTRANO,
CA 92675
Effective as of 01-AUG-20

HUO, KEUN-HENG, MD

Provider ID: N/A
31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675
Effective as of 01-JAN-23

KIM-ORDEN, MICHAEL, MD

Provider ID: N/A
31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675
Effective as of 01-MAR-23

KIM-ORDEN, MICHAEL, MD

Provider ID: N/A
31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675
Effective as of 01-APR-23

KIM-ORDEN, MICHAEL, MD

Provider ID: N/A
31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675
Effective as of 01-OCT-23

LEE, RICHARD, MD

Provider ID: N/A
30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675
Effective as of 01-JAN-21

SOHN, ROGER, MD†

Provider ID: N/A
31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675
Effective as of 01-SEP-21

SOHN, ROGER, MD†

Provider ID: N/A
31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675
Effective as of 01-OCT-23

SOHN, ROGER, MD†

Provider ID: N/A
31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675
Effective as of 01-SEP-21

SOHN, ROGER, MD†

Provider ID: N/A
31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675
Effective as of 01-FEB-20

SOHN, ROGER, MD†

Provider ID: N/A
31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675

CA 92675
Effective as of 01-FEB-20

SOHN, ROGER, MD†

Provider ID: N/A
31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675
Effective as of 01-JAN-23

SOHN, ROGER, MD†

Provider ID: N/A
31920 DEL OBISPO ST STE
170
SAN JUAN CAPISTRANO,
CA 92675
Effective as of 01-FEB-20

***CARDIAC
ELECTROPHYSIOLOGY***

LERNER, JONATHAN, MD

Provider ID: N/A
955 BOARDWALK STE 100
SAN MARCOS, CA 92078
Effective as of 01-JUL-23

SHAH, ABHISHEK, MD†

Provider ID: N/A
955 BOARDWALK STE 100
SAN MARCOS, CA 92078
Effective as of 01-JAN-23

***CARDIOVASCULAR
DISEASE***

CARLSON, STEVEN, MD†

Provider ID: N/A
955 BOARDWALK STE 100
SAN MARCOS, CA 92078
Teleservice
Effective as of 01-SEP-22

CARLSON, STEVEN, MD†

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078

Teleservice

Effective as of 01-JAN-21

CARLSON, STEVEN, MD†

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078

Teleservice

Effective as of 01-APR-21

DO, HULBERT, MD

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078

Effective as of 01-OCT-23

MOHAMEDALI, BURHAN, MD†

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078

Teleservice

Effective as of 01-SEP-22

NARAYANAN, MEENA, MD†

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078

Effective as of 01-SEP-22

NARAYANAN, MEENA, MD†

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078

Effective as of 01-APR-21

PARIKH, MILIND, DO†

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078

Effective as of 01-SEP-22

SARSAM, LUAY, MD

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078

Effective as of 01-JUL-23

SARSAM, LUAY, MD

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078

Effective as of 01-JUL-23

SHAH, KULIN, MD†

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078

Effective as of 01-JAN-23

SHAH, ABHISHEK, MD†

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078

Effective as of 01-SEP-22

SUDHAKAR, DEEPTHI, MD†

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078

Effective as of 01-JAN-23

CERTIFIED

ACUPUNCTURIST

CARRA, BARBARA, LAC

Provider ID: N/A

150 VALPREDA RD
SAN MARCOS, CA 92069

Effective as of 01-JUL-24

GONZALEZ, ANDRES, LAC

Provider ID: N/A

1595 GRAND AVE STE 100
SAN MARCOS, CA 92078

Effective as of 01-MAY-23

CERTIFIED NURSE

PRACTITIONER

BRACEY-ASIEDU, ALEKSANDRYA, NP

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069*

Effective as of 01-OCT-24

FAIQ, JAMILA, NP†

Provider ID: N/A

838 NORDAHL RD STE 300
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-NOV-22

FAIQ, JAMILA, NP†

Provider ID: N/A

838 NORDAHL RD STE 300
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-JAN-21

FODDA, RAMI, NPF

Provider ID: N/A

1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

Effective as of 01-FEB-23

KOHOUT, KATHRYN, NP†

Provider ID: N/A

150 VALPREDA RD
SAN MARCOS, CA 92069

Effective as of 01-SEP-22

KROCHMAL, RACHEL, NP

Provider ID: N/A

120 CRAVEN RD STE 101
SAN MARCOS, CA 92078

Effective as of 01-OCT-23

MAROSOK, MICHELLE, NP

Provider ID: N/A

838 NORDAHL RD STE 300

C1. Lista de proveedores de la red Médico de atención especializada

SAN MARCOS, CA 92069
Teleservice
Effective as of 01-MAR-24

MOONEY, PATRICIA, NP†

Provider ID: N/A
838 NORDAHL RD STE 300
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-MAY-21

MOONEY, PATRICIA, NP†

Provider ID: N/A
838 NORDAHL RD STE 300
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-JUL-21

MWAURA, WAIRIMU, NP†

Provider ID: N/A
838 NORDAHL RD STE 300
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-JUN-21

MWAURA, WAIRIMU, NP†

Provider ID: N/A
838 NORDAHL RD STE 300
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-SEP-22

PARSONS, MEKRAE, NP

Provider ID: N/A
150 VALPRED A RD
SAN MARCOS, CA 92069
Effective as of 01-DEC-23

VAHDAT, VALERIE, NP†

Provider ID: N/A
2085 MONTIEL RD STE 102
SAN MARCOS, CA 92069
Effective as of 01-NOV-22

VICK, ALINA, NP

Provider ID: N/A
314 S TWIN OAKS VALLEY
RD STE 114
SAN MARCOS, CA 92078
Teleservice
Effective as of 01-NOV-23

WILLEY, MARTI, NP†

Provider ID: N/A
838 NORDAHL RD STE 300
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-JUN-21

YCASAS, EMILY, NP

Provider ID: N/A
150 VALPRED A RD
SAN MARCOS, CA 92069
Effective as of 01-JUN-24

CERTIFIED REGISTERED NURSE MIDWIFE

BELANGER, TANYA, CRNM†

Provider ID: N/A
150 VALPRED A RD
SAN MARCOS, CA 92069
Effective as of 01-JUL-22

MATEO, MARIE, CRNM†

Provider ID: N/A
150 VALPRED A RD
SAN MARCOS, CA 92069
Effective as of 01-JUL-22

CHIROPRACTOR

HINES, TAYTE, DC

Provider ID: N/A
2085 MONTIEL RD STE 102
SAN MARCOS, CA 92069
Effective as of 01-JAN-24

JEPPESEN, LANCE, DC

Provider ID: N/A
1146 SAN MARINO DR STE L
SAN MARCOS, CA 92078
Effective as of 01-JAN-01

JIMENEZ, CLARIBEL, DC

Provider ID: N/A
150 VALPRED A RD
SAN MARCOS, CA 92069
Effective as of 01-JUL-24

MAUSER, JILL ELLEN, DC

Provider ID: N/A
1146 SAN MARINO DR
SAN MARCOS, CA 92078
Effective as of 01-JUN-21

PATEL, BRIJESH, DC

Provider ID: N/A
2085 MONTIEL RD STE 102
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-JUN-24

PATEL, BRIJESH, DC

Provider ID: N/A
2085 MONTIEL RD STE 102
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-JUL-24

TRAINER, JASON, DC†

Provider ID: N/A
150 VALPRED A RD
SAN MARCOS, CA 92069
Effective as of 01-JUL-22

TRAINER, JASON, DC

Provider ID: N/A
1595 GRAND AVE STE 100
SAN MARCOS, CA 92078
Effective as of 01-MAR-24

C1. Lista de proveedores de la red Médico de atención especializada

DERMATOLOGY

BROWN, REGINA, MD

Provider ID: N/A

838 NORDAHL RD STE 250
SAN MARCOS, CA 92069

Effective as of 01-AUG-24

BROWN, REGINA, MD

Provider ID: N/A

838 NORDAHL RD STE 250
SAN MARCOS, CA 92069

Effective as of 01-SEP-24

GILBOA, RUTH, MD†

Provider ID: N/A

838 NORDAHL RD STE 250
SAN MARCOS, CA 92069

Effective as of 01-AUG-21

SIRICHOTIRATANA, MELISSA, MD†

Provider ID: N/A

838 NORDAHL RD STE 250
SAN MARCOS, CA 92069

Effective as of 01-JAN-23

VENKAT, ARUN, MD†

Provider ID: N/A

838 NORDAHL RD STE 250
SAN MARCOS, CA 92069

Effective as of 01-MAR-17

VENKAT, ARUN, MD†

Provider ID: N/A

838 NORDAHL RD STE 250
SAN MARCOS, CA 92069

Effective as of 01-JUL-22

VENKAT, ARUN, MD†

Provider ID: N/A

838 NORDAHL RD STE 250
SAN MARCOS, CA 92069

Effective as of 01-AUG-20

FAMILY PRACTICE

MATIAS, JULIE, DO

Provider ID: N/A

150 VALPRED A RD
SAN MARCOS, CA 92069

Effective as of 01-AUG-24

MCHENRY, KATHRYN, DO

Provider ID: N/A

2085 MONTIEL RD STE 102
SAN MARCOS, CA 92069

Effective as of 01-MAY-24

NATH, DEVARSHI, MD

Provider ID: N/A

150 VALPRED A RD
SAN MARCOS, CA 92069*

Effective as of 01-JUN-24

NATH, DEVARSHI, MD

Provider ID: N/A

1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

Effective as of 01-FEB-23

HEMATOLOGY / ONCOLOGY

BESSUDO, ALBERTO, MD†

Provider ID: N/A

838 NORDAHL RD STE 300
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-JAN-21

BESSUDO, ALBERTO, MD†

Provider ID: N/A

838 NORDAHL RD STE 300
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-NOV-21

FINDAKLY, DAWOOD, MD

Provider ID: N/A

838 NORDAHL RD STE 300
SAN MARCOS, CA 92069*

Effective as of 01-OCT-24

KOSMO, MICHAEL, MD†

Provider ID: N/A

838 NORDAHL RD STE 300
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-JAN-21

MARJON, PHILIP, MD

Provider ID: N/A

838 NORDAHL RD STE 300
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-APR-24

SULLIVAN, JESSICA, DO†

Provider ID: N/A

838 NORDAHL RD STE 300
SAN MARCOS, CA 92069

Effective as of 01-OCT-22

INFECTIOUS DISEASE

PONIACHIK, SAMUEL, MD†

Provider ID: N/A

150 VALPRED A RD
SAN MARCOS, CA 92069

Effective as of 01-JUN-24

INTERNAL MEDICINE

NARAYANAN, MEENA, MD†

Provider ID: N/A

955 BOARDWALK STE 100
SAN MARCOS, CA 92078*

Effective as of 01-JAN-21

PONIACHIK, SAMUEL, MD

Provider ID: N/A

1595 GRAND AVE STE 100
SAN MARCOS, CA 92078

**C1. Lista de proveedores de la red
Médico de atención especializada**

Effective as of 01-JUN-23

***INTERVENTIONAL
CARDIOLOGY***

DO, HULBERT, MD†

Provider ID: N/A

📍 150 VALPREDA RD
SAN MARCOS, CA 92069

Effective as of 01-AUG-22

JOHN, ALAN, MD

Provider ID: N/A

📍 955 BOARDWALK STE 100
SAN MARCOS, CA 92078

Effective as of 01-MAY-23

MOHAMEDALI, BURHAN, MD†

Provider ID: N/A

📍 955 BOARDWALK STE 100
SAN MARCOS, CA 92078

Teleservice

Effective as of 01-JAN-21

PARIKH, MILIND, DO†

Provider ID: N/A

📍 150 VALPREDA RD
SAN MARCOS, CA 92069

Effective as of 01-SEP-22

RUBIO GARCIA, MANOLO, MD†

Provider ID: N/A

📍 955 BOARDWALK STE 100
SAN MARCOS, CA 92078

Effective as of 01-MAY-23

RUBIO GARCIA, MANOLO, MD†

Provider ID: N/A

📍 955 BOARDWALK STE 100
SAN MARCOS, CA 92078

Effective as of 01-DEC-22

SHAH, KULIN, MD†

Provider ID: N/A

📍 955 BOARDWALK STE 100
SAN MARCOS, CA 92078

Effective as of 01-APR-23

SUDHAKAR, DEEPTHI, MD†

Provider ID: N/A

📍 955 BOARDWALK STE 100
SAN MARCOS, CA 92078

Effective as of 01-APR-23

SUDHAKAR, DEEPTHI, MD†

Provider ID: N/A

📍 150 VALPREDA RD
SAN MARCOS, CA 92069

Effective as of 01-SEP-22

***LICENSED CLINICAL
SOCIAL WORKER***

MARTINEZ, NORAYMA, LCSW†

Provider ID: N/A

📍 1510 E MISSION RD STE
RV035
SAN MARCOS, CA 92069

Effective as of 01-NOV-22

MEDICAL ONCOLOGY

FRAKES, LAURIE, MD†

Provider ID: N/A

📍 838 NORDAHL RD STE 300
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-JAN-21

FRAKES, LAURIE, MD†

Provider ID: N/A

📍 838 NORDAHL RD STE 300
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-OCT-22

MCCLAY, EDWARD, MD†

Provider ID: N/A

📍 838 NORDAHL RD STE 300
SAN MARCOS, CA 92069

Effective as of 01-FEB-21

NEPHROLOGY

AFSHAR, MASOUD, MD†

Provider ID: N/A

📍 960 W SAN MARCOS BLVD
STE 210
SAN MARCOS, CA 92078

Teleservice

Effective as of 01-MAY-22

AFSHAR, MASOUD, MD†

Provider ID: N/A

📍 960 W SAN MARCOS BLVD
STE 210
SAN MARCOS, CA 92078

Teleservice

Effective as of 01-OCT-23

KAYAL, ANAS, MD†

Provider ID: N/A

📍 960 W SAN MARCOS BLVD
STE 210
SAN MARCOS, CA 92078

Effective as of 01-MAY-22

KAYAL, ANAS, MD†

Provider ID: N/A

📍 960 W SAN MARCOS BLVD
STE 210
SAN MARCOS, CA 92078

Effective as of 01-OCT-23

KAYAL, ANAS, MD†

Provider ID: N/A

📍 960 W SAN MARCOS BLVD
STE 210
SAN MARCOS, CA 92078

Effective as of 01-AUG-24

KAYAL, ANAS, MD†

Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

334 VIA VERA CRUZ STE 251
SAN MARCOS, CA 92078

Teleservice

Effective as of 01-AUG-24

NEUROLOGY

ANDER, AZIZ, MD†

Provider ID: N/A

838 NORDAHL RD STE 310
SAN MARCOS, CA 92069

Effective as of 01-JUL-22

ANDER, AZIZ, MD†

Provider ID: N/A

838 NORDAHL RD STE 310
SAN MARCOS, CA 92069

Effective as of 01-NOV-21

FARHIDVASH, FARIBA, MD†

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Effective as of 01-DEC-22

FARHIDVASH, FARIBA, MD†

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Effective as of 01-JUL-24

FARHIDVASH, FARIBA, MD†

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Effective as of 01-SEP-24

GRATIANNE, ROBERTO, MD†

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Effective as of 01-JUN-22

GUPTA, MONIKA, MD†

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Effective as of 01-JUL-24

GUPTA, MONIKA, MD†

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Effective as of 01-JUN-22

HOSSEINZADEHMALEKI, ANA, MD

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-MAR-24

HOSSEINZADEHMALEKI, ANA, MD

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-MAR-24

HUISA-GARATE, BRANKO, MD†

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Effective as of 01-MAR-24

HUISA-GARATE, BRANKO, MD†

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Effective as of 01-JUN-22

KAYAL, ANAS, MD†

Provider ID: N/A

334 VIA VERA CRUZ STE 251
SAN MARCOS, CA 92078

Teleservice

Effective as of 01-SEP-22

MANDEVILLE, ROSS, MD

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Effective as of 01-SEP-24

MAREK, MAKSYM, MD

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-OCT-23

MAREK, MAKSYM, MD

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-MAY-24

MAREK, MAKSYM, MD

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-MAR-24

MCGEHRIN, KEVIN, MD

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-MAR-24

MCGEHRIN, KEVIN, MD

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-AUG-23

OLENSKI, KLARI, DO†

Provider ID: N/A

838 NORDAHL RD STE 200

C1. Lista de proveedores de la red Médico de atención especializada

SAN MARCOS, CA 92069
Effective as of 01-JUN-22

OLENSKI, KLARI, DO†

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
Effective as of 01-MAY-24

PHAM, ALISE, DO

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-MAY-24

PHAM, ALISE, DO

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-MAR-24

PHAM, ALISE, DO

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-AUG-23

SILVER, BRENT, MD†

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-DEC-22

SILVER, BRENT, MD†

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-SEP-24

SORIALOPEZ, JOSE, MD†

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
Effective as of 01-SEP-24

SORIALOPEZ, JOSE, MD†

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
Effective as of 01-JUN-22

WU, MELANIE, DO†

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
Effective as of 01-JAN-23

OBSTETRICS / GYNECOLOGY

POUNTNEY, MARLENE, MD†

Provider ID: N/A

150 VALPREDA RD
SAN MARCOS, CA 92069
Effective as of 01-JUL-22

POUNTNEY, MARLENE, MD†

Provider ID: N/A

150 VALPREDA RD
SAN MARCOS, CA 92069
Effective as of 01-APR-14

OPHTHALMOLOGY

GUAN, HOWARD, MD

Provider ID: N/A

100 N RANCHO SANTA FE
RD STE 126
SAN MARCOS, CA 92069
Effective as of 01-FEB-24

PRESTERA, TORY, MD†

Provider ID: N/A

100 N RANCHO SANTA FE
RD STE 126
SAN MARCOS, CA 92069
Effective as of 01-JAN-21

PRESTERA, TORY, MD†

Provider ID: N/A

100 N RANCHO SANTA FE
RD STE 126
SAN MARCOS, CA 92069
Effective as of 01-JUL-22

PEDIATRICS

LUMHO, RACHEL, MD

Provider ID: N/A

150 VALPREDA RD
SAN MARCOS, CA 92069
Effective as of 01-NOV-23

QUINTERO, CAROLYN, MD

Provider ID: N/A

150 VALPREDA RD
SAN MARCOS, CA 92069
Effective as of 01-NOV-23

PHYSICIANS ASSISTANT

BASIN, NATALIE, PA

Provider ID: N/A

838 NORDAHL RD STE 250
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-AUG-23

BECKER, JANTIMA, PA

Provider ID: N/A

838 NORDAHL RD STE 250
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-APR-24

BERNARDO, RACHELLE, PA

Provider ID: N/A

1595 GRAND AVE STE 106

C1. Lista de proveedores de la red Médico de atención especializada

SAN MARCOS, CA 92078
Effective as of 01-FEB-23

ESCALANTE, JUVY, PA

Provider ID: N/A

2085 MONTIEL RD STE 102
SAN MARCOS, CA 92069
Effective as of 01-FEB-23

MONTES, VIVIAN, PA

Provider ID: N/A

150 VALPRED A RD
SAN MARCOS, CA 92069
Effective as of 01-JUN-24

POLLEY, SHANNON, PA

Provider ID: N/A

150 VALPRED A RD
SAN MARCOS, CA 92069
Effective as of 01-MAR-23

PODIATRIST

FARMER, STEVEN, DPM

Provider ID: N/A

2085 MONTIEL RD STE 102
SAN MARCOS, CA 92069*
Effective as of 01-JAN-24

PSYCHIATRY

CABREJOS, CLAUDIO, MD

Provider ID: N/A

150 VALPRED A RD
SAN MARCOS, CA 92069
Effective as of 01-JUN-24

CABREJOS, CLAUDIO, MD

Provider ID: N/A

150 VALPRED A RD
SAN MARCOS, CA 92069
Effective as of 01-JUN-24

MCGEHRIN, KEVIN, MD

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-MAR-24

MCGEHRIN, KEVIN, MD

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-AUG-23

MCGEHRIN, KEVIN, MD

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-AUG-23

MCGEHRIN, KEVIN, MD

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-MAR-24

PHAM, ALISE, DO

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-AUG-23

PHAM, ALISE, DO

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-MAR-24

PHAM, ALISE, DO

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Teleservice

Effective as of 01-AUG-23

PHAM, ALISE, DO

Provider ID: N/A

838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-MAR-24

PSYCHOLOGIST

CARLTON-PENN, CORNELIA, PhD

Provider ID: N/A

1510 E MISSION RD SPC
RV035
SAN MARCOS, CA 92069
Effective as of 01-NOV-22

CARLTON-PENN, CORNELIA, PhD

Provider ID: N/A

1510 E MISSION RD SPC
RV035
SAN MARCOS, CA 92069
Effective as of 01-NOV-22

LOVE, YVONNE, PSYD

Provider ID: N/A

2085 MONTIEL RD STE 102
SAN MARCOS, CA 92069
Effective as of 01-JUL-23

LOVE, YVONNE, PSYD

Provider ID: N/A

2085 MONTIEL RD STE 102
SAN MARCOS, CA 92069
Effective as of 01-JUL-23

REGISTERED PHYSICAL THERAPIST

BOUTELLE, DAVID, PT

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

935 W SAN MARCOS BLVD
STE 102
SAN MARCOS, CA 92078
Effective as of 01-JAN-24

BOUTELLE, BARBARA, PT

Provider ID: N/A

935 W SAN MARCOS BLVD
STE 102
SAN MARCOS, CA 92078
Effective as of 01-JAN-24

SPURRELL, KATHRYN, PT

Provider ID: N/A

2115 MONTIEL RD STE 103
SAN MARCOS, CA 92069
Effective as of 01-JAN-24

RHEUMATOLOGY

ALNAHLAWI, BASMA, MD†

Provider ID: N/A

960 W SAN MARCOS BLVD
STE 210
SAN MARCOS, CA 92078
Effective as of 01-MAY-22

ALNAHLAWI, BASMA, MD†

Provider ID: N/A

334 VIA VERA CRUZ STE 251
SAN MARCOS, CA 92078
Teleservice
Effective as of 01-OCT-21

ALNAHLAWI, BASMA, MD†

Provider ID: N/A

960 W SAN MARCOS BLVD
STE 210
SAN MARCOS, CA 92078
Effective as of 01-OCT-23

ALNAHLAWI, BASMA, MD†

Provider ID: N/A

334 VIA VERA CRUZ STE 251

SAN MARCOS, CA 92078

Teleservice

Effective as of 01-SEP-22

ALNAHLAWI, BASMA, MD†

Provider ID: N/A

334 VIA VERA CRUZ STE 251
SAN MARCOS, CA 92078

Teleservice

Effective as of 01-JUL-22

DIKRANIAN, ARA, MD

Provider ID: N/A

960 W SAN MARCOS BLVD
STE 210
SAN MARCOS, CA 92078
Effective as of 01-MAR-24

DIKRANIAN, ARA, MD

Provider ID: N/A

960 W SAN MARCOS BLVD
STE 210
SAN MARCOS, CA 92078
Effective as of 01-MAY-24

ANESTHESIOLOGY

FONTANA, LOUIS, MD†

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-APR-23

CARDIOVASCULAR DISEASE

AIZIN, VITALI, MD†

Provider ID: N/A

4630 BORDER VILLAGE RD
STE H
SAN YSIDRO, CA 92173
Effective as of 01-FEB-21

AIZIN, VITALI, MD†

Provider ID: N/A

4630 BORDER VILLAGE RD
STE H
SAN YSIDRO, CA 92173
Effective as of 01-JAN-21

CERTIFIED NURSE PRACTITIONER

CELIZ, ADRIANA, NP†

Provider ID: N/A

3364 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JAN-21

DRISCOLL, SUSAN, NP†

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JAN-21

HACINAS, REYNALDO, NP†

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JAN-21

KANTAS, PARIS, NP†

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-MAY-22

ROSCOE, SYDNEY, NP

Provider ID: N/A

4050 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-APR-24

SANCHEZ, MYRNA, NP

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JUN-24

VAZQUEZ-ERLBECK, MARTHA,

C1. Lista de proveedores de la red Médico de atención especializada

NP

Provider ID: N/A

3364 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-DEC-21

VAZQUEZ-ERLBECK, MARTHA, NP

Provider ID: N/A

3364 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-MAY-24

FAMILY PRACTICE

ALVAREZ-ESTRADA, MIGUEL, MD†

Provider ID: N/A

4050 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-DEC-22

ARRIETA, NOEMI, DO

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Teleservice
Effective as of 01-APR-23

CORONADO, MYRNA, MD†

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173*
Teleservice
Effective as of 01-APR-23

CORONADO, MYRNA, MD

Provider ID: N/A

4050 BEYER BLVD
SAN YSIDRO, CA 92173*
Teleservice
Effective as of 01-APR-23

DALUGDUGAN, ESTHER, MD

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-NOV-23

ESTRADA, JOHANNA, MD†

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Teleservice
Effective as of 01-JUL-22

POSADA, SEAN, MD

Provider ID: N/A

3364 BEYER BLVD STE
102-103
SAN YSIDRO, CA 92173
Effective as of 01-SEP-24

QURESHI, SOFIA, MD

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JUL-24

ROJAS, SARAH, MD

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JUN-24

SHAHTAJI, ALAN, DO

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JUL-24

STALEY, MICHAELA, MD†

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173*
Effective as of 01-NOV-23

TRAN, KIM, MD

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-SEP-24

INFECTIOUS DISEASE

ALDOUS, JEANNETTE, MD†

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JUL-22

PROMER, KATHERINE, MD†

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-APR-23

INTERNAL MEDICINE

HURST, MICHAEL, DO†

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Teleservice
Effective as of 01-SEP-22

KAUFER, DAVID, MD

Provider ID: N/A

3364 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JUN-24

LAMANTIA, MICHELE, MD

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173*
Effective as of 01-AUG-23

PATEL, BHAVESH, DO

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173*
Effective as of 01-JUN-24

C1. Lista de proveedores de la red Médico de atención especializada

PROMER, KATHERINE, MD†

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-SEP-22

SANCHEZ, LUIS, MD

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-SEP-24

LICENSED CLINICAL SOCIAL WORKER

JENNINGS, AMY, LCSW†

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Teleservice
Effective as of 01-SEP-22

LAD, NIKISHA, LCSW

Provider ID: N/A

1666 PRECISION PARK LN
SAN YSIDRO, CA 92173
Effective as of 01-APR-24

LOPEZ, MARIBEL, LCSW

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-APR-23

MARRIAGE FAMILY THERAPIST

ALVAREZ, IRAIDA, MFT

Provider ID: N/A

1666 PRECISION PARK LN
SAN YSIDRO, CA 92173
Teleservice
Effective as of 01-DEC-22

BALTRUS, JUSTINEANN, MFT

Provider ID: N/A

1666 PRECISION PARK LN
SAN YSIDRO, CA 92173
Teleservice
Effective as of 01-NOV-22

ESTAVILLO, SAUL, MFT

Provider ID: N/A

1666 PRECISION PARK LN
SAN YSIDRO, CA 92173
Effective as of 01-OCT-22

JIMENEZ, NANCY, MFT

Provider ID: N/A

1666 PRECISION PARK LN
SAN YSIDRO, CA 92173
Effective as of 01-FEB-24

NEONATAL / PERINATAL MEDICINE

GOMEZ, DANIELA, MD

Provider ID: N/A

4050 BEYER BLVD
SAN YSIDRO, CA 92173
Teleservice
Effective as of 01-OCT-22

GOMEZ, DANIELA, MD

Provider ID: N/A

4004 BEYER BLVD STE 400
SAN YSIDRO, CA 92173
Teleservice
Effective as of 01-OCT-22

NEPHROLOGY

SOLTERO, RICARDO, MD†

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JAN-21

OBSTETRICS / GYNECOLOGY

BERGGREN, ERICA, MD†

Provider ID: N/A

4050 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-SEP-21

BUTLER, KELLEY, MD

Provider ID: N/A

4050 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-SEP-24

BUTLER, KELLEY, MD

Provider ID: N/A

1666 PRECISION PARK LN
SAN YSIDRO, CA 92173
Effective as of 01-SEP-24

CARR, MIANDA, MD

Provider ID: N/A

4050 BEYER BLVD
SAN YSIDRO, CA 92173*
Effective as of 01-MAY-24

CARR, MIANDA, MD†

Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JAN-21

DANESHMAND, SHAHRAM, MD†

Provider ID: N/A

4050 BEYER BLVD
SAN YSIDRO, CA 92173
Teleservice
Effective as of 01-SEP-21

DANESHMAND, SHAHRAM, MD†

Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

 4050 BEYER BLVD
SAN YSIDRO, CA 92173*

Teleservice

Effective as of 01-JUL-22

DINH, MY, DO†

Provider ID: N/A

 4050 BEYER BLVD
SAN YSIDRO, CA 92173*

Effective as of 01-JUL-22

GOLDSTEIN, EDWARD, MD†

Provider ID: N/A

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

Effective as of 01-JAN-21

MENDEZ, DIEGO, MD†

Provider ID: N/A

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

Teleservice

Effective as of 01-NOV-21

SEO, CHANMEE, MD


Provider ID: N/A

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

Effective as of 01-SEP-24

SEO, CHANMEE, MD

Provider ID: N/A


 1666 PRECISION PARK LN
SAN YSIDRO, CA 92173

Effective as of 01-SEP-24

OCCUPATIONAL THERAPIST

BROWN, JOHNNY, OT

Provider ID: N/A

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

Effective as of 01-JUL-22

PEDIATRICS

DILLON, BENEDICT, MD†

Provider ID: N/A

 4050 BEYER BLVD
SAN YSIDRO, CA 92173*

Effective as of 01-JAN-21

TAYLOR, TASHA, MD†

Provider ID: N/A


 4050 BEYER BLVD
SAN YSIDRO, CA 92173

Effective as of 01-JUL-22

PHYSICIANS ASSISTANT

BUCKNER, JOSEPH, PA


Provider ID: N/A

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

Effective as of 01-FEB-22

HARMIS, NATASHA, PA†

Provider ID: N/A


 3364 BEYER BLVD STE 102
SAN YSIDRO, CA 92173

Teleservice

Effective as of 01-MAY-21

MARTINEZ-MURGUIA, IRENE, PA


Provider ID: N/A

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

Effective as of 01-FEB-24

PORTOMADURSKI, KRISTINE, PA†


Provider ID: N/A

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

Effective as of 01-JAN-21

ROSENBLATT, SHERILYN, PA†


Provider ID: N/A

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

Effective as of 01-JAN-21

SMITH, DOUGLAS, PA†

Provider ID: N/A


 4004 BEYER BLVD
SAN YSIDRO, CA 92173

Teleservice

Effective as of 01-MAY-21

SUNA-SITTO, MOHEEN, PA†

Provider ID: N/A

 3364 BEYER BLVD STE 102
SAN YSIDRO, CA 92173

Teleservice

Effective as of 01-FEB-21

THOMAS, KIMBERLY, PA


Provider ID: N/A

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

Effective as of 01-JUL-24

TRUJILLO, MIGUEL, PA†

Provider ID: N/A


 4004 BEYER BLVD
SAN YSIDRO, CA 92173

Effective as of 01-JAN-21

PODIATRIST

MANCHEL, BRUCE, DPM†


Provider ID: N/A

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

Effective as of 01-JUL-22

MANCHEL, BRUCE, DPM†

Provider ID: N/A

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

Effective as of 01-JAN-21

C1. Lista de proveedores de la red Médico de atención especializada

PSYCHIATRY

BERGGREN, ERICA, MD†

Provider ID: N/A

☒ 4050 BEYER BLVD
SAN YSIDRO, CA 92173*
Effective as of 01-JUL-22

BERGGREN, ERICA, MD†

Provider ID: N/A

☒ 4050 BEYER BLVD
SAN YSIDRO, CA 92173*
Effective as of 01-JUL-22

CRAWFORD-DAY, ANN, MD

Provider ID: N/A

☒ 4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-APR-23

CRAWFORD-DAY, ANN, MD

Provider ID: N/A

☒ 4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-APR-23

FONTANA, LOUIS, MD†

Provider ID: N/A

☒ 4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-APR-23

FONTANA, LOUIS, MD†

Provider ID: N/A

☒ 4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-APR-23

JAMES, CHRISTINE, DO

Provider ID: N/A

☒ 1666 PRECISION PARK LN
SAN YSIDRO, CA 92173
Effective as of 01-FEB-24

JAMES, CHRISTINE, DO

Provider ID: N/A

☒ 1666 PRECISION PARK LN
SAN YSIDRO, CA 92173
Effective as of 01-FEB-24

OJHA, PRITI, MD

Provider ID: N/A

☒ 1666 PRECISION PARK LN
SAN YSIDRO, CA 92173
Effective as of 01-JUN-24

OJHA, PRITI, MD

Provider ID: N/A

☒ 1666 PRECISION PARK LN
SAN YSIDRO, CA 92173
Effective as of 01-JUN-24

REGISTERED PHYSICAL THERAPIST

SALAZAR, SERGIO, PT

Provider ID: N/A

☒ 3364 BEYER BLVD STE 102
SAN YSIDRO, CA 92173
Effective as of 01-AUG-24

RHEUMATOLOGY

LWIN, THUTHIRI, MD

Provider ID: N/A

☒ 4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JUN-24

SPEECH PATHOLOGIST

HILL, CARLA, SP†

Provider ID: N/A

☒ 3364 BEYER BLVD
SAN YSIDRO, CA 92173
Teleservice
Effective as of 01-MAY-22

SURGERY ORTHOPEDIC

ROSENFELD, ALAN, MD†

Provider ID: N/A

☒ 4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JAN-21

UROLOGY

SALEM, CAROL, MD†

Provider ID: N/A

☒ 4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JAN-21

MARRIAGE FAMILY THERAPIST

HAWTHORNE, KAREN, MFT

Provider ID: N/A

☒ 30240 HWY 78
SANTA YSABEL, CA 92070
Teleservice
Effective as of 01-JUL-24

CERTIFIED NURSE PRACTITIONER

LARSON, LINDSAY, NP

Provider ID: N/A

☒ 9325 MISSION GORGE RD
STE 102
SANTEE, CA 92071
Teleservice
Effective as of 01-JUN-24

CHIROPRACTOR

KELCHNER, MATTHEW, DC†

Provider ID: N/A

☒ 120 TOWN CENTER PKWY
SANTEE, CA 92071
Effective as of 01-DEC-22

GASTROENTEROLOGY

C1. Lista de proveedores de la red Médico de atención especializada

REDDY, ANANTHRAM, MD†

Provider ID: N/A

📍 9456 CUYAMACA ST STE
102
SANTEE, CA 92071
Effective as of 01-JAN-21

REDDY, ANANTHRAM, MD†

Provider ID: N/A

📍 9456 CUYAMACA ST STE
102
SANTEE, CA 92071
Effective as of 01-JUL-22

INTERNAL MEDICINE

ALI, ABBAS, MD

Provider ID: N/A

📍 120 TOWN CENTER PKWY
SANTEE, CA 92071
Effective as of 01-SEP-24

CORBIN, DAVID, MD†

Provider ID: N/A

📍 120 TOWN CENTER PKWY
SANTEE, CA 92071
Teleservice
Effective as of 01-NOV-23

LICENSED CLINICAL

SOCIAL WORKER

MEAGHER, RAISHELLE, LCSW

Provider ID: N/A

📍 120 TOWN CENTER PKWY
SANTEE, CA 92071
Teleservice
Effective as of 01-NOV-23

PEDIATRICS

IKE, ERICA, DO†

Provider ID: N/A

📍 120 TOWN CENTER PKWY

SANTEE, CA 92071
Effective as of 01-SEP-24

IKE, ERICA, DO†

Provider ID: N/A

📍 120 TOWN CENTER PKWY
SANTEE, CA 92071
Effective as of 01-JAN-21

PHYSICIANS ASSISTANT

ROSENBLATT, SHERILYN, PA†

Provider ID: N/A

📍 120 TOWN CENTER PKWY
SANTEE, CA 92071
Teleservice
Effective as of 01-OCT-21

PSYCHIATRY

CHAUDHRI, YASHWANT, MD†

Provider ID: N/A

📍 8770 CUYAMACA ST STE 4
SANTEE, CA 92071
Effective as of 01-MAY-22

CHAUDHRI, YASHWANT, MD†

Provider ID: N/A

📍 8770 CUYAMACA ST STE 4
SANTEE, CA 92071
Effective as of 01-MAY-22

PSYCHOLOGIST

ALVAREZ, ILIAN, PSYD

Provider ID: N/A

📍 120 TOWN CENTER PKWY
SANTEE, CA 92071
Teleservice
Effective as of 01-AUG-24

ALVAREZ, ILIAN, PSYD

Provider ID: N/A

📍 120 TOWN CENTER PKWY
SANTEE, CA 92071

Teleservice

Effective as of 01-AUG-24

RADIOLOGY DIAGNOSTIC

MOORE, BRIAN, MD†

Provider ID: N/A

📍 9640 MISSION GORGE RD
STE H
SANTEE, CA 92071
Effective as of 01-JAN-21

VENKATESH, VIJAY, MD†

Provider ID: N/A

📍 9640 MISSION GORGE RD
STE H
SANTEE, CA 92071
Effective as of 01-SEP-22

REGISTERED PHYSICAL THERAPIST

BOUTELLE, BARBARA, PT

Provider ID: N/A

📍 9830 PROSPECT AVE STE A
SANTEE, CA 92071
Effective as of 01-JAN-24

CERTIFIED NURSE PRACTITIONER

LINAMEN, NICHOLA, NP

Provider ID: N/A

📍 380 STEVENS AVE STE 310
SOLANA BEACH, CA 92075
Effective as of 01-JUN-24

DERMATOLOGY

AGUIRRE, KRISTEN, MD†

Provider ID: N/A

📍 530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075

**C1. Lista de proveedores de la red
Médico de atención especializada**

Effective as of 01-JAN-23

AGUIRRE, KRISTEN, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075

Effective as of 01-JUN-22

GILBOA, RUTH, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075

Effective as of 01-JUL-22

GILBOA, RUTH, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR
STE 8
SOLANA BEACH, CA 92075

Effective as of 01-FEB-21

GILBOA, RUTH, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075

Effective as of 01-AUG-08

GILBOA, RUTH, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075

Effective as of 01-JUN-22

ROSS, ANDREW, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075

Effective as of 01-AUG-20

ROSS, ANDREW, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075

Effective as of 01-JUL-22

ROSS, ANDREW, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075

Effective as of 01-JUN-22

SIRICHOTIRATANA, MELISSA, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075

Effective as of 01-JAN-23

THIELE, JENS, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075

Effective as of 01-JUN-22

THIELE, JENS, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075

Effective as of 01-SEP-09

TSE, YARDY, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075

Effective as of 01-JUN-22

VENKAT, ARUN, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR

STE D

SOLANA BEACH, CA 92075

Effective as of 01-MAR-16

VENKAT, ARUN, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075

Effective as of 01-MAR-16

VENKAT, ARUN, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR
STE 8
SOLANA BEACH, CA 92075

Effective as of 01-FEB-21

VENKAT, ARUN, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075

Effective as of 01-JUL-22

ENDOCRINOLOGY

METABOLISM DIABETES

ARGOUD, GEORGES, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR
STE 8
SOLANA BEACH, CA 92075

Effective as of 01-MAR-15

ARGOUD, GEORGES, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR
STE 8
SOLANA BEACH, CA 92075

Effective as of 01-MAR-15

ARGOUD, GEORGES, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR

C1. Lista de proveedores de la red Médico de atención especializada

STE 8
SOLANA BEACH, CA 92075
Effective as of 01-JAN-21

ARGOUD, GEORGES, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR
STE 8
SOLANA BEACH, CA 92075
Effective as of 01-JUL-22

ARGOUD, GEORGES, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR
STE 8
SOLANA BEACH, CA 92075*
Effective as of 01-JAN-24

ARGOUD, GEORGES, MD†

Provider ID: N/A

530 LOMAS SANTA FE DR
STE 8
SOLANA BEACH, CA 92075
Effective as of 01-JAN-21

PHYSICIANS ASSISTANT

BOYDSTON, EMILY, PA

Provider ID: N/A

380 STEVENS AVE STE 310
SOLANA BEACH, CA 92075
Teleservice
Effective as of 01-APR-24

GIBSON, JULIA, PA

Provider ID: N/A

380 STEVENS AVE STE 310
SOLANA BEACH, CA 92075
Effective as of 01-MAY-23

LEE, MYUNGHEE, PA

Provider ID: N/A

530 LOMAS SANTA FE DR
STE 8
SOLANA BEACH, CA 92075

Teleservice

Effective as of 01-NOV-23

ROBINSON, JENELLE, PA

Provider ID: N/A

530 LOMAS SANTA FE DR
STE 8
SOLANA BEACH, CA 92075
Effective as of 01-NOV-23

CERTIFIED NURSE PRACTITIONER

CISTRONE, MONICA, NPF

Provider ID: N/A

9239 CAMPO RD STE A
SPRING VALLEY, CA 91977

Teleservice

Effective as of 01-JUL-23

GORDON, DANIELLE, NP†

Provider ID: N/A

9239 CAMPO RD STE A
SPRING VALLEY, CA 91977

Teleservice

Effective as of 01-MAR-22

ALLERGY IMMUNOLOGY

BROWN, HOSEA, MD†

Provider ID: N/A

26960 CHERRY HILLS
BLVD STE D
SUN CITY, CA 92586
Effective as of 01-FEB-22

AUDIOLOGIST

ACEVEDO-FREY, SYLVIA, AuD

Provider ID: N/A

28071 BRADLEY RD
SUN CITY, CA 92586
Effective as of 01-JUN-23

CARDIOVASCULAR DISEASE

AGGARWAL, SAURABH, MD†

Provider ID: N/A

26962 CHERRY HILLS
BLVD STE A
SUN CITY, CA 92586
Effective as of 01-DEC-21

SARSAM, SINAN, MD†

Provider ID: N/A

26960 CHERRY HILLS
BLVD STE C
SUN CITY, CA 92586
Effective as of 01-JUN-21

CERTIFIED NURSE PRACTITIONER

SHIH, LU-HSUN, NP

Provider ID: N/A

26960 CHERRY HILLS
BLVD STE A
SUN CITY, CA 92586
Effective as of 01-APR-24

GASTROENTEROLOGY

RAGHUWANSHI, NAISHADH, MD†

Provider ID: N/A

26960 CHERRY HILLS
BLVD
SUN CITY, CA 92586
Effective as of 01-SEP-09

RAGHUWANSHI, NAISHADH, MD†

Provider ID: N/A

26960 CHERRY HILLS
BLVD
SUN CITY, CA 92586
Effective as of 01-FEB-11

**C1. Lista de proveedores de la red
Médico de atención especializada**

**MARRIAGE FAMILY
THERAPIST**

PORTER, TERRY, MFT†

Provider ID: N/A

28125 BRADLEY RD STE 220
SUN CITY, CA 92586

Effective as of 01-JAN-23

PORTER, TERRY, MFT†

Provider ID: N/A

28125 BRADLEY RD STE 220
SUN CITY, CA 92586

Effective as of 01-JAN-23

NEPHROLOGY

ISHAK, SALAM, MD†

Provider ID: N/A

28125 BRADLEY RD STE 270
SUN CITY, CA 92586

Effective as of 01-SEP-12

ISHAK, SALAM, MD†

Provider ID: N/A

28125 BRADLEY RD STE 270
SUN CITY, CA 92586

Effective as of 01-JUN-12

OPHTHALMOLOGY

JACOBSON, ARTHUR, MD†

Provider ID: N/A

29826 HAUN RD STE 100
SUN CITY, CA 92586

Effective as of 01-JUL-23

LEE, JOHN, MD†

Provider ID: N/A

28125 BRADLEY RD STE 189
SUN CITY, CA 92586

Effective as of 01-FEB-11

OPTOMETRIST

LANE, KEVIN, OD†

Provider ID: N/A

29826 HAUN RD STE 100
SUN CITY, CA 92586

Effective as of 01-JUL-23

RADIOLOGY DIAGNOSTIC

BURROUGHS, GLORIA, MD†

Provider ID: N/A

26870 CHERRY HILLS
BLVD
SUN CITY, CA 92586

Effective as of 01-OCT-17

BURROUGHS, GLORIA, MD†

Provider ID: N/A

26870 CHERRY HILLS
BLVD
SUN CITY, CA 92586

Effective as of 01-OCT-17

BURROUGHS, GLORIA, MD†

Provider ID: N/A

26870 CHERRY HILLS
BLVD
SUN CITY, CA 92586

Effective as of 01-OCT-17

GRIFFETH, BRADLEY, MD

Provider ID: N/A

26870 CHERRY HILLS
BLVD
SUN CITY, CA 92586

Effective as of 01-SEP-24

GRIFFETH, BRADLEY, MD

Provider ID: N/A

26870 CHERRY HILLS
BLVD
SUN CITY, CA 92586

Effective as of 01-SEP-24

GRIFFETH, BRADLEY, MD

Provider ID: N/A

26870 CHERRY HILLS
BLVD
SUN CITY, CA 92586

Effective as of 01-SEP-24

GRIFFETH, BRADLEY, MD

Provider ID: N/A

26870 CHERRY HILLS
BLVD
SUN CITY, CA 92586

Effective as of 01-SEP-24

ALLERGY IMMUNOLOGY

GUPTA, SAMEER, MD†

Provider ID: N/A

41715 WINCHESTER RD STE
206
TEMECULA, CA 92590

Effective as of 01-DEC-21

GUPTA, SAMEER, MD†

Provider ID: N/A

41715 WINCHESTER RD STE
206
TEMECULA, CA 92590

Effective as of 01-JAN-16

GUPTA, SAMEER, MD†

Provider ID: N/A

41715 WINCHESTER RD STE
206
TEMECULA, CA 92590

Effective as of 01-JUL-23

GUPTA, SAMEER, MD†

Provider ID: N/A

41715 WINCHESTER RD STE
206
TEMECULA, CA 92590

Effective as of 01-FEB-15

ANESTHESIOLOGY

**C1. Lista de proveedores de la red
Médico de atención especializada**

DORAISWAMY, ARUL, MD†

Provider ID: N/A

28975 OLD TOWN FRONT
ST STE 200
TEMECULA, CA 92590
Effective as of 01-JUL-17

DORAISWAMY, ARUL, MD†

Provider ID: N/A

28975 OLD TOWN FRONT
ST STE 200
TEMECULA, CA 92590
Effective as of 01-JUL-17

GUIANG, RAINIER, MD†

Provider ID: N/A

27450 YNEZ RD STE 128
TEMECULA, CA 92591
Effective as of 01-SEP-19

HYUN, SUZANNE, MD

Provider ID: N/A

27450 YNEZ RD STE 128
TEMECULA, CA 92591
Effective as of 01-MAR-24

JEDAMSKI, WALDTRAUT, MD

Provider ID: N/A

28975 OLD TOWN FRONT
ST STE 200
TEMECULA, CA 92590
Effective as of 01-OCT-19

KANU, ABDUL, MD

Provider ID: N/A

27699 JEFFERSON AVE
TEMECULA, CA 92590
Teleservice
Effective as of 01-AUG-20

PANG, GARY, MD†

Provider ID: N/A

27450 YNEZ RD STE 128
TEMECULA, CA 92591
Effective as of 01-MAR-24

**ANESTHESIOLOGY PAIN
MANAGEMENT**

CHEN, HAMILTON, MD†

Provider ID: N/A

27450 YNEZ RD STE 128
TEMECULA, CA 92591
Effective as of 01-SEP-19

CHEN, HAMILTON, MD†

Provider ID: N/A

27450 YNEZ RD STE 128
TEMECULA, CA 92591
Effective as of 01-SEP-19

CHEN, HAMILTON, MD

Provider ID: N/A

27450 YNEZ RD STE 202
TEMECULA, CA 92591
Effective as of 01-SEP-23

DADACHANJI, CYRUS, MD

Provider ID: N/A

27699 JEFFERSON AVE STE
305
TEMECULA, CA 92590
Effective as of 01-JUL-23

DORAISWAMY, ARUL, MD†

Provider ID: N/A

28975 OLD TOWN FRONT
ST STE 200
TEMECULA, CA 92590
Effective as of 01-JUL-17

GUIANG, RAINIER, MD

Provider ID: N/A

27450 YNEZ RD STE 202
TEMECULA, CA 92591
Effective as of 01-SEP-23

GUIANG, RAINIER, MD†

Provider ID: N/A

27450 YNEZ RD STE 128

TEMECULA, CA 92591
Effective as of 01-MAR-24

GUIANG, RAINIER, MD†

Provider ID: N/A

27450 YNEZ RD STE 128
TEMECULA, CA 92591
Effective as of 01-JUL-24

HYUN, SUZANNE, MD

Provider ID: N/A

27450 YNEZ RD STE 128
TEMECULA, CA 92591
Effective as of 01-JUL-24

LEIER, TIM, MD

Provider ID: N/A

27699 JEFFERSON AVE STE
201
TEMECULA, CA 92590
Effective as of 01-MAY-18

LEIER, TIM, MD

Provider ID: N/A

27699 JEFFERSON AVE STE
201
TEMECULA, CA 92590
Effective as of 01-SEP-19

**MOELLER-BERTRAM, TOBIAS,
MD†**

Provider ID: N/A

27699 JEFFERSON AVE STE
201
TEMECULA, CA 92590
Effective as of 01-JUN-18

PANG, GARY, MD†

Provider ID: N/A

27450 YNEZ RD STE 128
TEMECULA, CA 92591
Effective as of 01-JUL-24

**CARDIOVASCULAR
DISEASE**

**C1. Lista de proveedores de la red
Médico de atención especializada**

ALFAY, WISAM, MD

Provider ID: N/A

28780 SINGLE OAK DR STE 290

TEMECULA, CA 92590

Effective as of 01-JAN-22

ALFAY, WISAM, MD

Provider ID: N/A

27450 YNEZ RD STE 109
TEMECULA, CA 92591

Effective as of 01-MAR-22

AMIN, JATIN, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 103

TEMECULA, CA 92592

Effective as of 01-JUN-23

ATTIA, NADER, DO†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 103

TEMECULA, CA 92592

Effective as of 01-JUN-23

ATTIA, NADER, DO†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 103

TEMECULA, CA 92592

Effective as of 01-AUG-24

ATTIA, NADER, DO†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 103

TEMECULA, CA 92592

Effective as of 01-JUL-22

ATTIA, NADER, DO†

Provider ID: N/A

31515 RANCHO PUEBLO RD

STE 103

TEMECULA, CA 92592

Effective as of 01-JUN-23

BISWAS, MIMI, MD

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 103

TEMECULA, CA 92592

Effective as of 01-JUN-23

COX, JEREMY, DO

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 103

TEMECULA, CA 92592

Effective as of 01-MAR-24

COX, JEREMY, DO

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 103

TEMECULA, CA 92592

Effective as of 01-MAR-24

MAPLETON, SHARINA, DO

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590*

Effective as of 01-NOV-24

PATANKAR, KAUSTUBH, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 103

TEMECULA, CA 92592

Effective as of 01-FEB-22

SANGODKAR, SANDEEP, DO

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 103

TEMECULA, CA 92592

Effective as of 01-JUN-23

SARSAM, SINAN, MD†

Provider ID: N/A

27450 YNEZ RD STE 109
TEMECULA, CA 92591

Effective as of 01-MAR-22

SARSAM, SINAN, MD†

Provider ID: N/A

27450 YNEZ RD STE 109
TEMECULA, CA 92591

Effective as of 01-MAR-22

CERTIFIED

ACUPUNCTURIST

LEE, KYUNG HAN, LAC

Provider ID: N/A

27455 TIERRA ALTA WAY
STE A

TEMECULA, CA 92590

Effective as of 01-MAR-21

LEE, KYUNG HAN, LAC

Provider ID: N/A

27455 TIERRA ALTA WAY
STE A

TEMECULA, CA 92590

Effective as of 01-MAR-21

WACHNER, KRISTELYN, LAC†

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590

Effective as of 01-OCT-22

WACHNER, KRISTELYN, LAC†

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590

Effective as of 01-OCT-22

CERTIFIED NURSE

PRACTITIONER

**C1. Lista de proveedores de la red
Médico de atención especializada**

AGORRILLA, MARIA, NP

Provider ID: N/A

44274 GEORGE CUSHMAN
CT STE 212
TEMECULA, CA 92592
Effective as of 01-OCT-23

ALVAREZ, ARMANDA, NP

Provider ID: N/A

27555 YNEZ RD STE 102
TEMECULA, CA 92591
Effective as of 01-FEB-24

BEDFORD, RONALD, NP†

Provider ID: N/A

44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592
Effective as of 01-SEP-22

BEDFORD, RONALD, NP†

Provider ID: N/A

44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592
Effective as of 01-MAY-22

BEDFORD, RONALD, NP†

Provider ID: N/A

44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592
Effective as of 01-MAY-22

BEDFORD, RONALD, NP†

Provider ID: N/A

44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592
Effective as of 01-SEP-22

BEDFORD, RONALD, NP†

Provider ID: N/A

44605 AVENIDA DE
MISSIONES STE 202

TEMECULA, CA 92592
Effective as of 01-MAY-22

DONLON, RYAN, NPF

Provider ID: N/A

31150 TEMECULA PKWY
TEMECULA, CA 92592
Effective as of 01-MAR-24

DONLON, RYAN, NPF

Provider ID: N/A

31150 TEMECULA PKWY
TEMECULA, CA 92592
Effective as of 01-MAR-24

DONLON, RYAN, NPF

Provider ID: N/A

31150 TEMECULA PKWY
TEMECULA, CA 92592
Effective as of 01-MAR-24

DONLON, RYAN, NPF

Provider ID: N/A

31150 TEMECULA PKWY
TEMECULA, CA 92592
Effective as of 01-MAR-24

GEISINGER, TERESA, NP

Provider ID: N/A

31625 DE PORTOLA RD STE
101
TEMECULA, CA 92592
Effective as of 01-APR-23

HARTMAN, JULIE, NPF

Provider ID: N/A

31170 TEMECULA PKWY
STE 100
TEMECULA, CA 92592
Effective as of 01-SEP-23

HASAN, BUSHRA, NP

Provider ID: N/A

31170 TEMECULA PKWY
STE 100

TEMECULA, CA 92592
Effective as of 01-OCT-22

HLAVAC, SANDRA, NP

Provider ID: N/A

31625 DE PORTOLA RD STE
101
TEMECULA, CA 92592
Effective as of 01-APR-24

HLAVAC, SANDRA, NP

Provider ID: N/A

31625 DE PORTOLA RD STE
101
TEMECULA, CA 92592
Effective as of 01-JUN-24

HUERTA, CARMEN, NP†

Provider ID: N/A

44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592
Effective as of 01-DEC-22

HUERTA, CARMEN, NP†

Provider ID: N/A

44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592
Effective as of 01-OCT-22

LIRA, SHANNON, NPF

Provider ID: N/A

31625 DE PORTOLA RD STE
101
TEMECULA, CA 92592
Effective as of 01-FEB-24

LIRA, SHANNON, NPF

Provider ID: N/A

31625 DE PORTOLA RD STE
101
TEMECULA, CA 92592
Effective as of 01-JUL-24

C1. Lista de proveedores de la red Médico de atención especializada

LUCACI, BIANCA, NP

Provider ID: N/A

27555 YNEZ RD STE 400
TEMECULA, CA 92591

Effective as of 01-SEP-22

ONUOHA, NOJA, NP†

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591*

Effective as of 01-NOV-22

ONUOHA, NOJA, NP†

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591*

Effective as of 01-NOV-22

SMITH, PAIGE, NP

Provider ID: N/A

27555 YNEZ RD STE 400
TEMECULA, CA 92591

Effective as of 01-OCT-23

THOMASII, STEPHEN, NPF†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592

Effective as of 01-OCT-23

THOMASII, STEPHEN, NPF†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592

Effective as of 01-AUG-22

THOMASII, STEPHEN, NPF†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592

Effective as of 01-MAR-21

VAHDAT, VALERIE, NP

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590

Effective as of 01-JUN-24

ZELEDON, JAIME, NP

Provider ID: N/A

27699 JEFFERSON AVE STE
201
TEMECULA, CA 92590

Effective as of 01-MAY-18

CHIROPRACTOR

BARTZ, PAUL, DC†

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590

Effective as of 01-JUL-22

FARSHLER, ANTHONY, DC†

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590

Effective as of 01-NOV-23

FARSHLER, ANTHONY, DC†

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590

Effective as of 01-JUL-22

MYREN, DONALD, DC

Provider ID: N/A

26790 YNEZ CT STE 2B
TEMECULA, CA 92591

Effective as of 01-JUN-23

MYREN, DONALD, DC

Provider ID: N/A

26790 YNEZ CT STE 2B
TEMECULA, CA 92591

Effective as of 01-JUN-23

DERMATOLOGY

ABAZA, SAM, MD

Provider ID: N/A

30589 TEMECULA PKWY
TEMECULA, CA 92592

Effective as of 01-JUL-24

AWADALLA, FARAH, MD

Provider ID: N/A

30589 TEMECULA PKWY
TEMECULA, CA 92592

Effective as of 01-JUL-24

BROWN, REGINA, MD

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 102
TEMECULA, CA 92592

Effective as of 01-AUG-24

CABRAL, ERIK, MD

Provider ID: N/A

30589 TEMECULA PKWY
TEMECULA, CA 92592

Effective as of 01-JUL-24

DRAYER, JEFFREY, MD

Provider ID: N/A

30589 TEMECULA PKWY
TEMECULA, CA 92592

Effective as of 01-JUL-24

JACOBS, RANDOLPH, MD

Provider ID: N/A

40971 WINCHESTER RD
TEMECULA, CA 92591

Effective as of 01-DEC-18

JACOBS, RANDOLPH, MD

Provider ID: N/A

40971 WINCHESTER RD
TEMECULA, CA 92591

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-AUG-24

JACOBS, RANDOLPH, MD

Provider ID: N/A

40971 WINCHESTER RD
TEMECULA, CA 92591

Effective as of 01-AUG-24

KHERADMAND, SHIVA, DO†

Provider ID: N/A

44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592

Effective as of 01-DEC-21

KHERADMAND, SHIVA, DO†

Provider ID: N/A

44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592

Effective as of 01-DEC-21

KHERADMAND, SHIVA, DO†

Provider ID: N/A

44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592

Effective as of 01-DEC-21

KHERADMAND, SHIVA, DO†

Provider ID: N/A

44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592

Effective as of 01-APR-22

KHERADMAND, SHIVA, DO†

Provider ID: N/A

44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592

Effective as of 01-JAN-22

KHERADMAND, SHIVA, DO†

Provider ID: N/A

44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592

Effective as of 01-APR-22

KOUPAIE, JAFAR, MD

Provider ID: N/A

31150 TEMECULA PKWY
STE 104
TEMECULA, CA 92592

Effective as of 01-MAY-24

KOUPAIE, JAFAR, MD

Provider ID: N/A

31150 TEMECULA PKWY
STE 104
TEMECULA, CA 92592

Effective as of 01-JUL-24

MEHDI, RAZA, MD

Provider ID: N/A

30589 TEMECULA PKWY
TEMECULA, CA 92592

Effective as of 01-JUL-24

MITCHELL, JESSE, MD†

Provider ID: N/A

31150 TEMECULA PKWY
STE 104
TEMECULA, CA 92592

Effective as of 01-JUL-24

MITCHELL, JESSE, MD†

Provider ID: N/A

31150 TEMECULA PKWY
STE 104
TEMECULA, CA 92592

Effective as of 01-JUL-21

MITCHELL, JESSE, MD†

Provider ID: N/A

31150 TEMECULA PKWY
STE 104
TEMECULA, CA 92592

Effective as of 01-JUL-21

MITCHELL, JESSE, MD†

Provider ID: N/A

31150 TEMECULA PKWY
STE 104
TEMECULA, CA 92592

Effective as of 01-OCT-20

MITCHELL, JESSE, MD†

Provider ID: N/A

31150 TEMECULA PKWY
STE 104
TEMECULA, CA 92592

Effective as of 01-FEB-22

MITCHELL, JESSE, MD†

Provider ID: N/A

31150 TEMECULA PKWY
STE 104
TEMECULA, CA 92592

Effective as of 01-OCT-20

MITCHELL, JESSE, MD†

Provider ID: N/A

31150 TEMECULA PKWY
STE 104
TEMECULA, CA 92592

Effective as of 01-OCT-20

MITCHELL, JESSE, MD†

Provider ID: N/A

31150 TEMECULA PKWY
STE 104
TEMECULA, CA 92592

Effective as of 01-OCT-20

ROSS, ANDREW, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 102
TEMECULA, CA 92592

Effective as of 01-JUL-22

SAIED, NAGI, MD

Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

44605 AVENIDA DE
MISSIONES STE 202
TEMECULA, CA 92592

Teleservice

Effective as of 01-NOV-23

SHAPIRO, STEVEN, MD

Provider ID: N/A

30589 TEMECULA PKWY
TEMECULA, CA 92592

Effective as of 01-JUL-24

WINKELMANN, RICHARD, DO

Provider ID: N/A

30589 TEMECULA PKWY
TEMECULA, CA 92592

Effective as of 01-JUL-24

EMERGENCY MEDICINE

ELLIS, JOHN, MD†

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591

Effective as of 01-SEP-22

WARD, NICHOLAS, MD†

Provider ID: N/A

31700 TEMECULA PKWY
TEMECULA, CA 92592

Effective as of 01-MAR-21

WARD, NICHOLAS, MD†

Provider ID: N/A

31700 TEMECULA PKWY
TEMECULA, CA 92592

Effective as of 01-MAR-21

WARD, NICHOLAS, MD†

Provider ID: N/A

31700 TEMECULA PKWY
TEMECULA, CA 92592

Effective as of 01-MAR-21

ENDOCRINOLOGY

METABOLISM DIABETES

JOO, KATHY, MD†

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 134
TEMECULA, CA 92591

Effective as of 01-JUL-23

JOO, KATHY, MD†

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 134
TEMECULA, CA 92591

Effective as of 01-JUN-16

JOO, KATHY, MD†

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 134
TEMECULA, CA 92591

Effective as of 01-JUN-16

JOO, KATHY, MD†

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 134
TEMECULA, CA 92591

Effective as of 01-JUN-16

JOU, BILL, MD

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 205
TEMECULA, CA 92592

Teleservice

Effective as of 01-FEB-17

JOU, BILL, MD

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 205
TEMECULA, CA 92592

Teleservice

Effective as of 01-FEB-17

FAMILY PRACTICE

ZURITA, DANIELA, MD†

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590

Effective as of 01-SEP-24

FAMILY PRACTICE

SPORTS MEDICINE

CHEUNG, SUNNY, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270

TEMECULA, CA 92590

Effective as of 01-FEB-23

CHEUNG, SUNNY, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270

TEMECULA, CA 92590

Effective as of 01-FEB-23

CHEUNG, SUNNY, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270

TEMECULA, CA 92590

Effective as of 01-FEB-23

CHEUNG, SUNNY, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270

TEMECULA, CA 92590

Effective as of 01-FEB-23

GASTROENTEROLOGY

ARDIGO, GREGORY, MD

Provider ID: N/A

29645 RANCHO

C1. Lista de proveedores de la red Médico de atención especializada

CALIFORNIA RD STE 209
TEMECULA, CA 92591
Effective as of 01-AUG-23

DINH, JACK, MD

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 209
TEMECULA, CA 92591
Effective as of 01-AUG-23

KEMMERLY, THOMAS, MD

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 209
TEMECULA, CA 92591
Effective as of 01-AUG-23

SAUNDERS, ANGELA, DO†

Provider ID: N/A

31625 DE PORTOLA RD
SUITE 101
TEMECULA, CA 92592
Effective as of 01-MAR-24

SAUNDERS, ANGELA, DO†

Provider ID: N/A

31625 DE PORTOLA RD
SUITE 101
TEMECULA, CA 92592
Effective as of 01-MAY-23

SAUNDERS, ANGELA, DO†

Provider ID: N/A

31625 DE PORTOLA RD
SUITE 101
TEMECULA, CA 92592
Effective as of 01-DEC-22

SAUNDERS, ANGELA, DO†

Provider ID: N/A

31625 DE PORTOLA RD
SUITE 101
TEMECULA, CA 92592
Effective as of 01-NOV-23

TEYMOORIAN, ARIAN, MD

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 209
TEMECULA, CA 92591
Effective as of 01-AUG-23

HEMATOLOGY / ONCOLOGY

ANDREY, JEFFREY, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 202
TEMECULA, CA 92592
Effective as of 01-JUL-24

BASERI, BABAK, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 202
TEMECULA, CA 92592
Effective as of 01-APR-24

BASERI, BABAK, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 202
TEMECULA, CA 92592
Effective as of 01-JUL-24

BASERI, BABAK, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 202
TEMECULA, CA 92592
Effective as of 01-JUL-21

BASERI, BABAK, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 202
TEMECULA, CA 92592
Effective as of 01-JUL-21

SAUNDERS, PHILLIP, DO†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 202
TEMECULA, CA 92592
Effective as of 01-DEC-20

SAUNDERS, PHILLIP, DO†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 202
TEMECULA, CA 92592
Effective as of 01-APR-20

SAUNDERS, PHILLIP, DO†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 202
TEMECULA, CA 92592
Effective as of 01-JUL-24

SCHWERKOSKE, JOHN, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 202
TEMECULA, CA 92592
Effective as of 01-MAY-22

INTERNAL MEDICINE

AL HARASH, ABDALHAMID, MD†

Provider ID: N/A

31565 RANCHO PUEBLO
RD STE 205
TEMECULA, CA 92592
Effective as of 01-OCT-22

AL HARASH, ABDALHAMID, MD†

Provider ID: N/A

31565 RANCHO PUEBLO
RD STE 205
TEMECULA, CA 92592

**C1. Lista de proveedores de la red
Médico de atención especializada**

Effective as of 01-OCT-22

AL HARASH, ABDALHAMID, MD†

Provider ID: N/A

31565 RANCHO PUEBLO RD STE 205
TEMECULA, CA 92592

Effective as of 01-OCT-22

ALTRIKI, MOHAMAD, MD†

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 201
TEMECULA, CA 92592

Effective as of 01-OCT-20

ALTRIKI, MOHAMAD, MD†

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 201
TEMECULA, CA 92592

Effective as of 01-OCT-20

ALTRIKI, MOHAMAD, MD†

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 201
TEMECULA, CA 92592

Effective as of 01-NOV-20

ALTRIKI, MOHAMAD, MD†

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 201
TEMECULA, CA 92592

Effective as of 01-NOV-20

ALTRIKI, MOHAMAD, MD†

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 201
TEMECULA, CA 92592

Effective as of 01-JAN-22

ALTRIKI, MOHAMAD, MD†

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 201
TEMECULA, CA 92592

Effective as of 01-MAR-21

AMIN, SAJNI, MD

Provider ID: N/A

31625 DE PORTOLA RD STE 101
TEMECULA, CA 92592

Effective as of 01-JUL-24

COX, JEREMY, DO

Provider ID: N/A

31515 RANCHO PUEBLO RD STE 103
TEMECULA, CA 92592

Effective as of 01-JUN-23

HADDADIN, HASSAN, MD†

Provider ID: N/A

27699 JEFFERSON AVE STE 204
TEMECULA, CA 92590

Effective as of 01-SEP-22

HADDADIN, HASSAN, MD†

Provider ID: N/A

27699 JEFFERSON AVE STE 204
TEMECULA, CA 92590

Effective as of 01-SEP-22

HADDADIN, HASSAN, MD†

Provider ID: N/A

27699 JEFFERSON AVE STE 204
TEMECULA, CA 92590

Effective as of 01-SEP-22

JACOBS, NATALIA, MD

Provider ID: N/A

40971 WINCHESTER RD

TEMECULA, CA 92591

Effective as of 01-MAY-23

QUACH, DUC, MD

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 201
TEMECULA, CA 92592

Effective as of 01-SEP-24

QUACH, DUC, MD

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 201
TEMECULA, CA 92592

Effective as of 01-SEP-24

QUACH, DUC, MD

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 201
TEMECULA, CA 92592

Effective as of 01-SEP-24

QUACH, DUC, MD

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 201
TEMECULA, CA 92592

Effective as of 01-SEP-24

WHITE, XUANHA, DO†

Provider ID: N/A

44605 AVENIDA DE MISSIONES STE 206
TEMECULA, CA 92592

Effective as of 01-FEB-22

YU, JERRY, MD†

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 201
TEMECULA, CA 92592

Effective as of 01-DEC-23

**C1. Lista de proveedores de la red
Médico de atención especializada**

YU, JERRY, MD†

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 201
TEMECULA, CA 92592
Effective as of 01-AUG-18

YU, JERRY, MD†

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 201
TEMECULA, CA 92592
Effective as of 01-MAR-21

YU, JERRY, MD†

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 201
TEMECULA, CA 92592
Effective as of 01-JUL-18

YU, JERRY, MD†

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 201
TEMECULA, CA 92592
Effective as of 01-JUL-18

**INTERNAL MEDICINE
CRITICAL CARE MEDICINE**

SALEK, MUNIF, MD†

Provider ID: N/A

27699 JEFFERSON AVE STE 204
TEMECULA, CA 92590
Effective as of 01-FEB-22

SALEK, MUNIF, MD†

Provider ID: N/A

27699 JEFFERSON AVE STE 204
TEMECULA, CA 92590
Effective as of 01-FEB-22

SALEK, MUNIF, MD†

Provider ID: N/A

27699 JEFFERSON AVE STE 204
TEMECULA, CA 92590
Effective as of 01-FEB-22

VEGA, RICARDO, MD†

Provider ID: N/A

27699 JEFFERSON AVE STE 204
TEMECULA, CA 92590
Effective as of 01-JAN-22

VEGA, RICARDO, MD†

Provider ID: N/A

27699 JEFFERSON AVE STE 204
TEMECULA, CA 92590
Effective as of 01-MAR-22

**INTERVENTIONAL
CARDIOLOGY**

MESSENGER, BRADLEY, MD

Provider ID: N/A

31515 RANCHO PUEBLO RD STE 103
TEMECULA, CA 92592
Effective as of 01-JUN-23

PATANKAR, KAUSTUBH, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD STE 103
TEMECULA, CA 92592
Effective as of 01-JUN-23

SEAMAN, CHRISTOPHER, MD

Provider ID: N/A

31515 RANCHO PUEBLO RD STE 103
TEMECULA, CA 92592
Effective as of 01-JUN-23

**LICENSED CLINICAL
SOCIAL WORKER**

**CARTWRIGHT, SHANIQUA,
LCSW**

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-NOV-23

JONES, VALORIA, LCSW

Provider ID: N/A

29645 RANCHO CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-JUL-23

JONES, VALORIA, LCSW

Provider ID: N/A

29645 RANCHO CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-JUL-23

JONES, VALORIA, LCSW

Provider ID: N/A

29645 RANCHO CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-JUL-23

**LURINKS GARCIA, MARIA,
LCSW**

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-JAN-21

ONEILL, ANDREW, LCSW

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 102
TEMECULA, CA 92592
Effective as of 01-JUL-24

**C1. Lista de proveedores de la red
Médico de atención especializada**

ROBLEDO, DAMIAN, LCSW

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-APR-23

THOMAS, PAULA, LCSW

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-APR-23

**VALDEZ-HERNANDEZ, ISRAEL,
LCSW†**

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-JAN-23

**VALDEZ-HERNANDEZ, ISRAEL,
LCSW†**

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-APR-23

**VALDEZ-HERNANDEZ, ISRAEL,
LCSW†**

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-APR-23

**VALDEZ-HERNANDEZ, ISRAEL,
LCSW†**

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-JAN-23

MEDICAL ONCOLOGY

BENDER, RICHARD, MD

Provider ID: N/A

27450 YNEZ RD STE 116
TEMECULA, CA 92591
Effective as of 01-JUL-24

BENDER, RICHARD, MD

Provider ID: N/A

27450 YNEZ RD STE 116
TEMECULA, CA 92591
Effective as of 01-JUL-24

SHAIKH, ANWER, MD

Provider ID: N/A

27450 YNEZ RD STE 116
TEMECULA, CA 92591
Effective as of 01-JUL-24

NEPHROLOGY

ALTRIKI, MOHAMAD, MD†

Provider ID: N/A

31565 RANCHO PUEBLO
RD STE 205
TEMECULA, CA 92592
Effective as of 01-JAN-20

CHANG, DAVID, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-DEC-23

CHANG, DAVID, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-DEC-23

CHANG, DAVID, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-DEC-23

CHANG, DAVID, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-APR-15

CHANG, DAVID, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-DEC-23

CHANG, DAVID, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-MAY-23

CHANG, DAVID, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-MAY-23

CHANG, DAVID, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592
Effective as of 01-JUL-23

NANDI, SHANKHA, DO†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592

C1. Lista de proveedores de la red Médico de atención especializada

Effective as of 01-AUG-20

NANDI, SHANKHA, DO†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592

Effective as of 01-DEC-23

NANDI, SHANKHA, DO†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592

Effective as of 01-DEC-23

NANDI, SHANKHA, DO†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592

Effective as of 01-DEC-23

NANDI, SHANKHA, DO†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592

Effective as of 01-DEC-23

NANDI, SHANKHA, DO†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592

Effective as of 01-JUN-23

NANDI, SHANKHA, DO†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592

Effective as of 01-MAR-21

YAN, ERIC, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592

Teleservice

Effective as of 01-MAY-20

YAN, ERIC, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592

Teleservice

Effective as of 01-JUL-23

YAN, ERIC, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592

Teleservice

Effective as of 01-JUL-23

YAN, ERIC, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592

Teleservice

Effective as of 01-JUL-18

YAN, ERIC, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592

Teleservice

Effective as of 01-JUL-18

YAN, ERIC, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 201
TEMECULA, CA 92592

Teleservice

Effective as of 01-JUL-18

NEUROLOGY

CHOUDRY, BILAL, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 104
TEMECULA, CA 92592

Effective as of 01-MAY-23

CHOUDRY, BILAL, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 104
TEMECULA, CA 92592

Effective as of 01-JUN-21

DELANEY, MICHAEL, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 104
TEMECULA, CA 92592

Teleservice

Effective as of 01-OCT-21

DELANEY, MICHAEL, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 104
TEMECULA, CA 92592

Teleservice

Effective as of 01-MAR-21

DELANEY, MICHAEL, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 104
TEMECULA, CA 92592

Teleservice

Effective as of 01-MAY-23

FARHIDVASH, FARIBA, MD†

Provider ID: N/A

**C1. Lista de proveedores de la red
Médico de atención especializada**

<p>☐ 44045 MARGARITA RD STE 106 TEMECULA, CA 92592 Effective as of 01-NOV-22</p> <p>FARNSWORTH, WILLIAM, MD Provider ID: N/A</p> <p>☐ 31515 RANCHO PUEBLO RD STE 104 TEMECULA, CA 92592 Effective as of 01-AUG-24</p> <p>FARNSWORTH, WILLIAM, MD Provider ID: N/A</p> <p>☐ 31515 RANCHO PUEBLO RD STE 104 TEMECULA, CA 92592 Effective as of 01-AUG-24</p> <p>GRATIANNE, ROBERTO, MD† Provider ID: N/A</p> <p>☐ 44045 MARGARITA RD STE 106 TEMECULA, CA 92592 Effective as of 01-JUN-22</p> <p>GUPTA, MONIKA, MD† Provider ID: N/A</p> <p>☐ 44045 MARGARITA RD STE 106 TEMECULA, CA 92592 Effective as of 01-OCT-19</p> <p>HALL, JACOB, MD† Provider ID: N/A</p> <p>☐ 31515 RANCHO PUEBLO RD STE 104 TEMECULA, CA 92592 Effective as of 01-OCT-21</p> <p>HALL, JACOB, MD† Provider ID: N/A</p> <p>☐ 31515 RANCHO PUEBLO RD STE 104 TEMECULA, CA 92592</p>	<p>Effective as of 01-MAY-23</p> <p>HOSSEINZADEHMALEKI, ANA, MD Provider ID: N/A</p> <p>☐ 44045 MARGARITA RD STE 106 TEMECULA, CA 92592 Effective as of 01-FEB-24</p> <p>HUOTT, PATRICK, MD Provider ID: N/A</p> <p>☐ 31515 RANCHO PUEBLO RD STE 104 TEMECULA, CA 92592 Effective as of 01-FEB-24</p> <p>HUOTT, PATRICK, MD Provider ID: N/A</p> <p>☐ 31515 RANCHO PUEBLO RD STE 104 TEMECULA, CA 92592 Effective as of 01-FEB-24</p> <p>MAREK, MAKSYM, MD Provider ID: N/A</p> <p>☐ 44045 MARGARITA RD STE 106 TEMECULA, CA 92592 Effective as of 01-DEC-23</p> <p>MCGEHRIN, KEVIN, MD Provider ID: N/A</p> <p>☐ 44045 MARGARITA RD STE 106 TEMECULA, CA 92592 Effective as of 01-JUL-23</p> <p>PHAM, ALISE, DO Provider ID: N/A</p> <p>☐ 44045 MARGARITA RD STE 106 TEMECULA, CA 92592 Effective as of 01-DEC-23</p>	<p>SAHAGIAN, GREGORY, MD Provider ID: N/A</p> <p>☐ 31515 RANCHO PUEBLO RD STE 104 TEMECULA, CA 92592 Effective as of 01-MAY-23</p> <p>SILVER, BRENT, MD† Provider ID: N/A</p> <p>☐ 44045 MARGARITA RD STE 106 TEMECULA, CA 92592 Effective as of 01-NOV-22</p> <p>SORIALOPEZ, JOSE, MD† Provider ID: N/A</p> <p>☐ 44045 MARGARITA RD STE 106 TEMECULA, CA 92592 Effective as of 01-MAR-21</p> <p>TALANKI, VARUN, MD Provider ID: N/A</p> <p>☐ 31565 RANCHO PUEBLO RD STE 205 TEMECULA, CA 92592 Effective as of 01-DEC-22</p> <p>WU, MELANIE, DO† Provider ID: N/A</p> <p>☐ 44045 MARGARITA RD STE 106 TEMECULA, CA 92592 Effective as of 01-JAN-20</p> <p>NEUROLOGY CHILD</p> <p>OLENSKI, KLARI, DO† Provider ID: N/A</p> <p>☐ 44045 MARGARITA RD STE 106 TEMECULA, CA 92592 Effective as of 01-MAR-22</p> <p>OBSTETRICS /</p>
---	--	---

C1. Lista de proveedores de la red Médico de atención especializada

GYNECOLOGY

ELFELT, TIMOTHY, MD†

Provider ID: N/A

📍 28780 SINGLE OAK DR STE 160
TEMECULA, CA 92590
Effective as of 01-AUG-19

GOMEZ, GUILLERMO, MD†

Provider ID: N/A

📍 27625 JEFFERSON AVE STE 101
TEMECULA, CA 92590
Effective as of 01-JUL-21

GOMEZ, GUILLERMO, MD†

Provider ID: N/A

📍 27625 JEFFERSON AVE STE 101
TEMECULA, CA 92590
Effective as of 01-JUL-21

NEAL, JAMES, MD†

Provider ID: N/A

📍 31170 TEMECULA PKWY STE 201
TEMECULA, CA 92592
Effective as of 01-JUL-23

RIZVI, SYED, MD†

Provider ID: N/A

📍 31493 RANCHO PUEBLO RD STE 201
TEMECULA, CA 92592
Effective as of 01-MAR-22

OPHTHALMOLOGY

BAKHTIARY, PEJMAN, MD†

Provider ID: N/A

📍 41877 ENTERPRISE CIR N STE 110
TEMECULA, CA 92590
Effective as of 01-SEP-21

BAKHTIARY, PEJMAN, MD†

Provider ID: N/A

📍 41877 ENTERPRISE CIR N STE 110
TEMECULA, CA 92590
Effective as of 01-SEP-21

BEKENDAM, PAMELA, MD†

Provider ID: N/A

📍 41877 ENTERPRISE CIR N STE 110
TEMECULA, CA 92590
Effective as of 01-NOV-20

BEKENDAM, PETER, MD†

Provider ID: N/A

📍 41877 ENTERPRISE CIR N STE 110
TEMECULA, CA 92590
Effective as of 01-NOV-20

BEKENDAM, PAMELA, MD†

Provider ID: N/A

📍 41877 ENTERPRISE CIR N STE 110
TEMECULA, CA 92590
Effective as of 01-AUG-20

BEKENDAM, PETER, MD†

Provider ID: N/A

📍 41877 ENTERPRISE CIR N STE 110
TEMECULA, CA 92590
Effective as of 01-AUG-20

BURNS, RICHARD, MD†

Provider ID: N/A

📍 41637 MARGARITA RD STE 100
TEMECULA, CA 92591
Effective as of 01-NOV-08

BURNS, RICHARD, MD†

Provider ID: N/A

📍 41637 MARGARITA RD STE 100
TEMECULA, CA 92591
Effective as of 01-SEP-09

BURNS, RICHARD, MD†

Provider ID: N/A

📍 41637 MARGARITA RD STE 100
TEMECULA, CA 92591
Effective as of 01-JUL-23

CHING, ANDREA SHERYL, MD†

Provider ID: N/A

📍 41877 ENTERPRISE CIR N STE 110
TEMECULA, CA 92590
Effective as of 01-AUG-20

CHOW, JASON, MD†

Provider ID: N/A

📍 31950 TEMECULA PKWY STE B-7
TEMECULA, CA 92592
Effective as of 01-JUL-23

JACOBSON, ARTHUR, MD†

Provider ID: N/A

📍 41637 MARGARITA RD STE 100
TEMECULA, CA 92591
Effective as of 01-JUL-23

JACOBSON, ARTHUR, MD†

Provider ID: N/A

📍 41637 MARGARITA RD STE 100
TEMECULA, CA 92591
Effective as of 01-SEP-09

JOSEPH, JEFFREY, MD†

Provider ID: N/A

📍 31950 TEMECULA PKWY
TEMECULA, CA 92592
Effective as of 01-JUL-23

**C1. Lista de proveedores de la red
Médico de atención especializada**

LAZZARINI, THOMAS, MD

Provider ID: N/A

41900 WINCHESTER RD
STE 201
TEMECULA, CA 92590
Effective as of 01-FEB-24

LAZZARINI, THOMAS, MD

Provider ID: N/A

41900 WINCHESTER RD
STE 201
TEMECULA, CA 92590
Effective as of 01-FEB-24

LAZZARINI, THOMAS, MD

Provider ID: N/A

41900 WINCHESTER RD
STE 201
TEMECULA, CA 92590
Effective as of 01-FEB-24

LAZZARINI, THOMAS, MD

Provider ID: N/A

41900 WINCHESTER RD
STE 201
TEMECULA, CA 92590
Effective as of 01-FEB-24

LEE, JOHN, MD†

Provider ID: N/A

41637 MARGARITA RD STE
100
TEMECULA, CA 92591
Effective as of 01-JUL-23

LIN, THEODORE, MD†

Provider ID: N/A

41900 WINCHESTER RD
STE 201
TEMECULA, CA 92590
Effective as of 01-APR-24

LIN, THEODORE, MD†

Provider ID: N/A

41900 WINCHESTER RD
STE 201
TEMECULA, CA 92590
Effective as of 01-APR-24

LIN, THEODORE, MD†

Provider ID: N/A

41900 WINCHESTER RD
STE 201
TEMECULA, CA 92590
Effective as of 01-SEP-17

LOBUE, THOMAS, MD

Provider ID: N/A

40945 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-NOV-09

SATTERFIELD, KELLIE, MD

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-DEC-23

SAVAR, AARON, MD†

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-NOV-20

SAVAR, LOUIS, MD†

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-NOV-20

SAVAR, AARON, MD†

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-AUG-20

SAVAR, LOUIS, MD†

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-AUG-20

SHEILS, CATHERINE, MD

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-JAN-24

SKINNER, ANTHONY, MD

Provider ID: N/A

41637 MARGARITA RD STE
100
TEMECULA, CA 92591
Effective as of 01-JUN-24

SKINNER, ANTHONY, MD

Provider ID: N/A

41637 MARGARITA RD STE
100
TEMECULA, CA 92591
Effective as of 01-JUN-24

SMITH, WILLIAM, MD†

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-NOV-20

SONI, NISHANT, MD†


Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-NOV-20


SONI, NISHANT, MD†

Provider ID: N/A


**C1. Lista de proveedores de la red
Médico de atención especializada**

 41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-AUG-20


SORENSEN, ROBERT, MD†
Provider ID: N/A

 31950 US HWY 79 S B7
TEMECULA, CA 92592
Effective as of 01-JUL-23


WARNER, MICHAEL, MD†
Provider ID: N/A

 41637 MARGARITA RD STE
100
TEMECULA, CA 92591
Teleservice
Effective as of 01-JUL-23


YUNG, EDWARD, MD†
Provider ID: N/A

 41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-AUG-20

YUNG, EDWARD, MD†
Provider ID: N/A


 41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-NOV-20

ZHOU, SIWEI, MD†
Provider ID: N/A


 31950 TEMECULA PKWY
STE B-7
TEMECULA, CA 92592
Effective as of 01-JUL-23

OPTOMETRIST


**ABDOU, MARINA AWADALLA,
OD†**
Provider ID: N/A

 41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-FEB-22


**ABDOU, MARINA AWADALLA,
OD†**
Provider ID: N/A

 41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-FEB-22


**ABDOU, MARINA AWADALLA,
OD†**
Provider ID: N/A

 41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-JUN-23


ARCHIBALD, JOHN, OD†
Provider ID: N/A

 31950 TEMECULA PKWY
STE B-7
TEMECULA, CA 92592
Effective as of 01-JUL-23

ARCHIBALD, JOHN, OD†
Provider ID: N/A

 31950 TEMECULA PKWY
STE B-7
TEMECULA, CA 92592
Effective as of 01-DEC-23

BARR, AUSTIN, OD
Provider ID: N/A


 41637 MARGARITA RD STE
100
TEMECULA, CA 92591
Effective as of 01-MAR-23

BARR, AUSTIN, OD
Provider ID: N/A


 41637 MARGARITA RD STE

100
TEMECULA, CA 92591
Effective as of 01-NOV-22


BARR, AUSTIN, OD
Provider ID: N/A

 41637 MARGARITA RD STE
100
TEMECULA, CA 92591
Effective as of 01-NOV-22


BARR, AUSTIN, OD
Provider ID: N/A

 41637 MARGARITA RD STE
100
TEMECULA, CA 92591
Effective as of 01-NOV-22


COLEMAN, BROOKE, OD†
Provider ID: N/A

 31950 TEMECULA PKWY
STE B-7
TEMECULA, CA 92592
Effective as of 01-FEB-22


COOPER, MICHAEL, OD†
Provider ID: N/A

 31950 TEMECULA PKWY
STE B-7
TEMECULA, CA 92592
Effective as of 01-SEP-22

FARAMARZI, FARNAZ, OD
Provider ID: N/A

 41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-DEC-23

FARAMARZI, FARNAZ, OD
Provider ID: N/A

 41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-JUL-23

C1. Lista de proveedores de la red Médico de atención especializada

FARAMARZI, FARNAZ, OD

Provider ID: N/A

41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590

Effective as of 01-JUL-23

LANE, KEVIN, OD†

Provider ID: N/A

41637 MARGARITA RD STE
100
TEMECULA, CA 92591

Effective as of 01-JUL-23

LANE, KEVIN, OD†

Provider ID: N/A

41637 MARGARITA RD STE
100
TEMECULA, CA 92591

Effective as of 01-FEB-11

LANE, KEVIN, OD†

Provider ID: N/A

41637 MARGARITA RD STE
100
TEMECULA, CA 92591

Effective as of 01-SEP-09

LARSON, BRETT, OD†

Provider ID: N/A

31950 TEMECULA PKWY
STE B-7
TEMECULA, CA 92592

Effective as of 01-FEB-22

LARSON, BRETT, OD†

Provider ID: N/A

31950 TEMECULA PKWY
STE B-7
TEMECULA, CA 92592

Effective as of 01-AUG-20

MC DIARMID, JOHN, OD†

Provider ID: N/A

31950 TEMECULA PKWY
STE B-7
TEMECULA, CA 92592

Effective as of 01-FEB-22

MCINTYRE, DEBRA, OD†

Provider ID: N/A

41637 MARGARITA RD STE
100
TEMECULA, CA 92591

Effective as of 01-DEC-17

MCINTYRE, DEBRA, OD†

Provider ID: N/A

41637 MARGARITA RD STE
100
TEMECULA, CA 92591

Effective as of 01-DEC-17

MCINTYRE, DEBRA, OD†

Provider ID: N/A

41637 MARGARITA RD STE
100
TEMECULA, CA 92591

Effective as of 01-DEC-17

MCINTYRE, DEBRA, OD†

Provider ID: N/A

41637 MARGARITA RD STE
100
TEMECULA, CA 92591

Effective as of 01-JUL-23

ULIBARRI, MATTHEW, OD†

Provider ID: N/A

41637 MARGARITA RD STE
100
TEMECULA, CA 92591

Effective as of 01-JUL-23

ULIBARRI, MATTHEW, OD†

Provider ID: N/A

41637 MARGARITA RD STE
100
TEMECULA, CA 92591

Effective as of 01-JAN-22

OTOLARYNGOLOGY

GIAMMANCO, PIERRE, MD

Provider ID: N/A

27455 TIERRA ALTA WAY
STE A
TEMECULA, CA 92590

Effective as of 01-SEP-22

GIAMMANCO, PIERRE, MD

Provider ID: N/A

27455 TIERRA ALTA WAY
STE A
TEMECULA, CA 92590

Effective as of 01-SEP-22

KALKANIS, JAMES, MD†

Provider ID: N/A

40285 WINCHESTER RD
STE 104
TEMECULA, CA 92591

Effective as of 01-JUL-23

KALKANIS, JAMES, MD†

Provider ID: N/A

40285 WINCHESTER RD
STE 104
TEMECULA, CA 92591

Effective as of 01-AUG-20

KALKANIS, JAMES, MD†

Provider ID: N/A

40285 WINCHESTER RD
STE 104
TEMECULA, CA 92591

Effective as of 01-MAR-21

KALKANIS, JAMES, MD†

Provider ID: N/A

40285 WINCHESTER RD
STE 104
TEMECULA, CA 92591

Effective as of 01-SEP-09

C1. Lista de proveedores de la red Médico de atención especializada

TINT, DERRICK, MD†

Provider ID: N/A

40285 WINCHESTER RD
STE 104
TEMECULA, CA 92591
Effective as of 01-AUG-21

PHYS MED/ REHAB PAIN MEDICINE

CHEN, HAMILTON, MD†

Provider ID: N/A

27450 YNEZ RD STE 128
TEMECULA, CA 92591
Effective as of 01-JUL-24

PHYSICAL MEDICINE / REHABILITATION

AILINANI, HARY, MD

Provider ID: N/A

27699 JEFFERSON AVE STE
201
TEMECULA, CA 92590
Effective as of 01-MAY-21

CHEN, HAMILTON, MD†

Provider ID: N/A

27450 YNEZ RD STE 128
TEMECULA, CA 92591
Effective as of 01-MAR-24

PHYSICIANS ASSISTANT

ASHIER, SAURABH, PA†

Provider ID: N/A

31573 RANCHO PUEBLO
RD STE 210
TEMECULA, CA 92592
Effective as of 01-AUG-22

ASHIER, SAURABH, PA†

Provider ID: N/A

31573 RANCHO PUEBLO

RD STE 210
TEMECULA, CA 92592
Effective as of 01-JUL-23

ASHIER, SAURABH, PA†

Provider ID: N/A

31573 RANCHO PUEBLO
RD STE 210
TEMECULA, CA 92592
Effective as of 01-JUL-23

BAKER, ROBERT, PA

Provider ID: N/A

27699 JEFFERSON AVE STE
201
TEMECULA, CA 92590
Effective as of 01-MAR-24

BAKER, ROBERT, PA

Provider ID: N/A

27699 JEFFERSON AVE STE
201
TEMECULA, CA 92590
Effective as of 01-MAR-24

BAKER, ROBERT, PA

Provider ID: N/A

27699 JEFFERSON AVE STE
201
TEMECULA, CA 92590
Effective as of 01-MAR-24

BAKER, ROBERT, PA

Provider ID: N/A

27699 JEFFERSON AVE STE
201
TEMECULA, CA 92590
Effective as of 01-MAR-24

BAKER, ROBERT, PA

Provider ID: N/A

27699 JEFFERSON AVE STE
201
TEMECULA, CA 92590
Effective as of 01-MAR-24

BASIN, NATALIE, PA

Provider ID: N/A

31515 RANCHO PUEBLO RD
STE 102
TEMECULA, CA 92592
Teleservice
Effective as of 01-AUG-23

CAGATAY, HARRIER, PA†

Provider ID: N/A

27699 JEFFERSON AVE STE
201
TEMECULA, CA 92590
Effective as of 01-AUG-20

LYNCH, GREGORY, PA†

Provider ID: N/A

31150 TEMECULA PKWY
STE 104
TEMECULA, CA 92592
Effective as of 01-OCT-20

LYNCH, GREGORY, PA†

Provider ID: N/A

31150 TEMECULA PKWY
STE 104
TEMECULA, CA 92592
Effective as of 01-OCT-20

LYNCH, GREGORY, PA†

Provider ID: N/A

31150 TEMECULA PKWY
STE 104
TEMECULA, CA 92592
Effective as of 01-OCT-20

MITCHELL, PAUL, PA

Provider ID: N/A

27699 JEFFERSON AVE STE
201
TEMECULA, CA 92590
Effective as of 01-JUN-18

ROWAN, RYAN, PA†

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

44054 MARGARITA RD STE
1

TEMECULA, CA 92592

Effective as of 01-MAR-23

PODIATRIST

NEGRON, RICARDO, DPM

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590

Effective as of 01-JUL-22

NEGRON, RICARDO, DPM

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590

Effective as of 01-JUL-21

NEGRON, RICARDO, DPM

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590

Effective as of 01-JUL-21

PSYCHIATRY

ANDERSEN, CLAIRE, MD

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590

Effective as of 01-DEC-20

ANDERSEN, CLAIRE, MD

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590

Effective as of 01-DEC-20

JAKKULA, JAGAN, MD†

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591

Effective as of 01-NOV-23

JAKKULA, JAGAN, MD†

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591

Effective as of 01-AUG-22

JAKKULA, JAGAN, MD†

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591

Effective as of 01-NOV-23

JAKKULA, JAGAN, MD†

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591

Effective as of 01-AUG-22

KANUKUNTLA, TULASI, MD†

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591

Effective as of 01-AUG-22

KANUKUNTLA, TULASI, MD†

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591

Effective as of 01-OCT-23

KANUKUNTLA, TULASI, MD†

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591

Effective as of 01-OCT-23

KANUKUNTLA, TULASI, MD†

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591

Effective as of 01-AUG-22

MCGEHRIN, KEVIN, MD

Provider ID: N/A

44045 MARGARITA RD STE
106
TEMECULA, CA 92592

Effective as of 01-JUL-23

MCGEHRIN, KEVIN, MD

Provider ID: N/A

44045 MARGARITA RD STE
106
TEMECULA, CA 92592

Effective as of 01-JUL-23

PERSAUD, PRIA, MD

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590

Effective as of 01-AUG-20

PERSAUD, PRIA, MD

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590

Effective as of 01-AUG-20

PHAM, ALISE, DO

Provider ID: N/A

44045 MARGARITA RD STE
106
TEMECULA, CA 92592

Effective as of 01-DEC-23

PHAM, ALISE, DO

Provider ID: N/A

44045 MARGARITA RD STE
106
TEMECULA, CA 92592

Effective as of 01-DEC-23

**C1. Lista de proveedores de la red
Médico de atención especializada**

**PUCHAKAYALA, NANDITA,
MD†**

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-AUG-22

**PUCHAKAYALA, NANDITA,
MD†**

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-SEP-23

**PUCHAKAYALA, NANDITA,
MD†**

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-AUG-22

**PUCHAKAYALA, NANDITA,
MD†**

Provider ID: N/A

29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-SEP-23

PSYCHIATRY CHILD

ANDERSEN, CLAIRE, MD

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-DEC-20

ANDERSEN, CLAIRE, MD

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590

Effective as of 01-DEC-20

PSYCHOLOGIST

THODE, LAURA, PSYD

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 102
TEMECULA, CA 92592
Effective as of 01-JUL-24

THODE, LAURA, PSYD

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-MAR-24

THODE, LAURA, PSYD

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 102
TEMECULA, CA 92592
Effective as of 01-JUL-24

THODE, LAURA, PSYD

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-MAR-24

WERNER, KRISTINE, PhD

Provider ID: N/A

27699 JEFFERSON AVE STE
201
TEMECULA, CA 92590
Effective as of 01-MAY-18

WERNER, KRISTINE, PhD

Provider ID: N/A

27699 JEFFERSON AVE STE
201
TEMECULA, CA 92590
Effective as of 01-MAY-18

WOODWORTH, JENNIFER,

PSYD

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-JAN-21

**WOODWORTH, JENNIFER,
PSYD**

Provider ID: N/A

43385 BUSINESS PARK DR
STE 110
TEMECULA, CA 92590
Effective as of 01-JAN-21

**WOODWORTH, JENNIFER,
PSYD**

Provider ID: N/A

43385 BUSINESS PARK DR
STE 110
TEMECULA, CA 92590
Effective as of 01-JAN-21

**WOODWORTH, JENNIFER,
PSYD**

Provider ID: N/A

41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-JAN-21

PULMONARY DISEASES

CHUA, WILLY, MD

Provider ID: N/A

44605 AVENIDA DE
MISSIONES STE 206
TEMECULA, CA 92592
Effective as of 01-APR-22

HADDADIN, HASSAN, MD†

Provider ID: N/A

27699 JEFFERSON AVE STE
204
TEMECULA, CA 92590
Effective as of 01-APR-22

**C1. Lista de proveedores de la red
Médico de atención especializada**

HADDADIN, HASSAN, MD†

Provider ID: N/A
 27699 JEFFERSON AVE STE 204
 TEMECULA, CA 92590
 Effective as of 01-APR-22

HADDADIN, HASSAN, MD†

Provider ID: N/A
 27699 JEFFERSON AVE STE 204
 TEMECULA, CA 92590
 Effective as of 01-JUL-22

LEE, DAVID, MD

Provider ID: N/A
 31625 DE PORTOLA RD STE 101
 TEMECULA, CA 92592
 Effective as of 01-APR-24

VEGA, RICARDO, MD†

Provider ID: N/A
 27699 JEFFERSON AVE STE 204
 TEMECULA, CA 92590
 Effective as of 01-AUG-22

VEGA, RICARDO, MD†

Provider ID: N/A
 27699 JEFFERSON AVE STE 204
 TEMECULA, CA 92590
 Effective as of 01-AUG-22

VEGA, RICARDO, MD†

Provider ID: N/A
 27699 JEFFERSON AVE STE 204
 TEMECULA, CA 92590
 Effective as of 01-AUG-22

RADIATION ONCOLOGY

DAROUI, PARIMA, MD

Provider ID: N/A
 44274 GEORGE CUSHMAN CT
 TEMECULA, CA 92592
 Effective as of 01-JUN-24

DAROUI, PARIMA, MD

Provider ID: N/A
 44274 GEORGE CUSHMAN CT
 TEMECULA, CA 92592
 Effective as of 01-JUN-24

DAROUI, PARIMA, MD

Provider ID: N/A
 44274 GEORGE CUSHMAN CT
 TEMECULA, CA 92592
 Effective as of 01-JUN-24

DAROUI, PARIMA, MD

Provider ID: N/A
 44274 GEORGE CUSHMAN CT STE 100
 TEMECULA, CA 92592
 Effective as of 01-APR-24

DAROUI, PARIMA, MD

Provider ID: N/A
 44274 GEORGE CUSHMAN CT STE 100
 TEMECULA, CA 92592
 Effective as of 01-APR-24

REGISTERED PHYSICAL THERAPIST

AGENA, CYAN, PT†

Provider ID: N/A
 27699 JEFFERSON AVE STE 202
 TEMECULA, CA 92590
 Effective as of 01-NOV-21

AGENA, CYAN, PT†

Provider ID: N/A
 27699 JEFFERSON AVE STE 202
 TEMECULA, CA 92590
 Effective as of 01-NOV-21

ATKINS, WILLIAM, PT

Provider ID: N/A
 27699 JEFFERSON AVE STE 202
 TEMECULA, CA 92590
 Effective as of 01-JUN-23

ATKINS, WILLIAM, PT

Provider ID: N/A
 27699 JEFFERSON AVE STE 202
 TEMECULA, CA 92590
 Effective as of 01-JUN-23

ATKINS, WILLIAM, PT

Provider ID: N/A
 31515 RANCHO PUEBLO RD STE 101
 TEMECULA, CA 92592
 Effective as of 01-JUN-23

ATKINS, WILLIAM, PT

Provider ID: N/A
 31515 RANCHO PUEBLO RD STE 101
 TEMECULA, CA 92592
 Effective as of 01-JUN-23

BRYANS, BRIANNA, PT†

Provider ID: N/A
 29645 RANCHO CALIFORNIA RD
 TEMECULA, CA 92591
 Effective as of 01-JAN-22


BRYANS, BRIANNA, PT†

Provider ID: N/A
 29645 RANCHO CALIFORNIA RD


**C1. Lista de proveedores de la red
Médico de atención especializada**

TEMECULA, CA 92591
Effective as of 01-JAN-22


BURRUEL, KAYLA, PT

Provider ID: N/A
 27699 JEFFERSON AVE STE
202
TEMECULA, CA 92590
Effective as of 01-SEP-23


BURRUEL, KAYLA, PT

Provider ID: N/A
 27699 JEFFERSON AVE STE
202
TEMECULA, CA 92590
Effective as of 01-SEP-23


BURRUEL, KAYLA, PT

Provider ID: N/A
 31515 RANCHO PUEBLO RD
STE 101
TEMECULA, CA 92592
Effective as of 01-SEP-23


BURRUEL, KAYLA, PT

Provider ID: N/A
 31515 RANCHO PUEBLO RD
STE 101
TEMECULA, CA 92592
Effective as of 01-SEP-23


ESTELLE, KIRA, PT

Provider ID: N/A
 31515 RANCHO PUEBLO RD
STE 101
TEMECULA, CA 92592
Effective as of 01-MAY-23


ESTELLE, KIRA, PT

Provider ID: N/A
 31515 RANCHO PUEBLO RD
STE 101
TEMECULA, CA 92592
Effective as of 01-MAY-23


ESTELLE, KIRA, PT

Provider ID: N/A
 27699 JEFFERSON AVE STE
202
TEMECULA, CA 92590
Effective as of 01-MAY-23


ESTELLE, KIRA, PT

Provider ID: N/A
 27699 JEFFERSON AVE STE
202
TEMECULA, CA 92590
Effective as of 01-MAY-23


HANSON, ADRIENNE, PT

Provider ID: N/A
 32785 TEMECULA PKWY
STE 110
TEMECULA, CA 92592
Effective as of 01-JUL-24


HANSON, ADRIENNE, PT

Provider ID: N/A
 32785 TEMECULA PKWY
STE 110
TEMECULA, CA 92592
Effective as of 01-JUL-24

HANSON, ADRIENNE, PT

Provider ID: N/A
 27699 JEFFERSON AVE STE
202
TEMECULA, CA 92590
Effective as of 01-JUL-23

HANSON, ADRIENNE, PT


Provider ID: N/A
 27699 JEFFERSON AVE STE
202
TEMECULA, CA 92590
Effective as of 01-JUL-23

HORN, TREVOR, PT†


Provider ID: N/A
 27699 JEFFERSON AVE STE

202
TEMECULA, CA 92590
Effective as of 01-APR-20


HORN, TREVOR, PT†

Provider ID: N/A
 27699 JEFFERSON AVE STE
202
TEMECULA, CA 92590
Effective as of 01-APR-20


HORN, TREVOR, PT†

Provider ID: N/A
 31515 RANCHO PUEBLO RD
STE 101
TEMECULA, CA 92592
Effective as of 01-APR-20


HORN, TREVOR, PT†

Provider ID: N/A
 31515 RANCHO PUEBLO RD
STE 101
TEMECULA, CA 92592
Effective as of 01-APR-20


ROLTSCH, IAN, PT

Provider ID: N/A
 32785 TEMECULA PKWY
STE 110
TEMECULA, CA 92592
Effective as of 01-JUL-24

ROLTSCH, IAN, PT

Provider ID: N/A
 32785 TEMECULA PKWY
STE 110
TEMECULA, CA 92592
Effective as of 01-JUL-24

ROLTSCH, IAN, PT

Provider ID: N/A
 27699 JEFFERSON AVE STE
202
TEMECULA, CA 92590
Effective as of 01-MAY-23

C1. Lista de proveedores de la red Médico de atención especializada

ROLTSCH, IAN, PT

Provider ID: N/A

27699 JEFFERSON AVE STE 202
TEMECULA, CA 92590
Effective as of 01-MAY-23

SABIN, SCOTT, PT

Provider ID: N/A

32785 TEMECULA PKWY STE 110
TEMECULA, CA 92592
Effective as of 01-JUL-24

SABIN, SCOTT, PT

Provider ID: N/A

32785 TEMECULA PKWY STE 110
TEMECULA, CA 92592
Effective as of 01-JUL-24

SIVA, ANDREW, PT

Provider ID: N/A

32785 TEMECULA PKWY STE 110
TEMECULA, CA 92592
Effective as of 01-JUL-24

SIVA, ANDREW, PT

Provider ID: N/A

32785 TEMECULA PKWY STE 110
TEMECULA, CA 92592
Effective as of 01-JUL-24

SIVA, ANDREW, PT†

Provider ID: N/A

27699 JEFFERSON AVE STE 202
TEMECULA, CA 92590
Effective as of 01-NOV-21

SIVA, ANDREW, PT†

Provider ID: N/A

27699 JEFFERSON AVE STE 202
TEMECULA, CA 92590

Effective as of 01-NOV-21

SIVA, ANDREW, PT†

Provider ID: N/A

29645 RANCHO CALIFORNIA RD STE 234
TEMECULA, CA 92591
Effective as of 01-NOV-21

SIVA, ANDREW, PT†

Provider ID: N/A

29645 RANCHO CALIFORNIA RD STE 234
TEMECULA, CA 92591
Effective as of 01-NOV-21

SIVA, ANDREW, PT†

Provider ID: N/A

29645 RANCHO CALIFORNIA RD STE 4
TEMECULA, CA 92591
Effective as of 01-JUN-21

SIVA, ANDREW, PT†

Provider ID: N/A

29645 RANCHO CALIFORNIA RD STE 4
TEMECULA, CA 92591
Effective as of 01-JUN-21

VIZCARRA, DAVID, PT†

Provider ID: N/A

29645 RANCHO CALIFORNIA RD STE 234
TEMECULA, CA 92591

Effective as of 01-JUN-20

VIZCARRA, DAVID, PT†

Provider ID: N/A

29645 RANCHO CALIFORNIA RD STE 234
TEMECULA, CA 92591

Effective as of 01-JUN-20

VIZCARRA, DAVID, PT

Provider ID: N/A

32785 TEMECULA PKWY STE 110
TEMECULA, CA 92592
Effective as of 01-JUL-24

VIZCARRA, DAVID, PT

Provider ID: N/A

32785 TEMECULA PKWY STE 110
TEMECULA, CA 92592
Effective as of 01-JUL-24

RHEUMATOLOGY

AL HARASH, ABDALHAMID, MD†

Provider ID: N/A

31565 RANCHO PUEBLO RD STE 205
TEMECULA, CA 92592
Effective as of 01-AUG-23

AL HARASH, ABDALHAMID, MD†

Provider ID: N/A

31565 RANCHO PUEBLO RD STE 205
TEMECULA, CA 92592
Effective as of 01-AUG-23

AL HARASH, ABDALHAMID, MD

Provider ID: N/A

31493 RANCHO PUEBLO RD STE 204
TEMECULA, CA 92592
Effective as of 01-JUL-24

AL HARASH, ABDALHAMID, MD

Provider ID: N/A

**C1. Lista de proveedores de la red
Médico de atención especializada**

31493 RANCHO PUEBLO RD STE 204
TEMECULA, CA 92592
Effective as of 01-JUL-24

AL HARASH, ABDALHAMID, MD

Provider ID: N/A

31493 RANCHO PUEBLO RD STE 204
TEMECULA, CA 92592
Effective as of 01-JUL-24

AL HARASH, ABDALHAMID, MD

Provider ID: N/A

31493 RANCHO PUEBLO RD STE 204
TEMECULA, CA 92592
Effective as of 01-JUL-24

BRAVO, ARLENE, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD STE 203
TEMECULA, CA 92592
Effective as of 01-APR-21

COLBURN, KEITH, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD STE 203
TEMECULA, CA 92592
Effective as of 01-MAR-21

MEHTA, AMAL, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD STE 203
TEMECULA, CA 92592
Effective as of 01-JUL-23

MEHTA, CHANDRAKANT, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD

STE 203
TEMECULA, CA 92592
Effective as of 01-MAR-21

MEHTA, AMAL, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD STE 203
TEMECULA, CA 92592
Effective as of 01-SEP-18

MEHTA, CHANDRAKANT, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD STE 203
TEMECULA, CA 92592
Effective as of 01-SEP-18

RAMASWAMY, DHARMARAJAN, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD STE 203
TEMECULA, CA 92592
Effective as of 01-SEP-18

TRIVEDI, JANKI, MD†

Provider ID: N/A

31515 RANCHO PUEBLO RD STE 203
TEMECULA, CA 92592
Effective as of 01-SEP-18

SPEECH PATHOLOGIST

O'DORAN, KAYLA, SP

Provider ID: N/A

40764 WINCHESTER RD STE 590
TEMECULA, CA 92591
Teleservice

Effective as of 01-JUN-22

O'DORAN, KAYLA, SP

Provider ID: N/A

40764 WINCHESTER RD STE 590
TEMECULA, CA 92591
Teleservice

Effective as of 01-JUN-22

WIRTH, LAURA, SP

Provider ID: N/A

40764 WINCHESTER RD STE 590
TEMECULA, CA 92591
Effective as of 01-JUN-22

WIRTH, LAURA, SP

Provider ID: N/A

40764 WINCHESTER RD STE 590
TEMECULA, CA 92591
Effective as of 01-JUN-22

SURGERY COLON SURGERY

GORSKI, TITO, MD†

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 202
TEMECULA, CA 92592
Effective as of 01-SEP-16

GORSKI, TITO, MD†

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 202
TEMECULA, CA 92592
Effective as of 01-MAY-22

GORSKI, TITO, MD†

Provider ID: N/A


31537 RANCHO PUEBLO RD STE 202
TEMECULA, CA 92592
Effective as of 01-APR-15

SURGERY GENERAL

C1. Lista de proveedores de la red Médico de atención especializada


BARRERA, KAYLENE, MD†

Provider ID: N/A

 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-SEP-22


BARRERA, KAYLENE, MD†

Provider ID: N/A

 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-MAY-22


BARRERA, KAYLENE, MD†

Provider ID: N/A

 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-APR-22


BARRERA, KAYLENE, MD†

Provider ID: N/A

 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-MAY-22


CORDERO, RAYMUND, MD†

Provider ID: N/A

 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-APR-15


CORDERO, RAYMUND, MD†

Provider ID: N/A

 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-DEC-21


CORDERO, RAYMUND, MD†

Provider ID: N/A

 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-MAY-22


CORDERO, RAYMUND, MD†

Provider ID: N/A

 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-SEP-22


DADA, STEPHEN, MD

Provider ID: N/A

 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-SEP-23


ESSIEN, FRANCIS, MD†

Provider ID: N/A

 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-SEP-22


ESSIEN, FRANCIS, MD†

Provider ID: N/A

 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-MAY-22


ESSIEN, FRANCIS, MD†

Provider ID: N/A

 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-SEP-15

ESSIEN, FRANCIS, MD†


Provider ID: N/A

 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592

Effective as of 01-SEP-16


ESSIEN, FRANCIS, MD†

Provider ID: N/A

 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-APR-15


ESSIEN, FRANCIS, MD†

Provider ID: N/A

 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-JUN-24


ESSIEN, FRANCIS, MD†

Provider ID: N/A

 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-APR-22


GORSKI, TITO, MD†

Provider ID: N/A

 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-AUG-16


GORSKI, TITO, MD†

Provider ID: N/A

 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-APR-22

GORSKI, YARA, MD†

Provider ID: N/A

 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-SEP-16

GORSKI, TITO, MD†

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-SEP-22

GORSKI, YARA, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-SEP-22

JOHNSEN, HEGE, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-SEP-22

JOHNSEN, HEGE, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-SEP-16

JOHNSEN, HEGE, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-MAY-22

JOHNSEN, HEGE, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-MAY-22

JOHNSEN, HEGE, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202

TEMECULA, CA 92592
Effective as of 01-APR-22

JOHNSEN, HEGE, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-AUG-16

JOHNSEN, HEGE, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-DEC-17

MAC, OLIVIA, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-DEC-22

NAFIU, BOLAJI, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-DEC-19

NAFIU, BOLAJI, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-APR-20

NAFIU, BOLAJI, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-SEP-22

NOURI, SARVENAZ, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-NOV-22

ROGHANI, REZA, MD

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-MAR-23

SHAPER, EMANUEL, MD

Provider ID: N/A

31625 DE PORTOLA RD STE
101
TEMECULA, CA 92592
Effective as of 01-FEB-24

SHAPER, EMANUEL, MD

Provider ID: N/A

31625 DE PORTOLA RD STE
101
TEMECULA, CA 92592
Effective as of 01-MAY-24

TIU, BRIAN, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-SEP-22

TIU, BRIAN, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-AUG-18

VU, STEVE, MD

Provider ID: N/A

27699 JEFFERSON AVE STE
305

**C1. Lista de proveedores de la red
Médico de atención especializada**

TEMECULA, CA 92590
Effective as of 01-APR-23

VU, STEVE, MD

Provider ID: N/A

27699 JEFFERSON AVE STE 305

TEMECULA, CA 92590
Effective as of 01-APR-23

VU, STEVE, MD

Provider ID: N/A

27699 JEFFERSON AVE STE 305

TEMECULA, CA 92590
Effective as of 01-APR-23

VU, STEVE, MD

Provider ID: N/A

27699 JEFFERSON AVE STE 305

TEMECULA, CA 92590
Effective as of 01-APR-23

WANG, XIUJIE, MD†

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 202
TEMECULA, CA 92592

Effective as of 01-MAR-20

WANG, NAN, MD†

Provider ID: N/A

31573 RANCHO PUEBLO RD STE 210
TEMECULA, CA 92592

Effective as of 01-JUL-22

WANG, NAN, MD†

Provider ID: N/A

31573 RANCHO PUEBLO RD STE 210
TEMECULA, CA 92592

Effective as of 01-AUG-22

WANG, XIUJIE, MD†

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 202
TEMECULA, CA 92592

Effective as of 01-DEC-21

WANG, XIUJIE, MD†

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 202
TEMECULA, CA 92592

Effective as of 01-SEP-19

***SURGERY GENERAL
VASCULAR***

GORSKI, YARA, MD†

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 202
TEMECULA, CA 92592

Effective as of 01-MAY-22

GORSKI, YARA, MD†

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 202
TEMECULA, CA 92592

Effective as of 01-AUG-16

GORSKI, YARA, MD†

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 202
TEMECULA, CA 92592

Effective as of 01-JUN-15

GREWAL, PRABHJOT, MD†

Provider ID: N/A

27290 MADISON AVE STE 102
TEMECULA, CA 92590

Effective as of 01-NOV-20

GREWAL, PRABHJOT, MD†

Provider ID: N/A

27290 MADISON AVE STE 102
TEMECULA, CA 92590

Effective as of 01-JUN-20

KARMUR, AMIT, DO†

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 202
TEMECULA, CA 92592

Effective as of 01-MAY-22

KARMUR, AMIT, DO†

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 202
TEMECULA, CA 92592

Effective as of 01-MAY-22

NAFIU, BOLAJI, MD†

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 202
TEMECULA, CA 92592

Effective as of 01-MAY-22

NAFIU, BOLAJI, MD†

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 202
TEMECULA, CA 92592

Effective as of 01-DEC-21

TIU, BRIAN, MD†

Provider ID: N/A

31537 RANCHO PUEBLO RD STE 202
TEMECULA, CA 92592

Effective as of 01-APR-22

TIU, BRIAN, MD†

Provider ID: N/A

31537 RANCHO PUEBLO

C1. Lista de proveedores de la red Médico de atención especializada

RD STE 202
TEMECULA, CA 92592
Effective as of 01-MAY-22

TIU, BRIAN, MD†

Provider ID: N/A
☑ 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-MAY-22

WANG, XIUJIE, MD†

Provider ID: N/A
☑ 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-MAY-22

WANG, XIUJIE, MD†

Provider ID: N/A
☑ 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-OCT-20

WANG, XIUJIE, MD†

Provider ID: N/A
☑ 31537 RANCHO PUEBLO
RD STE 202
TEMECULA, CA 92592
Effective as of 01-OCT-20

SURGERY HAND

KIM, KEVIN, DO

Provider ID: N/A
☑ 28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

KIM, KEVIN, DO

Provider ID: N/A
☑ 28780 SINGLE OAK DR STE
270

TEMECULA, CA 92590
Effective as of 01-FEB-23

KIM, KEVIN, DO

Provider ID: N/A
☑ 28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

KIM, KEVIN, DO

Provider ID: N/A
☑ 28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

MONEYHON, MICHAEL, MD

Provider ID: N/A
☑ 28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

MONEYHON, MICHAEL, MD

Provider ID: N/A
☑ 28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

MONEYHON, MICHAEL, MD

Provider ID: N/A
☑ 28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

MONEYHON, MICHAEL, MD

Provider ID: N/A
☑ 28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

TRAN, TUAN, MD

Provider ID: N/A
☑ 28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-APR-23

TRAN, TUAN, MD

Provider ID: N/A
☑ 28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-APR-23

TRAN, TUAN, MD

Provider ID: N/A
☑ 28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-APR-23

TRAN, TUAN, MD

Provider ID: N/A
☑ 28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

SURGERY ORTHOPEDIC

ABITBOL, JEAN-JACQUES, MD†

Provider ID: N/A
☑ 28975 OLD TOWN FRONT
ST STE 200
TEMECULA, CA 92590
Effective as of 01-JUN-22

AMERI, BIJAN, DO

Provider ID: N/A
☑ 28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

C1. Lista de proveedores de la red
Médico de atención especializada

AMERI, BIJAN, DO

Provider ID: N/A

28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

AMERI, BIJAN, DO

Provider ID: N/A

28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

BIAMA, RICHARD, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

BIAMA, RICHARD, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

BIAMA, RICHARD, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

BIAMA, RICHARD, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

ELLIS, JOHN, MD†

Provider ID: N/A

40949 WINCHESTER RD

TEMECULA, CA 92591
Effective as of 01-JUL-23

ELLIS, JOHN, MD†

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-SEP-22

ELLIS, JOHN, MD†

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-JUN-21

FOSTER, ANDREW DAVID, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

FOSTER, ANDREW DAVID, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

FOSTER, ANDREW DAVID, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

FOSTER, ANDREW DAVID, MD

Provider ID: N/A

28780 SINGLE OAK DR STE
270
TEMECULA, CA 92590
Effective as of 01-FEB-23

FRENCH, MICHAEL, DO†

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-JUL-23

FRENCH, MICHAEL, DO†

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-DEC-22

FRENCH, MICHAEL, DO†

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-JUL-21

FRENCH, MICHAEL, DO†

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-OCT-22

KELLEY, STEVEN, MD

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-JUN-21

KELLEY, STEVEN, MD

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-DEC-22

KELLEY, STEVEN, MD

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-JUL-23

KELLEY, STEVEN, MD

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-DEC-22

**C1. Lista de proveedores de la red
Médico de atención especializada**

LE, VU, MD

Provider ID: N/A

28780 SINGLE OAK DR STE 270
TEMECULA, CA 92590
Effective as of 01-FEB-23

LE, VU, MD

Provider ID: N/A

28780 SINGLE OAK DR STE 270
TEMECULA, CA 92590
Effective as of 01-FEB-23

LE, VU, MD

Provider ID: N/A

28780 SINGLE OAK DR STE 270
TEMECULA, CA 92590
Effective as of 01-FEB-23

LE, VU, MD

Provider ID: N/A

28780 SINGLE OAK DR STE 270
TEMECULA, CA 92590
Effective as of 01-FEB-23

LIN, RICHARD, DO†

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-DEC-22

LIN, RICHARD, DO†

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-DEC-22

LUNA, MARIO, MD†

Provider ID: N/A

28780 SINGLE OAK DR STE 270

TEMECULA, CA 92590*
Effective as of 01-JUL-20

LUNA, MARIO, MD†

Provider ID: N/A

28780 SINGLE OAK DR STE 270
TEMECULA, CA 92590
Effective as of 01-JUL-16

RICHTER, ALEXANDER, MD

Provider ID: N/A

28780 SINGLE OAK DR STE 270
TEMECULA, CA 92590
Effective as of 01-FEB-23

RICHTER, ALEXANDER, MD

Provider ID: N/A

28780 SINGLE OAK DR STE 270
TEMECULA, CA 92590
Effective as of 01-FEB-23

RICHTER, ALEXANDER, MD

Provider ID: N/A

28780 SINGLE OAK DR STE 270
TEMECULA, CA 92590
Effective as of 01-FEB-23

RICHTER, ALEXANDER, MD

Provider ID: N/A

28780 SINGLE OAK DR STE 270
TEMECULA, CA 92590
Effective as of 01-FEB-23

ROBINSON, MATTHEW, DO†

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-JUN-21

ROBINSON, MATTHEW, DO†

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591*
Effective as of 01-JUL-23

ROBINSON, MATTHEW, DO†

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-JUL-22

ROBINSON, MATTHEW, DO†

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-JUL-22

ROGHANI, REZA, MD

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591*
Effective as of 01-JUN-23

ROGHANI, REZA, MD

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591*
Effective as of 01-JUN-23

ROGHANI, REZA, MD

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591*
Effective as of 01-JUN-23

ROGHANI, REZA, MD

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-MAR-23

ROGHANI, REZA, MD

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591

**C1. Lista de proveedores de la red
Médico de atención especializada**

Effective as of 01-MAR-23

ROSENBERG, GARY, DO

Provider ID: N/A

28780 SINGLE OAK DR STE 270
TEMECULA, CA 92590

Effective as of 01-FEB-23

ROSENBERG, GARY, DO

Provider ID: N/A

28780 SINGLE OAK DR STE 270
TEMECULA, CA 92590

Effective as of 01-FEB-23

ROSENBERG, GARY, DO

Provider ID: N/A

28780 SINGLE OAK DR STE 270
TEMECULA, CA 92590

Effective as of 01-FEB-23

ROSENBERG, GARY, DO

Provider ID: N/A

28780 SINGLE OAK DR STE 270
TEMECULA, CA 92590

Effective as of 01-FEB-23

SCHULTZEL, MARK, MD†

Provider ID: N/A

31170 TEMECULA PKWY STE 100
TEMECULA, CA 92592

Teleservice

Effective as of 01-OCT-22

THOLCKE, LOREN, DO

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591

Effective as of 01-JAN-24

THOLCKE, LOREN, DO

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591

Effective as of 01-JAN-24

THOLCKE, LOREN, DO

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591

Effective as of 01-AUG-23

THOLCKE, LOREN, DO

Provider ID: N/A

40949 WINCHESTER RD
TEMECULA, CA 92591

Effective as of 01-MAY-24

UPPAL, GURVINDER, MD

Provider ID: N/A

28780 SINGLE OAK DR STE 270
TEMECULA, CA 92590

Effective as of 01-FEB-23

UPPAL, GURVINDER, MD

Provider ID: N/A

28780 SINGLE OAK DR STE 270
TEMECULA, CA 92590

Effective as of 01-FEB-23

UPPAL, GURVINDER, MD

Provider ID: N/A

28780 SINGLE OAK DR STE 270
TEMECULA, CA 92590

Effective as of 01-FEB-23

SURGERY PLASTIC

CHAO, JAMES, MD†

Provider ID: N/A

27699 JEFFERSON AVE STE 201
TEMECULA, CA 92590

Effective as of 01-APR-20

MUDGE, BRADLEY, MD†

Provider ID: N/A

44605 AVENIDA DE MISSIONES STE 202
TEMECULA, CA 92592

Teleservice

Effective as of 01-NOV-19

MUDGE, BRADLEY, MD†

Provider ID: N/A

44605 AVENIDA DE MISSIONES STE 202
TEMECULA, CA 92592

Teleservice

Effective as of 01-OCT-19

URIAS, DANIEL, MD

Provider ID: N/A

27699 JEFFERSON AVE STE 305
TEMECULA, CA 92590

Effective as of 01-APR-24

VU, STEVE, MD

Provider ID: N/A

27699 JEFFERSON AVE STE 305
TEMECULA, CA 92590

Effective as of 01-JUN-23

VU, STEVE, MD

Provider ID: N/A

27699 JEFFERSON AVE STE 305
TEMECULA, CA 92590

Effective as of 01-JUN-23

SURGERY THORACIC

BANSAL, NEERAJ, MD

Provider ID: N/A


31573 RANCHO PUEBLO RD STE 210

C1. Lista de proveedores de la red Médico de atención especializada

TEMECULA, CA 92592
Effective as of 01-MAY-23


BANSAL, NEERAJ, MD

Provider ID: N/A

 31573 RANCHO PUEBLO
RD STE 210
TEMECULA, CA 92592
Effective as of 01-APR-23


RASI, ALFREDO, MD†

Provider ID: N/A

 31573 RANCHO PUEBLO
RD STE 210
TEMECULA, CA 92592
Effective as of 01-NOV-20

WANG, NAN, MD†


Provider ID: N/A

 31573 RANCHO PUEBLO
RD STE 210
TEMECULA, CA 92592
Effective as of 01-JUL-24

SURGICAL ONCOLOGY


SHAPER, EMANUEL, MD

Provider ID: N/A

 31625 DE PORTOLA RD STE
101
TEMECULA, CA 92592
Effective as of 01-JUL-24

SHAPER, EMANUEL, MD

Provider ID: N/A

 31625 DE PORTOLA RD STE
101
TEMECULA, CA 92592
Effective as of 01-JUL-24

UROLOGY

BRODAK, PHILIP, MD


Provider ID: N/A

 31565 RANCHO PUEBLO

RD STE 102B
TEMECULA, CA 92592
Effective as of 01-AUG-24


CONNER, RICHARD, MD†

Provider ID: N/A

 31565 RANCHO PUEBLO
RD STE 102B
TEMECULA, CA 92592
Effective as of 01-MAY-20


CRISELL, MONISHA, MD†

Provider ID: N/A

 31565 RANCHO PUEBLO
RD STE 102B
TEMECULA, CA 92592
Effective as of 01-MAY-20


LUTTGE, SCOTT, MD

Provider ID: N/A

 31565 RANCHO PUEBLO
RD STE 205
TEMECULA, CA 92592
Effective as of 01-MAY-23


TALANKI, VARUN, MD

Provider ID: N/A

 31565 RANCHO PUEBLO
RD STE 102B
TEMECULA, CA 92592
Effective as of 01-MAY-22

TALANKI, VARUN, MD

Provider ID: N/A

 31565 RANCHO PUEBLO
RD STE 102B
TEMECULA, CA 92592
Effective as of 01-MAY-22

FAMILY PRACTICE

RAY, ANNE, MD

Provider ID: N/A

 31951 DOVE CANYON DR
TRABUCO CANYON, CA

92679*
Effective as of 01-DEC-23

CERTIFIED REGISTERED NURSE MIDWIFE

ALLEN, ANNE, CRNM†

Provider ID: N/A

 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
Effective as of 01-JUL-22

ONEILL, THERESE, CRNM


Provider ID: N/A

 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
Effective as of 01-NOV-23

FAMILY PRACTICE

CASTANER, ZALYA, MD†

Provider ID: N/A

 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
Teleservice
Effective as of 01-FEB-24


MCHENRY, KATHRYN, DO

Provider ID: N/A

 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
Effective as of 01-FEB-24


PATEL, JITENBHAI, MD

Provider ID: N/A

 28477 LIZARD ROCKS RD
VALLEY CENTER, CA
92082*
Effective as of 01-FEB-24

PATEL, RAKESH, MD

Provider ID: N/A

 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
Effective as of 01-FEB-24

C1. Lista de proveedores de la red Médico de atención especializada

SCHULTZ, JAMES, MD

Provider ID: N/A

28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
Effective as of 01-FEB-24

PHYSICIANS ASSISTANT

WICKWARE, TRACY, PA

Provider ID: N/A

28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
Effective as of 01-MAY-23

ALLERGY IMMUNOLOGY

VOLPP, HEATHER, MD†

Provider ID: N/A

2067 W VISTA WAY
VISTA, CA 92083
Effective as of 01-JAN-24

VOLPP, HEATHER, MD†

Provider ID: N/A

2067 W VISTA WAY
VISTA, CA 92083
Effective as of 01-MAR-14

ZIERING, ROBERT, MD†

Provider ID: N/A

2067 W VISTA WAY STE 140
VISTA, CA 92083
Effective as of 01-SEP-21

ZIERING, ROBERT, MD†

Provider ID: N/A

2067 W VISTA WAY STE 140
VISTA, CA 92083
Effective as of 01-JUL-01

ZIERING, ROBERT, MD†

Provider ID: N/A

2067 W VISTA WAY STE 140
VISTA, CA 92083

Effective as of 01-SEP-22

ZIERING, ROBERT, MD†

Provider ID: N/A

2067 W VISTA WAY STE 140
VISTA, CA 92083
Effective as of 01-AUG-20

CARDIAC

ELECTROPHYSIOLOGY

BUI, HANH, MD

Provider ID: N/A

906 SYCAMORE AVE STE
104
VISTA, CA 92081

Teleservice

Effective as of 01-MAY-23

CARDIOVASCULAR DISEASE

BUI, HANH, MD

Provider ID: N/A

906 SYCAMORE AVE STE
104
VISTA, CA 92081

Teleservice

Effective as of 01-MAY-23

DO, HULBERT, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JUL-22

DO, HULBERT, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JUL-22

MOUSSAVIAN, MEHRAN, DO†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-OCT-21

MOUSSAVIAN, MEHRAN, DO†

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-OCT-21

PARIKH, MILIND, DO†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

PARKS, MONICA, MD

Provider ID: N/A

906 SYCAMORE AVE STE
104
VISTA, CA 92081
Teleservice
Effective as of 01-JAN-24

REDDY, PAVAN, MD

Provider ID: N/A

2095 W VISTA WAY STE 107
VISTA, CA 92083
Effective as of 01-SEP-24

CERTIFIED

ACUPUNCTURIST

DUFFIELD, GARY, LAC

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-SEP-24

DUFFIELD, GARY, LAC

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-SEP-24

C1. Lista de proveedores de la red Médico de atención especializada

DUFFIELD, GARY, LAC

Provider ID: N/A

📍 1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-SEP-24

DUFFIELD, GARY, LAC

Provider ID: N/A

📍 1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-SEP-24

SONG, CAROL, LAC

Provider ID: N/A

📍 1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

CERTIFIED NURSE PRACTITIONER

AYELE, MAHOGANY, NP

Provider ID: N/A

📍 1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

BAEK, KILHYO, NP

Provider ID: N/A

📍 1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-FEB-24

BAEK, KILHYO, NP

Provider ID: N/A

📍 134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-FEB-24

BAEZ, ELIZABETH, NP

Provider ID: N/A

📍 1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

BJORNSON, MICHELE, NP

Provider ID: N/A

📍 134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-JUN-24

BJORNSON, MICHELE, NP

Provider ID: N/A

📍 1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

BRAAMSE, CHLOE, NP

Provider ID: N/A

📍 204 S SANTA FE AVE
VISTA, CA 92084

Teleservice

Effective as of 01-JUN-23

CARDINELL, ANNA, NP†

Provider ID: N/A

📍 910 SYCAMORE AVE STE
270
VISTA, CA 92081

Effective as of 01-AUG-22

CHAMBERLIN, KALIANA, NP

Provider ID: N/A

📍 1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-21

CHATHAM, OLIVIA, NP†

Provider ID: N/A

📍 950 CIVIC CENTER DR STE
A
VISTA, CA 92083

Teleservice

Effective as of 01-NOV-22

CHILAKA, SAMUEL, NP

Provider ID: N/A

📍 134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-JAN-24

CHILAKA, SAMUEL, NP

Provider ID: N/A

📍 1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

CHRISTY, TYLER, NPF

Provider ID: N/A

📍 1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

CHRISTY, TYLER, NPF

Provider ID: N/A

📍 134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-JAN-24

CHRISTY, TYLER, NPF

Provider ID: N/A

📍 517 N HORNE ST
VISTA, CA 92083

Effective as of 01-JAN-24

CHRISTY, TYLER, NPF

Provider ID: N/A

📍 105 DURIAN ST STE A
VISTA, CA 92083

Effective as of 01-JAN-24

CLARK, CYNTHIA, NP†

Provider ID: N/A

📍 134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-JAN-21

CORY, ALLISON, NP

Provider ID: N/A

📍 134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-JAN-21

CORY, ALLISON, NP

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

105 DURIAN ST STE B
VISTA, CA 92083
Effective as of 01-FEB-24

CORY, ALLISON, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

CROTTEAU, ALEX, NP

Provider ID: N/A

204 S SANTA FE AVE
VISTA, CA 92084
Effective as of 01-MAY-21

DEKKERS-O'HARE, INGRID, NP†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-21

DO, JACKIE, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-AUG-24

DO, JACKIE, NP

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-AUG-24

DO, JACKIE, NP

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JAN-24

EKLUND, BONNIE, NP†

Provider ID: N/A

134 GRAPEVINE RD

VISTA, CA 92083

Effective as of 01-JAN-24

EKLUND, BONNIE, NP†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

HALGEDAHL, YI TING, NP

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JAN-24

HALGEDAHL, YI TING, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-21

HOWELL, AMANDA, NP

Provider ID: N/A

105 DURIAN ST STE A
VISTA, CA 92083
Effective as of 01-JAN-24

HOWELL, AMANDA, NP

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JAN-24

HOWELL, AMANDA, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

HUERTA, STEVEN, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JUL-24

HUERTA, STEVEN, NP

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JUL-24

JONES, STACY, NP

Provider ID: N/A

204 S SANTA FE AVE
VISTA, CA 92084
Effective as of 01-MAY-21

KAYE, ALYSON, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-APR-24

KAYE, ALYSON, NP

Provider ID: N/A

105 DURIAN ST
VISTA, CA 92083
Effective as of 01-FEB-24

KAYE, ALYSON, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-OCT-21

KELLEHER, BRIDGET, NP

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-APR-24

KELLEHER, BRIDGET, NP

Provider ID: N/A

105 DURIAN ST STE B
VISTA, CA 92083
Effective as of 01-FEB-24

KELLEHER, BRIDGET, NP

Provider ID: N/A

1000 VALE TERRACE DR

C1. Lista de proveedores de la red Médico de atención especializada

VISTA, CA 92084
Effective as of 01-APR-24

KESSLER, JENNIFER, NP

Provider ID: N/A
📍 1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-DEC-23

KORMANIK, PATRICIA, NP†

Provider ID: N/A
📍 910 SYCAMORE AVE STE
102
VISTA, CA 92081
Effective as of 01-JUL-21

MERRITT, MARISA, NP

Provider ID: N/A
📍 204 S SANTA FE AVE
VISTA, CA 92084
Teleservice
Effective as of 01-AUG-22

NAVA, PETER, NP

Provider ID: N/A
📍 1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

NAVA, PETER, NP

Provider ID: N/A
📍 134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JAN-24

NAVARRO, STEVEN, NPF

Provider ID: N/A
📍 204 S SANTA FE AVE
VISTA, CA 92084
Effective as of 01-JUN-24

NICHOLAS, ESTELA, NP

Provider ID: N/A
📍 1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-21

NIZHEBORSKY, OKSANA, NP

Provider ID: N/A
📍 2023 W VISTA WAY STE B
VISTA, CA 92083
Effective as of 01-SEP-24

NIZHEBORSKY, OKSANA, NP

Provider ID: N/A
📍 2067 W VISTA WAY STE 160
VISTA, CA 92083
Effective as of 01-SEP-24

PATEMAN, CAROLYN, NP

Provider ID: N/A
📍 134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JAN-24

PATEMAN, CAROLYN, NP

Provider ID: N/A
📍 1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-21

PRITZKER, JOELY, NP

Provider ID: N/A
📍 1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-21

PRITZKER, JOELY, NP

Provider ID: N/A
📍 134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-FEB-24

ROSS, BRIDGET, NPF

Provider ID: N/A
📍 204 S SANTA FE AVE
VISTA, CA 92084
Teleservice
Effective as of 01-DEC-21

SCHAEPE, RHODORA, NP

Provider ID: N/A
📍 1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-MAR-24

SHAHBAZ, LINNAE, NPF

Provider ID: N/A
📍 1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-MAR-24

SHAHBAZ, LINNAE, NPF

Provider ID: N/A
📍 1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-APR-24

SRILASAK, MICHELE, NP†

Provider ID: N/A
📍 910 SYCAMORE AVE STE
102
VISTA, CA 92081
Effective as of 01-JUL-21

TABARANZA, PHOEBE, NPF

Provider ID: N/A
📍 204 S SANTA FE AVE
VISTA, CA 92084
Teleservice
Effective as of 01-OCT-22

WAGNER, TASIA, NP

Provider ID: N/A
📍 105 DURIAN ST
VISTA, CA 92083
Effective as of 01-FEB-24

WAGNER, TASIA, NP

Provider ID: N/A
📍 134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-APR-24

WAGNER, TASIA, NP

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-APR-24

WILLIAMS, JINA, NP

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-SEP-22

WINDHAM, SUZONNE, NP

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JAN-24

WINDHAM, SUZONNE, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

YCASAS, EMILY, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

YCASAS, EMILY, NP

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-MAY-23

CERTIFIED REGISTERED NURSE MIDWIFE

GUIDI, CASEY, CRNM

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JUN-23

ZAMORA-FLYR, MARIA, CRNM

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

ZAMORA-FLYR, MARIA, CRNM

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JAN-24

CHIROPRACTOR

CORTEZ, JAIME, DC†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JUL-22

CORTEZ, JAIME, DC†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-OCT-21

JU, NATHANIEL, DC†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-OCT-21

JU, NATHANIEL, DC†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JUL-22

JU, NATHANIEL, DC†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

JU, NATHANIEL, DC†

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JAN-24

JU, NATHANIEL, DC†

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JUL-22

LOVERN, JENNIFER, DC

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JUN-24

LOVERN, JENNIFER, DC

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-AUG-24

LOVERN, JENNIFER, DC

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JUN-24

LOVERN, JENNIFER, DC

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-AUG-24

OLSON, ROBERT, DC

Provider ID: N/A


906 SYCAMORE AVE STE
210
VISTA, CA 92081
Effective as of 01-SEP-21

DERMATOLOGY

GRUSHCHAK, SOLOMIYA, MD


Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

 1934 VIA CTR STE B
VISTA, CA 92081
Effective as of 01-JAN-24


GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

 1934 VIA CTR STE B
VISTA, CA 92081
Effective as of 01-JAN-24


GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

 1934 VIA CTR STE B
VISTA, CA 92081
Effective as of 01-JAN-24


GRUSHCHAK, SOLOMIYA, MD

Provider ID: N/A

 1934 VIA CTR STE B
VISTA, CA 92081
Effective as of 01-JAN-24


HENDERSON, GREGORY, MD[†]

Provider ID: N/A

 1934 VIA CTR STE B
VISTA, CA 92081
Effective as of 01-SEP-21


HENDERSON, GREGORY, MD[†]

Provider ID: N/A

 2395 S MELROSE DR
VISTA, CA 92081
Effective as of 01-SEP-21

STEIN, ALEXANDER, MD

Provider ID: N/A

 2067 W VISTA WAY
VISTA, CA 92083
Effective as of 01-JUL-23

EMERGENCY MEDICINE

ZIMMERMAN, DAVID, MD

Provider ID: N/A


 145 THUNDER DR

VISTA, CA 92083
Effective as of 01-MAY-24

FAMILY PRACTICE


MARTINEZ, LESLY, MD

Provider ID: N/A

 1000 VALE TERRACE DR
VISTA, CA 92084*
Effective as of 01-JUL-24

MARTINEZ, LESLY, MD

Provider ID: N/A

 134 GRAPEVINE RD
VISTA, CA 92083*
Effective as of 01-JUL-24

PUDOL, CHRISTOPHER, DO


Provider ID: N/A

 134 GRAPEVINE RD
VISTA, CA 92083
Teleservice

Effective as of 01-MAR-24


ROJAS, STEVEN, MD

Provider ID: N/A

 1840 WEST DR
VISTA, CA 92083
Effective as of 01-SEP-24


SNYDER, OLE, MD

Provider ID: N/A

 1000 VALE TERRACE DR
VISTA, CA 92084*
Effective as of 01-JUN-24

SNYDER, OLE, MD

Provider ID: N/A

 134 GRAPEVINE RD
VISTA, CA 92083*
Effective as of 01-JUN-24

TRAN, DAO, DO


Provider ID: N/A

 134 GRAPEVINE RD

VISTA, CA 92083
Effective as of 01-MAY-23


TRAN, DAO, DO

Provider ID: N/A

 1000 VALE TERRACE DR
VISTA, CA 92084*
Effective as of 01-MAY-23


VIDAL, MONICA, DO[†]

Provider ID: N/A

 1000 VALE TERRACE DR
VISTA, CA 92084*
Effective as of 01-JUL-24

VIDAL, MONICA, DO[†]


Provider ID: N/A

 134 GRAPEVINE RD
VISTA, CA 92083*
Effective as of 01-JUL-24

GENERAL PRACTICE

TANUS, DEBORAH, DO

Provider ID: N/A


 1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-NOV-23

GYNECOLOGIC

ONCOLOGY

ESKANDER, RAMEZ, MD[†]

Provider ID: N/A

 910 SYCAMORE AVE STE
102
VISTA, CA 92081
Effective as of 01-JUL-21

HEMATOLOGY /

ONCOLOGY

ANDREY, JEFFREY, MD[†]

Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

2067 W VISTA WAY STE 295
VISTA, CA 92083*
Effective as of 01-APR-23

ANDREY, JEFFREY, MD†
Provider ID: N/A

2067 W VISTA WAY STE 295
VISTA, CA 92083
Effective as of 01-SEP-22

BASERI, BABAK, MD†
Provider ID: N/A

2067 W VISTA WAY STE 295
VISTA, CA 92083
Effective as of 01-JUL-22

BASERI, BABAK, MD†
Provider ID: N/A

2067 W VISTA WAY STE 295
VISTA, CA 92083*
Effective as of 01-APR-23

BASERI, BABAK, MD
Provider ID: N/A

1250 SUNSET DR STE 101
VISTA, CA 92081
Effective as of 01-APR-24

MARJON, PHILIP, MD†
Provider ID: N/A

2067 W VISTA WAY STE 295
VISTA, CA 92083*
Effective as of 01-APR-23

PARSI, HOOMAN, MD
Provider ID: N/A

2067 W VISTA WAY STE 295
VISTA, CA 92083
Effective as of 01-JUL-23

SARWARI, NAWID, MD
Provider ID: N/A

2067 W VISTA WAY STE 295
VISTA, CA 92083
Effective as of 01-JUL-23

SAUNDERS, PHILLIP, DO†
Provider ID: N/A

2067 W VISTA WAY STE 295
VISTA, CA 92083
Effective as of 01-NOV-22

SAUNDERS, PHILLIP, DO†
Provider ID: N/A

2067 W VISTA WAY STE 295
VISTA, CA 92083*
Effective as of 01-APR-23

SCHWERKOSKE, JOHN, MD†
Provider ID: N/A

2067 W VISTA WAY STE 295
VISTA, CA 92083
Effective as of 01-JUL-23

SCHWERKOSKE, JOHN, MD†
Provider ID: N/A

2067 W VISTA WAY STE 295
VISTA, CA 92083
Effective as of 01-SEP-22

SUBRAMANIAN, RUPA, MD†
Provider ID: N/A

910 SYCAMORE AVE STE
102
VISTA, CA 92081
Effective as of 01-AUG-20

HOSPICE AND PALLIATIVE MEDICINE

RUBENSIK, TAMARA, MD†
Provider ID: N/A

910 SYCAMORE AVE STE
102
VISTA, CA 92081
Effective as of 01-JUL-21

HOSPITALIST MD/DO

LOPEZ, SANDRA, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

INTERNAL MEDICINE

BAUTISTA, JENNIFER, MD
Provider ID: N/A

2067 W VISTA WAY STE 160
VISTA, CA 92083
Effective as of 01-FEB-23

PARIKH, MILIND, DO†
Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JUL-22

SHABANIAN, LEILA, MD
Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083*
Effective as of 01-MAY-24

SHABANIAN, LEILA, MD
Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-MAY-24


INTERVENTIONAL CARDIOLOGY

BUI, HANH, MD
Provider ID: N/A

906 SYCAMORE AVE STE
104
VISTA, CA 92081
Teleservice
Effective as of 01-JAN-24


DO, HULBERT, MD†
Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

 1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24


KABRA, ASHISH, MD

Provider ID: N/A

 906 SYCAMORE AVE STE
104
VISTA, CA 92081
Effective as of 01-JAN-24


MOUSSAVIAN, MEHRAN, DO†

Provider ID: N/A

 1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

MOUSSAVIAN, MEHRAN, DO†

Provider ID: N/A

 1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JUL-22

PARKS, MONICA, MD

Provider ID: N/A

 906 SYCAMORE AVE STE
104
VISTA, CA 92081


Teleservice

Effective as of 01-OCT-23

LICENSED CLINICAL SOCIAL WORKER


ACOSTA, AZUCENA, LCSW

Provider ID: N/A

 134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JAN-24


ACOSTA, AZUCENA, LCSW

Provider ID: N/A

 1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24


CRUZ, VANESSA, LCSW

Provider ID: N/A

 1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-21


CRUZ, VANESSA, LCSW

Provider ID: N/A

 1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JUN-23


CRUZ, VANESSA, LCSW

Provider ID: N/A

 134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JAN-21


DOUGHERTY, CHRISTINE, LCSW

Provider ID: N/A

 1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-FEB-24


DOUGHERTY, CHRISTINE, LCSW

Provider ID: N/A

 1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24


DOUGHERTY, CHRISTINE, LCSW

Provider ID: N/A

 134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JAN-24


GODINEZ, BRENDA, LCSW

Provider ID: N/A

 134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JAN-24


GODINEZ, BRENDA, LCSW

Provider ID: N/A

 1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24


MEJIA, SHAYNE, LCSW

Provider ID: N/A

 1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-AUG-24


MENDEZ, ADRIANA, LCSW

Provider ID: N/A

 134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JAN-24


MENDEZ, ADRIANA, LCSW

Provider ID: N/A

 1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

NEVILLE, MARGARET, LCSW

Provider ID: N/A

 1000 VALE TERRACE DR
VISTA, CA 92084
Teleservice
Effective as of 01-JAN-24

NEVILLE, MARGARET, LCSW

Provider ID: N/A

 134 GRAPEVINE RD
VISTA, CA 92083
Teleservice
Effective as of 01-JAN-24

NEVILLE, MARGARET, LCSW

Provider ID: N/A

 134 GRAPEVINE RD
VISTA, CA 92083
Teleservice
Effective as of 01-JUN-23

C1. Lista de proveedores de la red Médico de atención especializada

SANCHEZ, ADRIANA, LCSW

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-JAN-24

SANCHEZ, ADRIANA, LCSW

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

SMITH, SONYA, LCSW

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

SMITH, SONYA, LCSW

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-JAN-24

WILSON, CARLENE, LCSW

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JUN-23

WILSON, CARLENE, LCSW

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

ZAPPONE, ALIDA, LCSW

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Teleservice

Effective as of 01-JAN-24

ZAPPONE, ALIDA, LCSW

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Teleservice

Effective as of 01-JAN-24

MARRIAGE FAMILY THERAPIST

GROVE, VICKI, MFT

Provider ID: N/A

2385 S MELROSE DR
VISTA, CA 92081

Effective as of 01-JAN-24

MEYERHOF, GRETA, MFT†

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-JAN-24

MEYERHOF, GRETA, MFT†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

SLOAN, CRISTINA, MFT

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-MAY-24

NEPHROLOGY

KAYAL, ANAS, MD

Provider ID: N/A

2095 W VISTA WAY STE 216
VISTA, CA 92083

Effective as of 01-MAY-24

KAYAL, ANAS, MD

Provider ID: N/A

2095 W VISTA WAY STE 216

VISTA, CA 92083

Effective as of 01-JUN-24

OBSTETRICS / GYNECOLOGY

ARRIETA, IRIS, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JUL-22

ARRIETA, IRIS, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-OCT-21

ARRIETA, IRIS, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

BINDER, PRATIBHA, MD†

Provider ID: N/A

910 SYCAMORE AVE STE
102

VISTA, CA 92081

Effective as of 01-JUL-21

DIETERICH, FREDERICK, MD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

FRANCIS, LARRY, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JUL-22

FRANCIS, LARRY, MD†

Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-DEC-22

FRANCIS, LARRY, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-DEC-22

FRANCIS, LARRY, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

HAWKINS, MELISSA, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-SEP-14

HAWKINS, MELISSA, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JUL-22

HAWKINS, MELISSA, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

KARANIKKIS, CHRISTOS, DO†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JUL-22

KARANIKKIS, CHRISTOS, DO†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

KARANIKKIS, CHRISTOS, DO†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-OCT-21

KARANIKKIS, CHRISTOS, DO†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-MAR-18

LEON, JOSUE, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JUN-21

LEON, JOSUE, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

LEONARD, LISA, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

LEONARD, LISA, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-OCT-21

LEONARD, LISA, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JUL-22

LOPEZ, SANDRA, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084*
Effective as of 01-APR-12

MAZAREI, RAHELE, DO

Provider ID: N/A

2067 W VISTA WAY STE 200
VISTA, CA 92083
Effective as of 01-JUN-23

QUAN, MARIA, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JUL-22

QUAN, MARIA, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-MAR-23

QUAN, MARIA, MD†

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

SUNTAY, BERK, MD

Provider ID: N/A

2067 W VISTA WAY STE 200
VISTA, CA 92083
Effective as of 01-JUN-23

**OCCUPATIONAL
THERAPIST**

**CHAVEZ-SERRANO, VIOLETA,
OT**

Provider ID: N/A

1840 WEST DR
VISTA, CA 92083
Effective as of 01-FEB-24

OPHTHALMOLOGY

C1. Lista de proveedores de la red Médico de atención especializada

AMINLARI, ARDALAN, MD

Provider ID: N/A

1930 VIA CENTRE DR
VISTA, CA 92081

Effective as of 01-SEP-21

CHEN, HEATHER, MD†

Provider ID: N/A

2067 W VISTA WAY STE 120
VISTA, CA 92083

Effective as of 01-SEP-21

CHEN, HEATHER, MD†

Provider ID: N/A

2067 W VISTA WAY STE 120
VISTA, CA 92083

Effective as of 01-NOV-21

JOHNSTON, ERIC, MD

Provider ID: N/A

1930 VIA CTR
VISTA, CA 92081

Effective as of 01-SEP-21

STEPHENS, BENJAMIN, MD

Provider ID: N/A

2067 W VISTA WAY STE 120
VISTA, CA 92083

Effective as of 01-JUN-23

STEPHENS, BENJAMIN, MD

Provider ID: N/A

2067 W VISTA WAY STE 120
VISTA, CA 92083

Effective as of 01-JUL-23

ZAVERI, MAULIK, MD†

Provider ID: N/A

2067 W VISTA WAY STE 120
VISTA, CA 92083

Effective as of 01-MAR-14

ZAVERI, MAULIK, MD†

Provider ID: N/A

2067 W VISTA WAY STE 120
VISTA, CA 92083

Effective as of 01-SEP-21

OPTOMETRIST

GEE, JENNIFER, OD

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-JUL-22

GEE, JENNIFER, OD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JUL-22

GEE, JENNIFER, OD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-SEP-22

GEE, JENNIFER, OD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-OCT-21

GEE, JENNIFER, OD

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-SEP-22

KIM, MICHAEL, OD

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Teleservice

Effective as of 01-JAN-21

KIM, MICHAEL, OD

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Teleservice

Effective as of 01-JUL-22

KIM, MICHAEL, OD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

KIM, MICHAEL, OD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JUL-22

KOUCHAK, YASMIN, OD†

Provider ID: N/A

2067 W VISTA WAY STE 120
VISTA, CA 92083

Teleservice

Effective as of 01-JUL-23

MORA, WENDY, OD

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-JUL-22

MORA, WENDY, OD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Teleservice

Effective as of 01-JUL-22

MORA, WENDY, OD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Teleservice

Effective as of 01-AUG-24

MORA, WENDY, OD

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Teleservice

Effective as of 01-JAN-21

MORA, WENDY, OD

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-JAN-24

RICH, RYAN, OD

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-JAN-24

RICH, RYAN, OD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-21

RICH, RYAN, OD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JUL-22

RICH, RYAN, OD

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-JUL-22

TAM, EMILY, OD

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-JUL-22

TAM, EMILY, OD

Provider ID: N/A

1000 VALE TERRACE DR

VISTA, CA 92084

Effective as of 01-JUL-22

TAM, EMILY, OD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-MAY-24

TAM, EMILY, OD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-SEP-22

TAM, EMILY, OD

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Effective as of 01-JAN-24

TANG, ASHLEY, OD†

Provider ID: N/A

2067 W VISTA WAY STE 120
VISTA, CA 92083

Teleservice

Effective as of 01-NOV-21

TRAN, JESSICA, OD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-DEC-23

OTOLARYNGOLOGY

BERRY, JULIE, MD†

Provider ID: N/A

2023 W VISTA WAY STE J
VISTA, CA 92083

Effective as of 01-AUG-06

KUSHNARYOV, ANTON, MD†

Provider ID: N/A

2023 W VISTA WAY STE J

VISTA, CA 92083

Effective as of 01-OCT-17

PEDIATRICS

RONAN, KEVIN, MD

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083*

Effective as of 01-JUL-24

RONAN, KEVIN, MD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JUL-24

PHYSICIANS ASSISTANT

GILLAN, JAMES, PA

Provider ID: N/A

2023 W VISTA WAY STE B
VISTA, CA 92083

Effective as of 01-SEP-24

GILLAN, JAMES, PA

Provider ID: N/A

2067 W VISTA WAY STE 160
VISTA, CA 92083

Effective as of 01-SEP-24

GLASSER, DANIEL, PA

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

GLASSER, DANIEL, PA

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JUL-22

GONZALEZ, NICOLETTE, PA

Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

204 S SANTA FE AVE
VISTA, CA 92084
Teleservice
Effective as of 01-JUN-24

LEPARD, KRISTINA, PA

Provider ID: N/A
204 S SANTA FE AVE
VISTA, CA 92084
Teleservice
Effective as of 01-MAR-23

WALLACE, STEPHANIE, PA

Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-21

PODIATRIST

MILLER, JULIE, DPM

Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

MILLER, JULIE, DPM

Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JUL-22

MILLER, JULIE, DPM

Provider ID: N/A
134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-FEB-24

MILLER, JULIE, DPM

Provider ID: N/A
134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-APR-24

PREVENTATIVE MEDICINE

GENERAL

DEPORTO, TANYA, MD

Provider ID: N/A
204 S SANTA FE AVE
VISTA, CA 92084
Teleservice
Effective as of 01-MAY-21

PSYCHIATRY

BELL, JENNIFER, DO

Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-FEB-24

BELL, JENNIFER, DO

Provider ID: N/A
134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-FEB-24

BELL, JENNIFER, DO

Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-FEB-24

BELL, JENNIFER, DO

Provider ID: N/A
134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-FEB-24

CHRISTIANSON, WARREN, DO

Provider ID: N/A
134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-AUG-21

CHRISTIANSON, WARREN, DO

Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-AUG-24

CHRISTIANSON, WARREN, DO

Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-AUG-21

CHRISTIANSON, WARREN, DO

Provider ID: N/A
134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-AUG-21

CHRISTIANSON, WARREN, DO

Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-AUG-21

CHRISTIANSON, WARREN, DO

Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-AUG-24

PATEL, MITESH, MD

Provider ID: N/A
134 GRAPEVINE RD
VISTA, CA 92083
Teleservice
Effective as of 01-JAN-24

PATEL, MITESH, MD

Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

PATEL, MITESH, MD

Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

C1. Lista de proveedores de la red Médico de atención especializada

PATEL, MITESH, MD

Provider ID: N/A

134 GRAPEVINE RD
VISTA, CA 92083

Teleservice

Effective as of 01-JAN-24

PUBLIC HEALTH

PREVENTATIVE MEDICINE

WALKER, BRADLEY, MD

Provider ID: N/A

1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-MAY-23

PULMONARY DISEASES

BAUTISTA, JENNIFER, MD

Provider ID: N/A

2067 W VISTA WAY STE 160
VISTA, CA 92083

Effective as of 01-MAY-24

BAUTISTA, JENNIFER, MD

Provider ID: N/A

2067 W VISTA WAY STE 160
VISTA, CA 92083

Effective as of 01-SEP-24

BAUTISTA, JENNIFER, MD†

Provider ID: N/A

2023 W VISTA WAY STE B
VISTA, CA 92083

Effective as of 01-SEP-24

EISMAN, SCOTT, MD

Provider ID: N/A

2023 W VISTA WAY STE B
VISTA, CA 92083

Effective as of 01-SEP-24

EISMAN, SCOTT, MD

Provider ID: N/A

2067 W VISTA WAY STE 160
VISTA, CA 92083

Effective as of 01-MAY-24

EISMAN, SCOTT, MD

Provider ID: N/A

2067 W VISTA WAY STE 160
VISTA, CA 92083

Effective as of 01-SEP-24

FUSSELL, KEVIN, MD

Provider ID: N/A

2067 W VISTA WAY STE 160
VISTA, CA 92083

Effective as of 01-SEP-24

FUSSELL, KEVIN, MD

Provider ID: N/A

2067 W VISTA WAY STE 160
VISTA, CA 92083

Effective as of 01-MAY-24

FUSSELL, KEVIN, MD

Provider ID: N/A

2023 W VISTA WAY STE B
VISTA, CA 92083

Effective as of 01-SEP-24

GADRE, ABHISHEK, MD

Provider ID: N/A

2023 W VISTA WAY STE B
VISTA, CA 92083

Effective as of 01-SEP-24

GADRE, ABHISHEK, MD

Provider ID: N/A

2067 W VISTA WAY STE 160
VISTA, CA 92083

Effective as of 01-SEP-24

GADRE, ABHISHEK, MD

Provider ID: N/A

2067 W VISTA WAY STE 160
VISTA, CA 92083

Effective as of 01-MAY-24

HOOPER, WILLIAM, MD

Provider ID: N/A

2067 W VISTA WAY STE 160
VISTA, CA 92083

Effective as of 01-MAY-24

HOOPER, WILLIAM, MD

Provider ID: N/A

2067 W VISTA WAY STE 160
VISTA, CA 92083

Effective as of 01-SEP-24

HOOPER, WILLIAM, MD

Provider ID: N/A

2023 W VISTA WAY STE B
VISTA, CA 92083

Effective as of 01-SEP-24

HSING, ANDREW, MD

Provider ID: N/A

2023 W VISTA WAY STE B
VISTA, CA 92083

Effective as of 01-SEP-24

HSING, ANDREW, MD

Provider ID: N/A

2067 W VISTA WAY STE 160
VISTA, CA 92083

Effective as of 01-SEP-24

HSING, ANDREW, MD

Provider ID: N/A

2067 W VISTA WAY STE 160
VISTA, CA 92083

Effective as of 01-MAY-24

HSING, ANDREW, MD

Provider ID: N/A

2067 W VISTA WAY STE 160
VISTA, CA 92083

Effective as of 01-JAN-24

HSING, ANDREW, MD

Provider ID: N/A

C1. Lista de proveedores de la red Médico de atención especializada

2067 W VISTA WAY STE 160
VISTA, CA 92083
Effective as of 01-FEB-23

KABADI, ALISHA, MD

Provider ID: N/A

2023 W VISTA WAY
VISTA, CA 92083
Effective as of 01-SEP-24

KABADI, ALISHA, MD

Provider ID: N/A

2023 W VISTA WAY
VISTA, CA 92083
Effective as of 01-MAY-24

KABADI, ALISHA, MD

Provider ID: N/A

2067 W VISTA WAY STE 160
VISTA, CA 92083
Effective as of 01-SEP-24

KABADI, ALISHA, MD

Provider ID: N/A

2067 W VISTA WAY STE 160
VISTA, CA 92083
Effective as of 01-SEP-24

LIANG, NI-CHENG, MD

Provider ID: N/A

2067 W VISTA WAY STE 160
VISTA, CA 92083
Effective as of 01-SEP-24

LIANG, NI-CHENG, MD

Provider ID: N/A

2067 W VISTA WAY STE 160
VISTA, CA 92083
Effective as of 01-MAY-24

LIANG, NI-CHENG, MD

Provider ID: N/A

2023 W VISTA WAY STE B
VISTA, CA 92083
Effective as of 01-SEP-24

MAGANA, MARISA, MD

Provider ID: N/A

2067 W VISTA WAY STE 160
VISTA, CA 92083
Effective as of 01-FEB-24

MAKANI, SAMIR, MD

Provider ID: N/A

2067 W VISTA WAY STE 160
VISTA, CA 92083
Effective as of 01-SEP-24

MAKANI, SAMIR, MD

Provider ID: N/A

2023 W VISTA WAY STE B
VISTA, CA 92083
Effective as of 01-SEP-24

PINO, ALEJANDRO, MD

Provider ID: N/A

2023 W VISTA WAY STE B
VISTA, CA 92083
Effective as of 01-SEP-24

PINO, ALEJANDRO, MD

Provider ID: N/A

2067 W VISTA WAY STE 160
VISTA, CA 92083
Effective as of 01-SEP-24

PINO, ALEJANDRO, MD

Provider ID: N/A

2067 W VISTA WAY STE 160
VISTA, CA 92083
Effective as of 01-FEB-23

PINO, ALEJANDRO, MD

Provider ID: N/A

2067 W VISTA WAY STE 160
VISTA, CA 92083
Effective as of 01-MAY-24

SARNOFF, ROBERT, MD

Provider ID: N/A

2067 W VISTA WAY STE 160
VISTA, CA 92083
Effective as of 01-MAY-24

SARNOFF, ROBERT, MD

Provider ID: N/A

2067 W VISTA WAY STE 160
VISTA, CA 92083
Effective as of 01-SEP-24

SARNOFF, ROBERT, MD

Provider ID: N/A

2023 W VISTA WAY STE B
VISTA, CA 92083
Effective as of 01-SEP-24

SHIN, STEPHANIE, MD

Provider ID: N/A

2023 W VISTA WAY STE B
VISTA, CA 92083
Effective as of 01-SEP-24

SHIN, STEPHANIE, MD

Provider ID: N/A

2067 W VISTA WAY STE 160
VISTA, CA 92083
Effective as of 01-SEP-24

TRAN, SHERI, MD

Provider ID: N/A

2067 W VISTA WAY STE 160
VISTA, CA 92083
Effective as of 01-SEP-24

TRAN, SHERI, MD

Provider ID: N/A

2067 W VISTA WAY STE 160
VISTA, CA 92083
Effective as of 01-MAY-24

TRAN, SHERI, MD

Provider ID: N/A

2023 W VISTA WAY STE B
VISTA, CA 92083
Effective as of 01-SEP-24

**C1. Lista de proveedores de la red
Médico de atención especializada**

ZHANG, MICHELLE, MD

Provider ID: N/A

📍 2023 W VISTA WAY STE B
VISTA, CA 92083

Effective as of 01-SEP-24

ZHANG, MICHELLE, MD

Provider ID: N/A

📍 2067 W VISTA WAY STE 160
VISTA, CA 92083

Effective as of 01-MAY-24

ZHANG, MICHELLE, MD

Provider ID: N/A

📍 2067 W VISTA WAY STE 160
VISTA, CA 92083

Effective as of 01-SEP-24

ZHANG, MICHELLE, MD

Provider ID: N/A

📍 2067 W VISTA WAY STE D
VISTA, CA 92083

Effective as of 01-SEP-23

RADIOLOGY DIAGNOSTIC

PATEL, NIKHIL, MD

Provider ID: N/A

📍 906 SYCAMORE AVE STE
100
VISTA, CA 92081

Effective as of 01-JUN-24

PATEL, NIKHIL, MD

Provider ID: N/A

📍 906 SYCAMORE AVE STE
100
VISTA, CA 92081

Effective as of 01-DEC-23

STEINBERGER, AMANDA, DO

Provider ID: N/A

📍 906 SYCAMORE AVE STE
100

VISTA, CA 92081
Effective as of 01-JUL-24

**REGISTERED DIETITIAN /
NUTRITIONIST**

CARLSON, STACY, RD

Provider ID: N/A

📍 910 SYCAMORE AVE STE
270

VISTA, CA 92081

Effective as of 01-AUG-24

RUBIO, GLORIA, RD

Provider ID: N/A

📍 910 SYCAMORE AVE STE
270

VISTA, CA 92081

Effective as of 01-AUG-24

**REGISTERED PHYSICAL
THERAPIST**

AMBROSE, CHRISTOPHER, PT

Provider ID: N/A

📍 2067 W VISTA WAY STE 185
VISTA, CA 92083

Effective as of 01-JAN-21

BOUCHARD, REID, PT

Provider ID: N/A

📍 1958 VIA CENTRE DR
VISTA, CA 92081

Effective as of 01-OCT-21

BOUTELLE, DAVID, PT

Provider ID: N/A

📍 2067 W VISTA WAY STE 185
VISTA, CA 92083

Effective as of 01-FEB-24

DOULL, MATTHEW, PT

Provider ID: N/A

📍 1958 VIA CTR

VISTA, CA 92081

Teleservice

Effective as of 01-JUN-23

ESSER, STEPHANIE, PT

Provider ID: N/A

📍 1958 VIA CTR
VISTA, CA 92081

Teleservice

Effective as of 01-JUN-24

GARBER, MARC, PT

Provider ID: N/A

📍 1958 VIA CTR
VISTA, CA 92081

Teleservice

Effective as of 01-OCT-21

PENNINGTON, JENNIFER, PT

Provider ID: N/A

📍 1958 VIA CTR
VISTA, CA 92081

Teleservice

Effective as of 01-OCT-21

TAMAYO, SYDNIE, PT

Provider ID: N/A

📍 1958 VIA CTR
VISTA, CA 92081

Teleservice

Effective as of 01-OCT-23

WILSON, JENNIFER, PT

Provider ID: N/A

📍 1958 VIA CTR
VISTA, CA 92081

Teleservice

Effective as of 01-OCT-21

RHEUMATOLOGY

ALNAHLAWI, BASMA, MD

Provider ID: N/A

📍 2095 W VISTA WAY STE 216

C1. Lista de proveedores de la red Médico de atención especializada

VISTA, CA 92083
Effective as of 01-JUN-24

ANSARI, RASHAD, MD†

Provider ID: N/A
📄 2023 W VISTA WAY STE J
VISTA, CA 92083
Effective as of 01-SEP-21

ANSARI, RASHAD, MD†

Provider ID: N/A
📄 2023 W VISTA WAY STE J
VISTA, CA 92083
Effective as of 01-JUL-22

BRION, PAUL, MD†

Provider ID: N/A
📄 2023 W VISTA WAY STE H
VISTA, CA 92083
Effective as of 01-SEP-21

BRION, PAUL, MD†

Provider ID: N/A
📄 2023 W VISTA WAY STE H
VISTA, CA 92083
Effective as of 01-JUL-21

SURGERY GENERAL

ARMANI, AVA, MD†

Provider ID: N/A
📄 910 SYCAMORE AVE STE
102
VISTA, CA 92081
Effective as of 01-JUL-21

GROVE, JAY, MD†

Provider ID: N/A
📄 2385 S MELROSE DR
VISTA, CA 92081
Effective as of 01-SEP-21

GROVE, JAY, MD†

Provider ID: N/A
📄 2385 S MELROSE DR

VISTA, CA 92081
Effective as of 01-JAN-21

GROVE, JAY, MD†

Provider ID: N/A
📄 2385 S MELROSE DR
VISTA, CA 92081
Effective as of 01-DEC-14

HANNA, KAREN, MD†

Provider ID: N/A
📄 2385 S MELROSE DR
VISTA, CA 92081
Teleservice
Effective as of 01-DEC-14

HANNA, KAREN, MD†

Provider ID: N/A
📄 2385 S MELROSE DR
VISTA, CA 92081
Teleservice
Effective as of 01-JAN-21

SURGERY GENERAL VASCULAR

BUNKE, NISHA, MD

Provider ID: N/A
📄 906 SYCAMORE AVE STE
100
VISTA, CA 92081
Teleservice
Effective as of 01-JUN-23

SURGERY NEUROLOGICAL

STERN, MARK, MD

Provider ID: N/A
📄 326 S MELROSE DR STE
200
VISTA, CA 92081
Effective as of 01-SEP-23

SURGERY THORACIC

GREWAL, NAVROSE, MD†

Provider ID: N/A
📄 161 THUNDER DR
VISTA, CA 92083
Effective as of 01-DEC-21

ANESTHESIOLOGY

KRAUSE, MARTIN, MD†

Provider ID: N/A
📄 36485 INLAND VALLEY DR
WILDOMAR, CA 92595
Effective as of 01-FEB-22

ANESTHESIOLOGY

CRITICAL CARE MEDICINE

RODRIGUEZ-MINETTE,

JESSICA, MD†

Provider ID: N/A
📄 36485 INLAND VALLEY DR
WILDOMAR, CA 92595
Effective as of 01-JAN-21

CERTIFIED NURSE

PRACTITIONER

IHEMEDU, AMARACHI, NPF

Provider ID: N/A
📄 36320 INLAND VALLEY DR
STE 303
WILDOMAR, CA 92595
Effective as of 01-JAN-23

IHEMEDU, MAGNUS, NPF

Provider ID: N/A
📄 36320 INLAND VALLEY DR
STE 303
WILDOMAR, CA 92595
Effective as of 01-APR-23

IHEMEDU, AMARACHI, NPF

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

36320 INLAND VALLEY DR
STE 303
WILDOMAR, CA 92595
Effective as of 01-JAN-23

IHEMEDU, MAGNUS, NPF

Provider ID: N/A

36320 INLAND VALLEY DR
STE 303
WILDOMAR, CA 92595
Effective as of 01-APR-23

IHEMEDU, MAGNUS, NPF

Provider ID: N/A

36320 INLAND VALLEY DR
STE 303
WILDOMAR, CA 92595
Effective as of 01-APR-23

ONUOHA, NOJA, NP†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 303
WILDOMAR, CA 92595*
Effective as of 01-NOV-22

ONUOHA, NOJA, NP†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 303
WILDOMAR, CA 92595*
Effective as of 01-NOV-22

THOMASII, STEPHEN, NPF†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 308
WILDOMAR, CA 92595
Effective as of 01-MAR-21

CHIROPRACTOR

ADAMS, CONRAD, LAC

Provider ID: N/A

32475 CLINTON KEITH RD
STE 108
WILDOMAR, CA 92595
Effective as of 01-MAR-23

GASTROENTEROLOGY

CHANGCHIEN, ERIC, MD†

Provider ID: N/A

36243 INLAND VALLEY DR
STE 280
WILDOMAR, CA 92595
Effective as of 01-MAR-19

INTERNAL MEDICINE

CHANG, DAVID, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 308
WILDOMAR, CA 92595
Effective as of 01-MAR-19

CHANG, DAVID, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 308
WILDOMAR, CA 92595
Effective as of 01-MAY-15

NANDI, SHANKHA, DO†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 308
WILDOMAR, CA 92595
Effective as of 01-JUN-15

NANDI, SHANKHA, DO†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 308
WILDOMAR, CA 92595
Effective as of 01-JUN-15

QUACH, DUC, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 307
WILDOMAR, CA 92595
Effective as of 01-SEP-24

QUACH, DUC, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 307
WILDOMAR, CA 92595
Effective as of 01-SEP-24

QUACH, DUC, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 307
WILDOMAR, CA 92595
Effective as of 01-SEP-24

QUACH, DUC, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 307
WILDOMAR, CA 92595
Effective as of 01-SEP-24

WANG, WENG-LIH, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 308
WILDOMAR, CA 92595
Effective as of 01-OCT-19

YU, JERRY, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 308
WILDOMAR, CA 92595
Effective as of 01-MAR-21

YU, JERRY, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 308

**C1. Lista de proveedores de la red
Médico de atención especializada**

WILDOMAR, CA 92595
Effective as of 01-MAR-19

YU, JERRY, MD

Provider ID: N/A

 36320 INLAND VALLEY DR
STE 307

WILDOMAR, CA 92595
Effective as of 01-DEC-23

YU, JERRY, MD

Provider ID: N/A

 36320 INLAND VALLEY DR
STE 307

WILDOMAR, CA 92595
Effective as of 01-DEC-23

YU, JERRY, MD

Provider ID: N/A

 36320 INLAND VALLEY DR
STE 307

WILDOMAR, CA 92595
Effective as of 01-DEC-23

YU, JERRY, MD

Provider ID: N/A

 36320 INLAND VALLEY DR
STE 307

WILDOMAR, CA 92595
Effective as of 01-DEC-23

INTERNAL MEDICINE

CRITICAL CARE MEDICINE

JAFFE, GILAD, MD

Provider ID: N/A

 36485 INLAND VALLEY DR
WILDOMAR, CA 92595

Effective as of 01-SEP-23

PATEL, SAGAR, MD†

Provider ID: N/A

 36485 INLAND VALLEY DR
WILDOMAR, CA 92595

Effective as of 01-AUG-21

**LICENSED CLINICAL
SOCIAL WORKER**

JONES, VALORIA, LCSW†

Provider ID: N/A

 36320 INLAND VALLEY DR
STE 303

WILDOMAR, CA 92595
Effective as of 01-JUL-23

JONES, VALORIA, LCSW†

Provider ID: N/A

 36320 INLAND VALLEY DR
STE 303

WILDOMAR, CA 92595
Effective as of 01-JUL-23

JONES, VALORIA, LCSW†

Provider ID: N/A

 36320 INLAND VALLEY DR
STE 303

WILDOMAR, CA 92595
Effective as of 01-JAN-23

JONES, VALORIA, LCSW†

Provider ID: N/A

 36320 INLAND VALLEY DR
STE 303

WILDOMAR, CA 92595
Effective as of 01-JUL-23

NEPHROLOGY

CHANG, DAVID, MD

Provider ID: N/A

 36320 INLAND VALLEY DR
STE 307

WILDOMAR, CA 92595
Effective as of 01-DEC-23

CHANG, DAVID, MD

Provider ID: N/A

 36320 INLAND VALLEY DR
STE 307

WILDOMAR, CA 92595
Effective as of 01-DEC-23

CHANG, DAVID, MD

Provider ID: N/A

 36320 INLAND VALLEY DR
STE 307

WILDOMAR, CA 92595
Effective as of 01-DEC-23

CHANG, DAVID, MD

Provider ID: N/A

 36320 INLAND VALLEY DR
STE 307

WILDOMAR, CA 92595
Effective as of 01-DEC-23

CHANG, DAVID, MD†

Provider ID: N/A

 36320 INLAND VALLEY DR
STE 308

WILDOMAR, CA 92595
Effective as of 01-MAY-15

CHANG, DAVID, MD†

Provider ID: N/A

 36320 INLAND VALLEY DR
STE 308

WILDOMAR, CA 92595
Effective as of 01-MAY-09

CHANG, DAVID, MD

Provider ID: N/A

 36320 INLAND VALLEY DR
STE 307

WILDOMAR, CA 92595
Effective as of 01-DEC-23

CHANG, DAVID, MD

Provider ID: N/A

 36320 INLAND VALLEY DR
STE 307

WILDOMAR, CA 92595
Effective as of 01-DEC-23

**C1. Lista de proveedores de la red
Médico de atención especializada**

CHANG, DAVID, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 308
WILDOMAR, CA 92595
Effective as of 01-MAY-23

LAC, PETER, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 308
WILDOMAR, CA 92595
Effective as of 01-NOV-19

LAC, PETER, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 308
WILDOMAR, CA 92595
Effective as of 01-NOV-16

LAC, PETER, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 308
WILDOMAR, CA 92595
Effective as of 01-MAR-21

LAC, PETER, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 308
WILDOMAR, CA 92595
Effective as of 01-JUL-23

LAC, PETER, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 307
WILDOMAR, CA 92595
Effective as of 01-DEC-23

LAC, PETER, MD

Provider ID: N/A

36320 INLAND VALLEY DR

STE 307

WILDOMAR, CA 92595

Effective as of 01-DEC-23

LAC, PETER, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 307
WILDOMAR, CA 92595
Effective as of 01-DEC-23

LAC, PETER, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 307
WILDOMAR, CA 92595
Effective as of 01-DEC-23

LAC, PETER, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 307
WILDOMAR, CA 92595
Effective as of 01-DEC-23

LAC, PETER, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 307
WILDOMAR, CA 92595
Effective as of 01-DEC-23

NANDI, SHANKHA, DO

Provider ID: N/A

36320 INLAND VALLEY DR
STE 307
WILDOMAR, CA 92595
Effective as of 01-DEC-23

NANDI, SHANKHA, DO

Provider ID: N/A

36320 INLAND VALLEY DR
STE 307
WILDOMAR, CA 92595
Effective as of 01-DEC-23

NANDI, SHANKHA, DO

Provider ID: N/A

36320 INLAND VALLEY DR
STE 307
WILDOMAR, CA 92595
Effective as of 01-DEC-23

NANDI, SHANKHA, DO†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 308
WILDOMAR, CA 92595
Effective as of 01-AUG-20

NANDI, SHANKHA, DO

Provider ID: N/A

36320 INLAND VALLEY DR
STE 307
WILDOMAR, CA 92595
Effective as of 01-DEC-23

NANDI, SHANKHA, DO

Provider ID: N/A

36320 INLAND VALLEY DR
STE 307
WILDOMAR, CA 92595
Effective as of 01-DEC-23

NANDI, SHANKHA, DO

Provider ID: N/A

36320 INLAND VALLEY DR
STE 307
WILDOMAR, CA 92595
Effective as of 01-DEC-23

NANDI, SHANKHA, DO†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 308
WILDOMAR, CA 92595
Effective as of 01-JUN-15

NANDI, SHANKHA, DO†

Provider ID: N/A

**C1. Lista de proveedores de la red
Médico de atención especializada**

<p>36320 INLAND VALLEY DR STE 308 WILDOMAR, CA 92595 Effective as of 01-JUN-23</p> <p>NANDI, SHANKHA, DO† Provider ID: N/A</p> <p>36320 INLAND VALLEY DR STE 308 WILDOMAR, CA 92595 Effective as of 01-JUN-15</p> <p>NANDI, SHANKHA, DO† Provider ID: N/A</p> <p>36320 INLAND VALLEY DR STE 308 WILDOMAR, CA 92595 Effective as of 01-JUN-15</p> <p>NANDI, SHANKHA, DO† Provider ID: N/A</p> <p>36320 INLAND VALLEY DR STE 308 WILDOMAR, CA 92595 Effective as of 01-MAR-19</p> <p>NANDI, SHANKHA, DO† Provider ID: N/A</p> <p>36320 INLAND VALLEY DR STE 308 WILDOMAR, CA 92595 Effective as of 01-MAR-21</p> <p>WANG, WENG-LIH, MD† Provider ID: N/A</p> <p>36320 INLAND VALLEY DR STE 308 WILDOMAR, CA 92595 Effective as of 01-MAR-21</p> <p>WANG, WENG-LIH, MD Provider ID: N/A</p> <p>36320 INLAND VALLEY DR STE 307 WILDOMAR, CA 92595</p>	<p>Effective as of 01-JUL-24</p> <p>WANG, WENG-LIH, MD Provider ID: N/A</p> <p>36320 INLAND VALLEY DR STE 307 WILDOMAR, CA 92595</p> <p>Effective as of 01-DEC-23</p> <p>WANG, WENG-LIH, MD Provider ID: N/A</p> <p>36320 INLAND VALLEY DR STE 307 WILDOMAR, CA 92595</p> <p>Effective as of 01-DEC-23</p> <p>WANG, WENG-LIH, MD† Provider ID: N/A</p> <p>36320 INLAND VALLEY DR STE 308 WILDOMAR, CA 92595</p> <p>Effective as of 01-JAN-20</p> <p>WANG, WENG-LIH, MD Provider ID: N/A</p> <p>36320 INLAND VALLEY DR STE 307 WILDOMAR, CA 92595</p> <p>Effective as of 01-DEC-23</p> <p>WANG, WENG-LIH, MD† Provider ID: N/A</p> <p>36320 INLAND VALLEY DR STE 308 WILDOMAR, CA 92595</p> <p>Effective as of 01-MAY-15</p> <p>WANG, WENG-LIH, MD† Provider ID: N/A</p> <p>36320 INLAND VALLEY DR STE 308 WILDOMAR, CA 92595</p> <p>Effective as of 01-MAY-09</p> <p>WANG, WENG-LIH, MD†</p>	<p>Provider ID: N/A</p> <p>36320 INLAND VALLEY DR STE 308 WILDOMAR, CA 92595 Effective as of 01-MAY-15</p> <p>YU, JERRY, MD Provider ID: N/A</p> <p>36320 INLAND VALLEY DR STE 307 WILDOMAR, CA 92595 Effective as of 01-DEC-23</p> <p>YU, JERRY, MD Provider ID: N/A</p> <p>36320 INLAND VALLEY DR STE 307 WILDOMAR, CA 92595 Effective as of 01-DEC-23</p> <p>YU, JERRY, MD Provider ID: N/A</p> <p>36320 INLAND VALLEY DR STE 307 WILDOMAR, CA 92595 Effective as of 01-DEC-23</p> <p>PSYCHIATRY</p> <p>JAKKULA, JAGAN, MD† Provider ID: N/A</p> <p>36320 INLAND VALLEY DR STE 303 WILDOMAR, CA 92595 Effective as of 01-JUL-22</p> <p>JAKKULA, JAGAN, MD† Provider ID: N/A</p> <p>36320 INLAND VALLEY DR STE 303 WILDOMAR, CA 92595 Effective as of 01-NOV-23</p> <p>JAKKULA, JAGAN, MD† Provider ID: N/A</p> <p>36320 INLAND VALLEY DR STE 303 WILDOMAR, CA 92595 Effective as of 01-JUL-22</p> <p>JAKKULA, JAGAN, MD† Provider ID: N/A</p>
---	---	--

**C1. Lista de proveedores de la red
Médico de atención especializada**

<p>☐ 36320 INLAND VALLEY DR STE 303 WILDOMAR, CA 92595 Effective as of 01-NOV-23</p> <p>KANUKUNTLA, TULASI, MD† Provider ID: N/A</p> <p>☐ 36320 INLAND VALLEY DR STE 303 WILDOMAR, CA 92595 Effective as of 01-OCT-23</p> <p>KANUKUNTLA, TULASI, MD† Provider ID: N/A</p> <p>☐ 36320 INLAND VALLEY DR STE 303 WILDOMAR, CA 92595 Effective as of 01-JUL-22</p> <p>KANUKUNTLA, TULASI, MD† Provider ID: N/A</p> <p>☐ 36320 INLAND VALLEY DR STE 303 WILDOMAR, CA 92595 Effective as of 01-JUL-22</p> <p>KANUKUNTLA, TULASI, MD† Provider ID: N/A</p> <p>☐ 36320 INLAND VALLEY DR STE 303 WILDOMAR, CA 92595 Effective as of 01-OCT-23</p> <p>KUNAM, SYAM, MD Provider ID: N/A</p> <p>☐ 36320 INLAND VALLEY DR STE 303 WILDOMAR, CA 92595 Effective as of 01-NOV-23</p> <p>KUNAM, NEELIMA, MD Provider ID: N/A</p> <p>☐ 36320 INLAND VALLEY DR STE 303 WILDOMAR, CA 92595</p>	<p>Effective as of 01-AUG-24</p> <p>KUNAM, NEELIMA, MD Provider ID: N/A</p> <p>☐ 36320 INLAND VALLEY DR STE 303 WILDOMAR, CA 92595</p> <p>Effective as of 01-AUG-24</p> <p>KUNAM, SYAM, MD Provider ID: N/A</p> <p>☐ 36320 INLAND VALLEY DR STE 303 WILDOMAR, CA 92595</p> <p>Effective as of 01-JUN-23</p> <p>KUNAM, NEELIMA, MD Provider ID: N/A</p> <p>☐ 36320 INLAND VALLEY DR STE 303 WILDOMAR, CA 92595</p> <p>Effective as of 01-AUG-24</p> <p>KUNAM, NEELIMA, MD Provider ID: N/A</p> <p>☐ 36320 INLAND VALLEY DR STE 303 WILDOMAR, CA 92595</p> <p>Effective as of 01-AUG-24</p> <p>KUNAM, SYAM, MD Provider ID: N/A</p> <p>☐ 36320 INLAND VALLEY DR STE 303 WILDOMAR, CA 92595</p> <p>Effective as of 01-AUG-24</p> <p>KUNAM, SYAM, MD Provider ID: N/A</p> <p>☐ 36320 INLAND VALLEY DR STE 303 WILDOMAR, CA 92595</p> <p>Effective as of 01-JUN-23</p> <p>PUCHAKAYALA, NANDITA, MD†</p>	<p>MD† Provider ID: N/A</p> <p>☐ 36320 INLAND VALLEY DR STE 303 WILDOMAR, CA 92595 Effective as of 01-SEP-23</p> <p>PUCHAKAYALA, NANDITA, MD† Provider ID: N/A</p> <p>☐ 36320 INLAND VALLEY DR STE 303 WILDOMAR, CA 92595 Effective as of 01-AUG-22</p> <p>PUCHAKAYALA, NANDITA, MD† Provider ID: N/A</p> <p>☐ 36320 INLAND VALLEY DR STE 300 WILDOMAR, CA 92595 Effective as of 01-AUG-22</p> <p>PUCHAKAYALA, NANDITA, MD† Provider ID: N/A</p> <p>☐ 36320 INLAND VALLEY DR STE 303 WILDOMAR, CA 92595 Effective as of 01-SEP-23</p> <p>PUCHAKAYALA, NANDITA, MD† Provider ID: N/A</p> <p>☐ 36320 INLAND VALLEY DR STE 303 WILDOMAR, CA 92595 Effective as of 01-AUG-22</p> <p>PUCHAKAYALA, NANDITA, MD† Provider ID: N/A</p> <p>☐ 36320 INLAND VALLEY DR STE 300</p>
---	---	--

**C1. Lista de proveedores de la red
Médico de atención especializada**

WILDOMAR, CA 92595
Effective as of 01-AUG-22

PULMONARY DISEASES

KUMAR, AVNEE, MD

Provider ID: N/A

36485 INLAND VALLEY DR
WILDOMAR, CA 92595
Effective as of 01-JUL-23

SURI, RAJAT, MD†

Provider ID: N/A

36485 INLAND VALLEY DR
WILDOMAR, CA 92595
Effective as of 01-AUG-21

RADIATION ONCOLOGY

CHUNG, ARTHUR, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 207
WILDOMAR, CA 92595
Effective as of 01-JUN-23

CHUNG, ARTHUR, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 207
WILDOMAR, CA 92595
Effective as of 01-SEP-23

CHUNG, ARTHUR, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 207
WILDOMAR, CA 92595
Effective as of 01-JUN-23

DAROUI, PARIMA, MD

Provider ID: N/A

36450 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595

Effective as of 01-JUN-24

DAROUI, PARIMA, MD

Provider ID: N/A

36450 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595

Effective as of 01-JUN-24

DAROUI, PARIMA, MD

Provider ID: N/A

36450 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595

Effective as of 01-JUN-24

DAROUI, PARIMA, MD

Provider ID: N/A

36450 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595

Effective as of 01-APR-24

DAROUI, PARIMA, MD

Provider ID: N/A

36450 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595

Effective as of 01-APR-24

KANG, JOSEPH, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 207
WILDOMAR, CA 92595

Effective as of 01-DEC-23

KANG, JOSEPH, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 207
WILDOMAR, CA 92595

Effective as of 01-JUL-23

KANG, JOSEPH, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 207
WILDOMAR, CA 92595

Effective as of 01-JUN-23

KANG, JOSEPH, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 207
WILDOMAR, CA 92595

Effective as of 01-JUN-23

LAWRENSON, LESLEY, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 207
WILDOMAR, CA 92595

Effective as of 01-NOV-23

MASON, JAMES, MD†

Provider ID: N/A

36450 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595

Effective as of 01-SEP-14

MASON, JAMES, MD†

Provider ID: N/A

36450 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595

Effective as of 01-SEP-14

MASON, JAMES, MD†

Provider ID: N/A

36450 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595

Effective as of 01-SEP-14

MASON, JAMES, MD†

Provider ID: N/A

36450 INLAND VALLEY DR
STE 101

**C1. Lista de proveedores de la red
Médico de atención especializada**

WILDOMAR, CA 92595
Effective as of 01-MAR-10

MERLO, CLIFFORD, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 207

WILDOMAR, CA 92595
Effective as of 01-JUN-23

MERLO, CLIFFORD, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 207

WILDOMAR, CA 92595
Effective as of 01-JUN-23

RHA, JANICE, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 105

WILDOMAR, CA 92595
Effective as of 01-MAR-19

SUN, JASON, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 207

WILDOMAR, CA 92595
Effective as of 01-JUL-23

SUN, JASON, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 207

WILDOMAR, CA 92595
Effective as of 01-JUN-23

SUN, JASON, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 207

WILDOMAR, CA 92595
Effective as of 01-NOV-23

**REGISTERED DIETITIAN /
NUTRITIONIST**

ATTOBRA, TATIANA, RD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 301

WILDOMAR, CA 92595
Effective as of 01-DEC-22

**REGISTERED PHYSICAL
THERAPIST**

ALY, DILYANA, PT†

Provider ID: N/A

36243 INLAND VALLEY DR
STE 110

WILDOMAR, CA 92595
Effective as of 01-JUL-19

ALY, DILYANA, PT†

Provider ID: N/A

36243 INLAND VALLEY DR
STE 110

WILDOMAR, CA 92595
Effective as of 01-JUL-19

CASTELLON, SHAWN, PT

Provider ID: N/A

32246 CLINTON KEITH RD
STE 103

WILDOMAR, CA 92595
Effective as of 01-JUL-23

CASTELLON, SHAWN, PT

Provider ID: N/A

32246 CLINTON KEITH RD
STE 103

WILDOMAR, CA 92595
Effective as of 01-JUL-23

TSAI, CHIAHONG, PT

Provider ID: N/A

32246 CLINTON KEITH RD

STE 103
WILDOMAR, CA 92595
Effective as of 01-NOV-23

TSAI, CHIAHONG, PT

Provider ID: N/A

32246 CLINTON KEITH RD
STE 103

WILDOMAR, CA 92595
Effective as of 01-NOV-23

VARGHESE, ROSHAN, PT

Provider ID: N/A

32246 CLINTON KEITH RD
STE 103

WILDOMAR, CA 92595
Effective as of 01-MAY-24

VARGHESE, ROSHAN, PT

Provider ID: N/A

32246 CLINTON KEITH RD
STE 103

WILDOMAR, CA 92595
Effective as of 01-MAY-24

SPEECH PATHOLOGIST

WIRTH, LAURA, SP

Provider ID: N/A

36330 HIDDEN SPRINGS
RD STE E

WILDOMAR, CA 92595
Effective as of 01-JUN-22

WIRTH, LAURA, SP

Provider ID: N/A

36330 HIDDEN SPRINGS
RD STE E

WILDOMAR, CA 92595
Effective as of 01-JUN-22

**SURGERY COLON
SURGERY**

GORSKI, TITO, MD†

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-MAY-22

GORSKI, TITO, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-MAR-19

GORSKI, TITO, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-SEP-16

GORSKI, TITO, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-SEP-16

SURGERY GENERAL

AHMED, MOHAMED, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-OCT-22

AHMED, MOHAMED, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-MAY-23

AHMED, MOHAMED, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-MAY-23

ATCHISON, MARVIN, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-MAY-22

ATCHISON, MARVIN, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD
STE 202
WILDOMAR, CA 92595
Effective as of 01-SEP-22

ATCHISON, MARVIN, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD
STE 202
WILDOMAR, CA 92595
Effective as of 01-MAY-22

ATCHISON, MARVIN, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-SEP-22

ATCHISON, MARVIN, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD
STE 202
WILDOMAR, CA 92595
Effective as of 01-JUL-21

ATCHISON, MARVIN, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD
STE 202
WILDOMAR, CA 92595
Effective as of 01-MAR-20

ATCHISON, MARVIN, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD
STE 202
WILDOMAR, CA 92595
Effective as of 01-DEC-21

ATCHISON, MARVIN, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD
STE 202
WILDOMAR, CA 92595
Effective as of 01-DEC-20

ATCHISON, MARVIN, MD†

Provider ID: N/A

31537 RANCHO PUEBLO
RD
STE 202
WILDOMAR, CA 92595
Effective as of 01-APR-20

ATCHISON, MARVIN, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-DEC-20

ATCHISON, MARVIN, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-APR-20

ATCHISON, MARVIN, MD†

**C1. Lista de proveedores de la red
Médico de atención especializada**

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-MAR-20

ATCHISON, MARVIN, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-JUL-21

ATCHISON, MARVIN, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-JUL-21

ATCHISON, MARVIN, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-JUL-21

ATCHISON, MARVIN, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-MAR-20

ATCHISON, MARVIN, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-DEC-21

BARRERA, KAYLENE, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101

WILDOMAR, CA 92595

Effective as of 01-APR-22

BARRERA, KAYLENE, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-SEP-22

BARRERA, KAYLENE, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-MAY-22

BARRERA, KAYLENE, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-MAY-22

CORDERO, RAYMUND, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-SEP-16

CORDERO, RAYMUND, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-SEP-22

CORDERO, RAYMUND, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-MAR-19

CORDERO, RAYMUND, MD†

Provider ID: N/A

36485 INLAND VALLEY DR
WILDOMAR, CA 92595
Effective as of 01-FEB-21

DADA, STEPHEN, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-DEC-23

DADA, STEPHEN, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-DEC-23

DADA, STEPHEN, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-NOV-23

DADA, STEPHEN, MD

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-MAR-24

DEARING, DAVID, MD†

Provider ID: N/A

36243 INLAND VALLEY DR
STE 280
WILDOMAR, CA 92595
Effective as of 01-DEC-12

ESSIEN, FRANCIS, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A

**C1. Lista de proveedores de la red
Médico de atención especializada**

WILDOMAR, CA 92595
Effective as of 01-APR-22

ESSIEN, FRANCIS, MD

Provider ID: N/A
36320 INLAND VALLEY DR
WILDOMAR, CA 92595
Effective as of 01-JUN-24

ESSIEN, FRANCIS, MD†

Provider ID: N/A
36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-MAY-22

ESSIEN, FRANCIS, MD†

Provider ID: N/A
36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-MAY-22

ESSIEN, FRANCIS, MD†

Provider ID: N/A
36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-SEP-16

ESSIEN, FRANCIS, MD†

Provider ID: N/A
36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-SEP-16

ESSIEN, FRANCIS, MD†

Provider ID: N/A
36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-SEP-22

ESSIEN, FRANCIS, MD†

Provider ID: N/A
36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-SEP-16

ESSIEN, FRANCIS, MD†

Provider ID: N/A
36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-SEP-16

GORSKI, YARA, MD†

Provider ID: N/A
36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-SEP-16

GORSKI, TITO, MD†

Provider ID: N/A
36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-SEP-22

GORSKI, YARA, MD†

Provider ID: N/A
36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-SEP-22

GORSKI, TITO, MD†

Provider ID: N/A
36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-DEC-23

GORSKI, TITO, MD†

Provider ID: N/A
36320 INLAND VALLEY DR
STE 101

WILDOMAR, CA 92595
Effective as of 01-DEC-23

HUSTED, JOHN, MD†

Provider ID: N/A
36243 INLAND VALLEY DR
STE 280
WILDOMAR, CA 92595
Effective as of 01-MAR-13

JOHNSEN, HEGE, MD†

Provider ID: N/A
36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-MAR-19

JOHNSEN, HEGE, MD†

Provider ID: N/A
36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-APR-22

JOHNSEN, HEGE, MD†

Provider ID: N/A
36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-DEC-17

JOHNSEN, HEGE, MD†

Provider ID: N/A
36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-SEP-22

JOHNSEN, HEGE, MD†

Provider ID: N/A
36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-SEP-16

**C1. Lista de proveedores de la red
Médico de atención especializada**

JOHNSEN, HEGE, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-SEP-16

JOHNSEN, HEGE, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-MAY-22

JOHNSEN, HEGE, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-MAY-22

KARMUR, AMIT, DO†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-SEP-22

KARMUR, AMIT, DO†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-DEC-23

KARMUR, AMIT, DO†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-JAN-22

LEE, JENNY, MD†

Provider ID: N/A

36320 INLAND VALLEY DR

STE 101A
WILDOMAR, CA 92595
Effective as of 01-MAR-19

MAC, OLIVIA, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-APR-23

MAC, OLIVIA, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-DEC-22

MAC, OLIVIA, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-MAR-23

MAC, OLIVIA, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-MAR-23

NAFIU, BOLAJI, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-SEP-22

NAFIU, BOLAJI, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-DEC-19

NAFIU, BOLAJI, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-APR-20

NAFIU, BOLAJI, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-JAN-20

NOURI, SARVENAZ, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-FEB-23

NOURI, SARVENAZ, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-JAN-23

NOURI, SARVENAZ, MD†

Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-JAN-23

NOURI, SARVENAZ, MD†


Provider ID: N/A

36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-NOV-22


NOURI, SARVENAZ, MD†

Provider ID: N/A


**C1. Lista de proveedores de la red
Médico de atención especializada**

 36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-NOV-22


TIU, BRIAN, MD[†]
Provider ID: N/A

 36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-SEP-22


TIU, BRIAN, MD[†]
Provider ID: N/A

 36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-AUG-18


WANG, XIUJIE, MD[†]
Provider ID: N/A

 36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-MAR-20

WANG, XIUJIE, MD[†]
Provider ID: N/A


 36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-DEC-21

WANG, XIUJIE, MD[†]
Provider ID: N/A


 36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-SEP-19

***SURGERY GENERAL
VASCULAR***


GORSKI, YARA, MD[†]
Provider ID: N/A

 36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-MAR-19


GORSKI, YARA, MD[†]
Provider ID: N/A

 36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-MAY-22


GORSKI, YARA, MD[†]
Provider ID: N/A

 36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-SEP-16


GORSKI, YARA, MD[†]
Provider ID: N/A

 36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-SEP-16


GORSKI, YARA, MD[†]
Provider ID: N/A

 36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-MAY-22

KARMUR, AMIT, DO[†]
Provider ID: N/A


 36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-MAY-22

KARMUR, AMIT, DO[†]
Provider ID: N/A


 31537 INLAND VALLEY DR,
STE 202
WILDOMAR, CA 92595

Effective as of 01-JAN-22


KARMUR, AMIT, DO[†]
Provider ID: N/A

 36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-MAY-22


KARMUR, AMIT, DO[†]
Provider ID: N/A

 36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-JUL-22


KARMUR, AMIT, DO[†]
Provider ID: N/A

 36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-JAN-22


NAFIU, BOLAJI, MD[†]
Provider ID: N/A

 36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-DEC-21

NAFIU, BOLAJI, MD[†]
Provider ID: N/A

 36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-MAY-22

TIU, BRIAN, MD[†]
Provider ID: N/A

 36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-MAY-19

TIU, BRIAN, MD[†]

C1. Lista de proveedores de la red Médico de atención especializada

Provider ID: N/A WILDOMAR, CA 92595

 36320 INLAND VALLEY DR Effective as of 01-OCT-20

STE 101A

WILDOMAR, CA 92595

Effective as of 01-MAY-22

WANG, XIUJIE, MD†

Provider ID: N/A

 36320 INLAND VALLEY DR

STE 101A

WILDOMAR, CA 92595

Effective as of 01-MAY-22

TIU, BRIAN, MD†

Provider ID: N/A

 36320 INLAND VALLEY DR

STE 101A

WILDOMAR, CA 92595

Effective as of 01-APR-22

TIU, BRIAN, MD†

Provider ID: N/A

 36320 INLAND VALLEY DR

STE 101

WILDOMAR, CA 92595

Effective as of 01-APR-22

TIU, BRIAN, MD†

Provider ID: N/A

 36320 INLAND VALLEY DR

STE 101

WILDOMAR, CA 92595

Effective as of 01-MAR-19

TIU, BRIAN, MD†

Provider ID: N/A

 36320 INLAND VALLEY DR

STE 101A

WILDOMAR, CA 92595

Effective as of 01-MAY-22

WANG, XIUJIE, MD†

Provider ID: N/A

 36320 INLAND VALLEY DR

STE 101A

WILDOMAR, CA 92595

Effective as of 01-OCT-20

WANG, XIUJIE, MD†

Provider ID: N/A

 36320 INLAND VALLEY DR

STE 101A

Médicos de atención especializada: ACUPUNTURA

Hills, Mary LAc, DOM

Provider ID: N/A
2271 Alpine Blvd Ste E
Alpine, CA 91901

Laffen, Julie LAc

Provider ID: N/A
4392 Bonita Rd
Bonita, CA 91902

Piao, Zhouyong LAc

Provider ID: N/A
5030 Bonita Rd Ste B
Bonita, CA 91902

Zhao, Chutima LAc

Provider ID: N/A
4514 Bonita Rd
Bonita, CA 91902

Brizzie, Melissa LAc

Provider ID: N/A
3144 El Camino Real Ste 204
Carlsbad, CA 92008

Cobb, Ayanna LAc, DOM

Provider ID: N/A
2890 Pio Pico Dr Ste 104
Carlsbad, CA 92008

Han, Sang-Kyou LAc

Provider ID: N/A
756 Grand Ave Ste B
Carlsbad, CA 92008

Peterson, Ricardo LAc

Provider ID: N/A
6986 El Camino Real Ste F
Carlsbad, CA 92009

Scarlett, Yvonne LAc

Provider ID: N/A
2890 Pio Pico Dr Ste 104
Carlsbad, CA 92008

Gabriel, Joel LAc

Provider ID: N/A
4392 Bonita Rd
Bonita, CA 91902

Moon, Michelle LAc

Provider ID: N/A
5030 Bonita Rd Ste B
Bonita, CA 91902

Vallarta, Barbara LAc

Provider ID: N/A
4514 Bonita Rd
Bonita, CA 91902

Vighne, Sarita LAc

Provider ID: N/A
2045 San Elijo Ave
Cardiff, CA 92007

Chung, Hyunsoo LAc

Provider ID: N/A
5751 Palmer Way Ste H 2-3
Carlsbad, CA 92010

Han, Claire LAc

Provider ID: N/A
1902 Wright Pl Ste 200
Carlsbad, CA 92008

Lyons, Jennifer LAc

Provider ID: N/A
1207 Carlsbad Village Dr Ste T
Carlsbad, CA 92008

Santiago, Pier LAc

Provider ID: N/A
3081 Madison St Ste B
Carlsbad, CA 92008

Tom, Jennifer LAc

Provider ID: N/A
1207 Carlsbad Village Dr Ste T
Carlsbad, CA 92008

Yu, Lu LAc

Provider ID: N/A
2890 Pio Pico Dr Ste 104
Carlsbad, CA 92008

Dinsmore, Richard LAc

Provider ID: N/A
1214 3rd Ave
Chula Vista, CA 91911

Good, Georgia LAc

Provider ID: N/A
955 Lane Ave Ste 201
Chula Vista, CA 91914

Kanomata, Atsushi LAc

Provider ID: N/A
821 Kuhn Dr Ste 101
Chula Vista, CA 91914

Mendez, Michael LAc

Provider ID: N/A
265 E St Ste A
Chula Vista, CA 91910

Tran, Carol LAc

Provider ID: N/A
1229 3rd Ave Ste C
Chula Vista, CA 91911

Beck, Andrea LAc

Provider ID: N/A
1011 Camino del Mar Ste 212
Del Mar, CA 92014

Lee, Dwayne LAc

Provider ID: N/A
1219 Camino del Mar
Del Mar, CA 92014

Anton, Cecilia LAc

Provider ID: N/A
1149 N 2nd St
El Cajon, CA 92021

Anton, Cecilia LAc

Provider ID: N/A
821 Kuhn Dr Ste 101
Chula Vista, CA 91914

Good, Georgia LAc

Provider ID: N/A
885 Canarios Ct Ste 110
Chula Vista, CA 91910

Hwang, Soo Chun LAc

Provider ID: N/A
910 Hale Pl Ste 214
Chula Vista, CA 91914

Lee, Il Ju LAc

Provider ID: N/A
296 H St Ste 203
Chula Vista, CA 91910

Son, Jae Jin LAc

Provider ID: N/A
296 H St Ste 203
Chula Vista, CA 91910

Wells, Emily LAc

Provider ID: N/A
955 Lane Ave Ste 101
Chula Vista, CA 91914

Beckwith, Valerie LAc

Provider ID: N/A
12865 Pointe del Mar Way Ste 120
Del Mar, CA 92014

Yerkes, Carmela LAc

Provider ID: N/A
1011 Camino del Mar Ste 240
Del Mar, CA 92014

Bonito, Amber LAc

Provider ID: N/A
564 Broadway
El Cajon, CA 92021

Candelaria, Ida LAc

Provider ID: N/A
983 E Washington Ave
El Cajon, CA 92020

Culp, Casey LAc

Provider ID: N/A
1149 N 2nd St
El Cajon, CA 92021

Fernandez, Rayne LAc

Provider ID: N/A
983 E Washington Ave
El Cajon, CA 92020

Ford, Shannon LAc

Provider ID: N/A
564 Broadway
El Cajon, CA 92021

Good, Georgia LAc

Provider ID: N/A
1571 N Magnolia Ave Ste 212
El Cajon, CA 92020

Kim, Min Joo LAc

Provider ID: N/A
855 E Madison Ave
El Cajon, CA 92020

Lopez, Maria LAc

Provider ID: N/A
470 N Mollison Ave
El Cajon, CA 92021

Onan, Teresa LAc

Provider ID: N/A
1149 N 2nd St
El Cajon, CA 92021

Poty, Lisa Jeanne LAc

Provider ID: N/A
251 E Main St
El Cajon, CA 92020

Craft, Kevin LAc

Provider ID: N/A
855 E Madison Ave
El Cajon, CA 92020

Custodio, Lesley LAc

Provider ID: N/A
314 S Magnolia Ave
El Cajon, CA 92020

Flores, Yesenia LAc

Provider ID: N/A
1149 N 2nd St
El Cajon, CA 92021

Goldman, Roni LAc

Provider ID: N/A
1149 N 2nd St
El Cajon, CA 92021

Kim, Min Joo LAc

Provider ID: N/A
470 N Mollison Ave
El Cajon, CA 92021

Larowe, Alexiss LAc

Provider ID: N/A
2295 Fletcher Pkwy Ste 101
El Cajon, CA 92020

Lopez, Maria LAc

Provider ID: N/A
855 E Madison Ave
El Cajon, CA 92020

Phillips, Christina LAc

Provider ID: N/A
564 Broadway
El Cajon, CA 92021

Alavi, Matt LAc

Provider ID: N/A
317 N El Camino Real Ste 306
Encinitas, CA 92024

Arellano, Jacqueline LAc

Provider ID: N/A
1200 Garden View Rd Ste 200
Encinitas, CA 92024

Burr, Douglas LAc

Provider ID: N/A
1200 Garden View Rd Ste 200
Encinitas, CA 92024

Goforth, Greta LAc

Provider ID: N/A
187 Calle Magdalena Ste 214
Encinitas, CA 92024

Han, Stacie LAc

Provider ID: N/A
142 Encinitas Blvd
Encinitas, CA 92024

Julian, Fides LAc

Provider ID: N/A
1200 Garden View Rd Ste 200
Encinitas, CA 92024

McCaughan, Lauren LAc

Provider ID: N/A
317 N El Camino Real Ste 306
Encinitas, CA 92024

Rabin, Brett LAc

Provider ID: N/A
317 N El Camino Real Ste 306
Encinitas, CA 92024

Robles, Ma Regina Blanca LAc

Provider ID: N/A
317 N El Camino Real Ste 306
Encinitas, CA 92024

Tsoucalas, Katerina LAc

Provider ID: N/A
191 Calle Magdalena Ste 295
Encinitas, CA 92024

Blair, Sherine LAc

Provider ID: N/A
543 Encinitas Blvd Ste 107
Encinitas, CA 92024

Deems, Leslie LAc

Provider ID: N/A
960 2nd St Ste 103
Encinitas, CA 92024

Gonzalez, Andres LAc

Provider ID: N/A
1130 2nd St
Encinitas, CA 92024

Hemingway, Dodie LAc

Provider ID: N/A
2210 Encinitas Blvd Ste E
Encinitas, CA 92024

Kim, Min Kyun LAc

Provider ID: N/A
535 Encinitas Blvd Ste 112
Encinitas, CA 92024

Orsini, Patricia LAc

Provider ID: N/A
1011 Devonshire Dr Ste B
Encinitas, CA 92024

Reid-Bretell, Alison LAc

Provider ID: N/A
171 Saxony Rd Ste 107
Encinitas, CA 92024

Tang-Ritchie, Leng LAc

Provider ID: N/A
1200 Garden View Rd Ste 200
Encinitas, CA 92024

Yu, Lu LAc

Provider ID: N/A
191 Calle Magdalena Ste 295
Encinitas, CA 92024

Akhavan, Farahnaz LAc

Provider ID: N/A
1733 S Escondido Blvd
Escondido, CA 92025

Kim, Min Joo LAc

Provider ID: N/A
425 N Date St
Escondido, CA 92025

Kwak, Hyoshin LAc

Provider ID: N/A
106 S Grape St Ste 10
Escondido, CA 92025

McIntyre, Michele LAc

Provider ID: N/A
8975 Lawrence Welk Dr Spc 323
Escondido, CA 92026

Pole, Carolyn LAc

Provider ID: N/A
337 S Kalmia St
Escondido, CA 92025

Harper, Korrie LAc

Provider ID: N/A
407 Potter St Ste D
Fallbrook, CA 92028

Lopez, Maria LAc

Provider ID: N/A
1309 S Mission Rd
Fallbrook, CA 92028

Arellano, Jacqueline LAc

Provider ID: N/A
8910 Villa La Jolla Dr Ste 200
La Jolla, CA 92037

Arellano, Jacqueline LAc

Provider ID: N/A
9300 Campus Point Dr
La Jolla, CA 92037

Chapman, Joni LAc

Provider ID: N/A
160 N Date St
Escondido, CA 92025

Kim, Min Joo LAc

Provider ID: N/A
460 N Elm St
Escondido, CA 92025

McAdams, Donna LAc

Provider ID: N/A
325 W 3rd Ave Ste 102
Escondido, CA 92025

McKillip, Joleen LAc

Provider ID: N/A
325 W 3rd Ave Ste 102
Escondido, CA 92025

Craft, Kevin LAc

Provider ID: N/A
1309 S Mission Rd
Fallbrook, CA 92028

Kim, Min Joo LAc

Provider ID: N/A
1309 S Mission Rd
Fallbrook, CA 92028

Stephens, Lori LAc

Provider ID: N/A
587 E Elder St Ste B
Fallbrook, CA 92028

Arellano, Jacqueline LAc

Provider ID: N/A
9400 Campus Point Dr
La Jolla, CA 92093

Booth, Beata LAc

Provider ID: N/A
6529 La Jolla Blvd
La Jolla, CA 92037

Bousquin, Diane LAc

Provider ID: N/A
7634 Girard Ave Ste T
La Jolla, CA 92037

Burr, Douglas LAc

Provider ID: N/A
9300 Campus Point Dr
La Jolla, CA 92037

Carter, Lynda LAc

Provider ID: N/A
8950 Villa La Jolla Dr Ste B129
La Jolla, CA 92037

Hill, Marie LAc

Provider ID: N/A
8950 Villa La Jolla Dr Ste B129
La Jolla, CA 92037

Jerkins, Julie LAc

Provider ID: N/A
8950 Villa La Jolla Dr Ste C126
La Jolla, CA 92037

Julian, Fides LAc

Provider ID: N/A
9400 Campus Point Dr
La Jolla, CA 92093

Keefe, Donna LAc

Provider ID: N/A
8950 Villa La Jolla Dr Ste B129
La Jolla, CA 92037

Pester, Ashley LAc

Provider ID: N/A
8950 Villa La Jolla Dr Ste B129
La Jolla, CA 92037

Tang-Ritchie, Leng LAc

Provider ID: N/A
8910 Villa La Jolla Dr Ste 200
La Jolla, CA 92037

Burr, Douglas LAc

Provider ID: N/A
8910 Villa La Jolla Dr Ste 200
La Jolla, CA 92037

Burr, Douglas LAc

Provider ID: N/A
9400 Campus Point Dr
La Jolla, CA 92093

Gallet, Mariel LAc

Provider ID: N/A
8950 Villa La Jolla Dr Ste B212
La Jolla, CA 92037

Homayoun, Pegah LAc

Provider ID: N/A
7440 Girard Ave Ste 6
La Jolla, CA 92037

Julian, Fides LAc

Provider ID: N/A
9300 Campus Point Dr
La Jolla, CA 92037

Julian, Fides LAc

Provider ID: N/A
8910 Villa La Jolla Dr Ste 200
La Jolla, CA 92037

Limoges, Charlene LAc

Provider ID: N/A
7757 Herschel Ave
La Jolla, CA 92037

Simonton, Julia LAc

Provider ID: N/A
8950 Villa La Jolla Dr Ste B129
La Jolla, CA 92037

Tang-Ritchie, Leng LAc

Provider ID: N/A
9400 Campus Point Dr
La Jolla, CA 92093

Tang-Ritchie, Leng LAc

Provider ID: N/A
9300 Campus Point Dr
La Jolla, CA 92037

Yoo, Heather LAc

Provider ID: N/A
4150 Regents Park Row Ste 325
La Jolla, CA 92037

Mergens, Jane LAc

Provider ID: N/A
9019 Park Plaza Dr Ste D
La Mesa, CA 91942

Paulo, Pier LAc

Provider ID: N/A
8875 La Mesa Blvd Ste E
La Mesa, CA 91942

Lopez, Maria LAc

Provider ID: N/A
10039 Vine St
Lakeside, CA 92040

Allen, Jennifer LAc

Provider ID: N/A
2424 Vista Way Ste 125
Oceanside, CA 92054

Armstrong, Jeffrey LAc

Provider ID: N/A
2420 Vista Way Ste 125
Oceanside, CA 92054

Choo, Kwangmyung LAc

Provider ID: N/A
1906 Oceanside Blvd Ste S
Oceanside, CA 92054

Gonzalez, Andres LAc

Provider ID: N/A
619 Crouch St Ste 100
Oceanside, CA 92054

Valente, Lisa LAc

Provider ID: N/A
8950 Villa La Jolla Dr Ste B129
La Jolla, CA 92037

El Khoury, Ghassan LAc

Provider ID: N/A
5360 Jackson Dr Ste 110
La Mesa, CA 91942

Miller, Christine LAc

Provider ID: N/A
4754 Palm Ave
La Mesa, CA 91942

Kim, Min Joo LAc

Provider ID: N/A
10039 Vine St
Lakeside, CA 92040

MacGurn, Richard LAc

Provider ID: N/A
2743 Highland Ave
National City, CA 91950

Anderson, Tisa LAc

Provider ID: N/A
804 Pier View Way Ste 200
Oceanside, CA 92054

Choi, Mijoung LAc

Provider ID: N/A
3861 Mission Ave Ste B27
Oceanside, CA 92058

Gonzalez, Andres LAc

Provider ID: N/A
3998 Vista Way Ste G
Oceanside, CA 92056

Haun, Daniel LAc

Provider ID: N/A
701 Seagaze Dr Ste B
Oceanside, CA 92054

Hickok, Lishu LAc

Provider ID: N/A
2171 S El Camino Real Ste 100
Oceanside, CA 92054

Lipton, Gregory LAc

Provider ID: N/A
701 Seagaze Dr Ste B
Oceanside, CA 92054

Stevenson, Nancy LAc

Provider ID: N/A
310 S Coast Hwy
Oceanside, CA 92054

Arnold, Michele LAc

Provider ID: N/A
15644 Pomerado Rd Ste 102
Poway, CA 92064

Robles, Ma Regina Blanca LAc

Provider ID: N/A
15725 Pomerado Rd Ste 210
Poway, CA 92064

Whitney, Tracey LAc

Provider ID: N/A
13525 Midland Rd Ste I
Poway, CA 92064

Abdullah, Shaheed LAc

Provider ID: N/A
5222 Balboa Ave Ste 43
San Diego, CA 92117

Akhavan, Farahnaz LAc

Provider ID: N/A
2883 Meade Ave Ste B
San Diego, CA 92116

Altman, Ryan LAc

Provider ID: N/A
3239 Adams Ave
San Diego, CA 92116

Jantzi, Marc LAc

Provider ID: N/A
1826 S Coast Hwy
Oceanside, CA 92054

Orenstein, Susie LAc

Provider ID: N/A
717 Pier View Way
Oceanside, CA 92054

Alavi, Matt LAc

Provider ID: N/A
15725 Pomerado Rd Ste 210
Poway, CA 92064

McConville, Kelly LAc

Provider ID: N/A
12709 Poway Rd Ste 205
Poway, CA 92064

Shinagawa, Jocelyn LAc

Provider ID: N/A
15525 Pomerado Rd Ste E4
Poway, CA 92064

Han, Stacie LAc

Provider ID: N/A
6037 La Granada Ste C
Rancho Santa Fe, CA 92067

Ahadi, Rana LAc

Provider ID: N/A
10717 Camino Ruiz Ste 164
San Diego, CA 92126

Alavi, Matt LAc

Provider ID: N/A
6719 Alvarado Rd Ste 304
San Diego, CA 92120

Appenzeller, Erica LAc

Provider ID: N/A
2630 1st Ave
San Diego, CA 92103

Arellano, Jacqueline LAc

Provider ID: N/A
9909 Mira Mesa Blvd Ste 200
San Diego, CA 92131

Arellano, Jacqueline LAc

Provider ID: N/A
200 W Arbor Dr
San Diego, CA 92103

Arellano, Jacqueline LAc

Provider ID: N/A
330 Lewis St Ste 400
San Diego, CA 92103

Bean, Adrian LAc

Provider ID: N/A
9150 Chesapeake Dr Ste 120
San Diego, CA 92123

Beimler, Jeffrey LAc

Provider ID: N/A
7969 Engineer Rd Ste 109
San Diego, CA 92111

Burr, Douglas LAc

Provider ID: N/A
9333 Genesee Ave Ste 200
San Diego, CA 92121

Burr, Douglas LAc

Provider ID: N/A
330 Lewis St Ste 400
San Diego, CA 92103

Burr, Douglas LAc

Provider ID: N/A
9909 Mira Mesa Blvd Ste 200
San Diego, CA 92131

Callison, Yanhiu LAc

Provider ID: N/A
4060 Fairmount Ave
San Diego, CA 92105

Arellano, Jacqueline LAc

Provider ID: N/A
9333 Genesee Ave Ste 200
San Diego, CA 92121

Arellano, Jacqueline LAc

Provider ID: N/A
4910 Directors Pl Ste 250
San Diego, CA 92121

Au, Vi LAc

Provider ID: N/A
3080 N Park Way
San Diego, CA 92104

Beck, Andrea LAc

Provider ID: N/A
5440 Morehouse Dr Ste 1700
San Diego, CA 92121

Boyd, Anne LAc

Provider ID: N/A
2635 Camino del Rio S Ste 301
San Diego, CA 92108

Burr, Douglas LAc

Provider ID: N/A
200 W Arbor Dr
San Diego, CA 92103

Burr, Douglas LAc

Provider ID: N/A
4910 Directors Pl Ste 250
San Diego, CA 92121

Caliri, Rebecca LAc

Provider ID: N/A
1913 Euclid Ave Ste 107
San Diego, CA 92105

Chapman, Joni LAc

Provider ID: N/A
2204 Garnet Ave Ste 202
San Diego, CA 92109

Chen, YeQing LAc

Provider ID: N/A
5222 Balboa Ave Ste 54
San Diego, CA 92117

Cho, Kyu Ok LAc

Provider ID: N/A
8303 Clairemont Mesa Blvd Ste 104
San Diego, CA 92111

Coltart, Michelle LAc

Provider ID: N/A
3239 Adams Ave
San Diego, CA 92116

Culp, Casey LAc

Provider ID: N/A
11665 Avena Pl Ste 205
San Diego, CA 92128

Davila, Gabriela LAc

Provider ID: N/A
4901 Morena Blvd Ste 209A
San Diego, CA 92117

Deleon, Antoinette LAc

Provider ID: N/A
2525 Camino del Rio S Ste 245
San Diego, CA 92108

DiVanterra, Darcy LAc

Provider ID: N/A
3033 5th Ave Ste 230
San Diego, CA 92103

Flores, Yesenia LAc

Provider ID: N/A
3675 Ruffin Rd Ste 315
San Diego, CA 92123

Freitas, Laurence LAc

Provider ID: N/A
5405 Morehouse Dr Ste 120
San Diego, CA 92121

Cheng, Peter LAc

Provider ID: N/A
4683 Mercury St Ste B
San Diego, CA 92111

Choe, Helena LAc

Provider ID: N/A
1916 30th St
San Diego, CA 92102

Craft, Kevin LAc

Provider ID: N/A
6973 Linda Vista Rd
San Diego, CA 92111

Dang, Sheri LAc

Provider ID: N/A
2727 Camino del Rio S Ste 104
San Diego, CA 92108

De Rose, Leda LAc

Provider ID: N/A
3239 Adams Ave
San Diego, CA 92116

Didion, Claire LAc

Provider ID: N/A
842 Washington St Ste B
San Diego, CA 92103

Feig, Kimberley LAc

Provider ID: N/A
2425 Camino Del Rio S Ste 180
San Diego, CA 92108

Foster, Michelle LAc, DOM

Provider ID: N/A
12634 Portada Pl
San Diego, CA 92130

Friend, Yunhee LAc

Provider ID: N/A
12264 El Camino Real Ste 108
San Diego, CA 92130

Garcia, Ronald LAc

Provider ID: N/A
1011 Camino del Rio S Ste 100
San Diego, CA 92108

Goldman, Roni LAc

Provider ID: N/A
11665 Avena Pl Ste 205
San Diego, CA 92128

Govenar, Daniel LAc

Provider ID: N/A
5252 Balboa Ave Ste 400
San Diego, CA 92117

Halsey, Holly LAc

Provider ID: N/A
9150 Chesapeake Dr Ste 120
San Diego, CA 92123

Hayes, Jewel LAc

Provider ID: N/A
2525 Camino del Rio S Ste 245
San Diego, CA 92108

Helgeson, Maile LAc

Provider ID: N/A
3239 Adams Ave
San Diego, CA 92116

Hwang, Soo Chun LAc

Provider ID: N/A
9474 Kearny Villa Rd Ste 111
San Diego, CA 92126

Jantzi, Marc LAc

Provider ID: N/A
3505 Camino del Rio S Ste 100
San Diego, CA 92108

Julian, Fides LAc

Provider ID: N/A
7204 Clairemont Mesa Blvd
San Diego, CA 92111

Godes, Marianna LAc

Provider ID: N/A
319 Laurel St
San Diego, CA 92101

Gonzalez, Melida LAc

Provider ID: N/A
3320 2nd Ave
San Diego, CA 92103

Guo, Naijia LAc

Provider ID: N/A
7297 Ronson Rd Ste C
San Diego, CA 92111

Harrington, Lindsey LAc

Provider ID: N/A
4638 Park Blvd
San Diego, CA 92116

He, Zhe LAc

Provider ID: N/A
10066 Pacific Heights Blvd Ste 114
San Diego, CA 92121

Hou, Yahui LAc

Provider ID: N/A
3080 N Park Way
San Diego, CA 92104

Hwang, Soo Chun LAc

Provider ID: N/A
9474 Kearny Villa Rd Ste 113
San Diego, CA 92126

Jerkins, Julie LAc

Provider ID: N/A
3675 Ruffin Rd Ste 135
San Diego, CA 92123

Julian, Fides LAc

Provider ID: N/A
200 W Arbor Dr
San Diego, CA 92103

Julian, Fides LAc

Provider ID: N/A
330 Lewis St Ste 400
San Diego, CA 92103

Julian, Fides LAc

Provider ID: N/A
9333 Genesee Ave Ste 200
San Diego, CA 92121

Julian, Fides LAc

Provider ID: N/A
2525 Camino del Rio S Ste 313
San Diego, CA 92108

Kanomata, Atsushi LAc

Provider ID: N/A
2180 Garnet Ave Ste 1-I
San Diego, CA 92109

Kodama, Eti LAc

Provider ID: N/A
4054 Centre St Apt 1
San Diego, CA 92103

Kuo, Shu Ming LAc

Provider ID: N/A
11939 Rancho Bernardo Rd Ste 105
San Diego, CA 92128

Lecke, Peter LAc

Provider ID: N/A
4501 Mission Bay Dr Ste 2D
San Diego, CA 92109

Lopez, Maria LAc

Provider ID: N/A
9339 Genesee Ave Ste 150
San Diego, CA 92121

Martin, Ginger LAc

Provider ID: N/A
2180 Garnet Ave Ste 1F
San Diego, CA 92109

Julian, Fides LAc

Provider ID: N/A
4910 Directors Pl Ste 250
San Diego, CA 92121

Julian, Fides LAc

Provider ID: N/A
9909 Mira Mesa Blvd Ste 200
San Diego, CA 92131

Kang, Suchin LAc

Provider ID: N/A
16486 Bernardo Center Dr Ste 100
San Diego, CA 92128

Kanomata, Atsushi LAc

Provider ID: N/A
6051 Business Center Ct Ste A3
San Diego, CA 92154

Koolen, Danae LAc

Provider ID: N/A
4732 Point Loma Ave Ste D
San Diego, CA 92107

Laffen, Julie LAc

Provider ID: N/A
2852 Adams Ave
San Diego, CA 92116

Lee, Jihyung LAc

Provider ID: N/A
1011 Camino del Rio S Ste 100
San Diego, CA 92108

Lundin, Katarina LAc, DOM

Provider ID: N/A
4732 Point Loma Ave Ste D
San Diego, CA 92107

Martinelli, Ashley LAc

Provider ID: N/A
1545 Hotel Cir S Ste 185
San Diego, CA 92108

Mendez, Michael LAc

Provider ID: N/A
2515 Camino del Rio S Ste A
San Diego, CA 92108

Moura, Marina LAc

Provider ID: N/A
9150 Chesapeake Dr Ste 120
San Diego, CA 92123

Murray, Steven LAc

Provider ID: N/A
5602 El Cajon Blvd
San Diego, CA 92115

Negron, Yvonne LAc

Provider ID: N/A
5830 Oberlin Dr Ste 104
San Diego, CA 92121

Noonan, Thomas LAc

Provider ID: N/A
3505 Camino del Rio S Ste 100
San Diego, CA 92108

Oh, Young Shig LAc

Provider ID: N/A
11770 Bernardo Plaza Ct Ste 351
San Diego, CA 92128

Oh, Young Shig LAc

Provider ID: N/A
16766 Bernardo Center Dr Ste 111
San Diego, CA 92128

Ohashi, Evelyn LAc

Provider ID: N/A
1545 Hotel Cir S Ste 120
San Diego, CA 92108

Onan, Teresa LAc

Provider ID: N/A
11665 Avena Pl Ste 205
San Diego, CA 92128

Miyashiro, Wendi LAc

Provider ID: N/A
2481 Congress St
San Diego, CA 92110

Murra, Fawsi LAc

Provider ID: N/A
2852 Adams Ave
San Diego, CA 92116

Natrin, Nicolette LAc

Provider ID: N/A
2333 1st Ave Ste 102
San Diego, CA 92101

Nguyentu, Tim LAc

Provider ID: N/A
6937 Linda Vista Rd Ste E
San Diego, CA 92111

Novak, Elizabeth LAc

Provider ID: N/A
4747 Mission Blvd Ste 7
San Diego, CA 92109

Oh, Young Shig LAc

Provider ID: N/A
6540 Lusk Blvd Ste C144
San Diego, CA 92121

Oh, Young Shig LAc

Provider ID: N/A
12396 World Trade Dr Ste 110
San Diego, CA 92128

Oliver, Linda LAc

Provider ID: N/A
9750 Miramar Rd Ste 180
San Diego, CA 92126

Park, Hyun Ho LAc

Provider ID: N/A
10717 Camino Ruiz Ste 119
San Diego, CA 92126

Persinger, Robin LAc

Provider ID: N/A
3239 Adams Ave
San Diego, CA 92116

Pham, James LAc

Provider ID: N/A
7612 Linda Vista Rd Ste 117
San Diego, CA 92111

Pontecorvo, Robert LAc

Provider ID: N/A
5222 Balboa Ave Ste 43
San Diego, CA 92117

Ramos, Maria-Cristina LAc

Provider ID: N/A
2525 Camino del Rio S Ste 320
San Diego, CA 92108

Reznova, Veronika LAc

Provider ID: N/A
420 Walnut Ave
San Diego, CA 92103

Robles, Ma Regina Blanca LAc

Provider ID: N/A
6719 Alvarado Rd Ste 304
San Diego, CA 92120

RyuXtiel, Sylvvari LAc

Provider ID: N/A
6051 Business Center Ct Ste A3
San Diego, CA 92154

Sakya, Namrata LAc

Provider ID: N/A
3080 N Park Way
San Diego, CA 92104

Schoenfeld, Jonathan LAc

Provider ID: N/A
2180 Garnet Ave Ste 1-I
San Diego, CA 92109

Pfeiffer, Kirk LAc

Provider ID: N/A
842 Washington St Ste B
San Diego, CA 92103

Plummer, Brittany LAc

Provider ID: N/A
16769 Bernardo Center Dr Ste 21
San Diego, CA 92128

Rabin, Brett LAc

Provider ID: N/A
6719 Alvarado Rd Ste 304
San Diego, CA 92120

Reid, Serra LAc

Provider ID: N/A
2525 Camino del Rio S Ste 313
San Diego, CA 92108

Riba, Rachel LAc

Provider ID: N/A
9150 Chesapeake Dr Ste 120
San Diego, CA 92123

Ross, Michele LAc

Provider ID: N/A
4907 Morena Blvd Ste 1406
San Diego, CA 92117

Saboya, Andreia LAc

Provider ID: N/A
2630 1st Ave
San Diego, CA 92103

Sando, Kelsi LAc

Provider ID: N/A
3242 Adams Ave
San Diego, CA 92116

Scott Seach, Danielle LAc

Provider ID: N/A
3446 Park Blvd Ste 201
San Diego, CA 92103

Seitz, Gretchen LAc, DOM

Provider ID: N/A
9995 Carmel Mountain Rd Ste B10-B11
San Diego, CA 92129

Seitz, Gretchen LAc, DOM

Provider ID: N/A
3320 2nd Ave
San Diego, CA 92103

Smyth, Carolyn LAc

Provider ID: N/A
3636 5th Ave Ste 104
San Diego, CA 92103

Sperber, Gregory LAc

Provider ID: N/A
5030 Camino de la Siesta Ste 208
San Diego, CA 92108

Suess, Jill LAc

Provider ID: N/A
4732 Point Loma Ave Ste D
San Diego, CA 92107

Swords, Veronica LAc

Provider ID: N/A
4051 Voltaire St Ste E
San Diego, CA 92107

Swords, Veronica LAc

Provider ID: N/A
7777 Westside Dr Ste 467
San Diego, CA 92108

Szablak, Sharron LAc

Provider ID: N/A
5602 El Cajon Blvd
San Diego, CA 92115

Tang-Ritchie, Leng LAc

Provider ID: N/A
200 W Arbor Dr
San Diego, CA 92103

Tang-Ritchie, Leng LAc

Provider ID: N/A
330 Lewis St Ste 400
San Diego, CA 92103

Tang-Ritchie, Leng LAc

Provider ID: N/A
9333 Genesee Ave Ste 200
San Diego, CA 92121

Tang-Ritchie, Leng LAc

Provider ID: N/A
9909 Mira Mesa Blvd Ste 200
San Diego, CA 92131

Tang-Ritchie, Leng LAc

Provider ID: N/A
4910 Directors Pl Ste 250
San Diego, CA 92121

Teixeira, M David LAc

Provider ID: N/A
6612 Mission Gorge Rd Ste B
San Diego, CA 92120

Thomas, Enid Rose LAc

Provider ID: N/A
3023 Bunker Hill St Ste 201
San Diego, CA 92109

Tran, Quang LAc

Provider ID: N/A
9625 Black Mountain Rd Ste 306
San Diego, CA 92126

Tran, Gary LAc

Provider ID: N/A
5265 University Ave
San Diego, CA 92105

Trang, Cindy LAc

Provider ID: N/A
5222 Balboa Ave Ste 21
San Diego, CA 92117

Velez, Kara LAc

Provider ID: N/A
16776 Bernardo Center Dr Ste 211
San Diego, CA 92128

Wang, Minchen LAc

Provider ID: N/A
3023 Bunker Hill St Ste 206
San Diego, CA 92109

Wells, Emily LAc

Provider ID: N/A
9150 Chesapeake Dr Ste 120
San Diego, CA 92123

White, Caryn LAc

Provider ID: N/A
1835 Sunset Cliffs Blvd Ste 203
San Diego, CA 92107

Woodhouse, Louella LAc

Provider ID: N/A
3320 3rd Ave Ste B
San Diego, CA 92103

Wunsch, Lindsay LAc

Provider ID: N/A
1545 Hotel Cir S Ste 185
San Diego, CA 92108

Yokomori, Sachiko LAc

Provider ID: N/A
1545 Hotel Cir S Ste 120
San Diego, CA 92108

You, Sang LAc

Provider ID: N/A
12750 Carmel Country Rd Ste 207
San Diego, CA 92130

Cole, Jessica LAc

Provider ID: N/A
815 Grand Ave Ste 105
San Marcos, CA 92078

Vong, Dien LAc

Provider ID: N/A
4550 Kearny Villa Rd Ste 103
San Diego, CA 92123

Webber, James LAc

Provider ID: N/A
4666 Cass St Ste A
San Diego, CA 92109

Wells, Janet LAc

Provider ID: N/A
16776 Bernardo Center Dr Ste 211
San Diego, CA 92128

Williams, Melinda LAc

Provider ID: N/A
4870 Santa Monica Ave Ste 2C
San Diego, CA 92107

Wu, Shanti LAc

Provider ID: N/A
7964 Arjons Dr Ste D
San Diego, CA 92126

Wynne, Julia LAc

Provider ID: N/A
2560 1st Ave Ste 202
San Diego, CA 92103

Yoo, Heather LAc

Provider ID: N/A
7805 Highland Village Pl Ste 1
San Diego, CA 92129

Zimmer, Barry LAc

Provider ID: N/A
11650 Iberia Pl Ste 215
San Diego, CA 92128

Gonzalez, Andres LAc

Provider ID: N/A
1595 Grand Ave Ste 100
San Marcos, CA 92078

Lee, Se Yong LAc

Provider ID: N/A
910 W San Marcos Blvd Ste 109
San Marcos, CA 92078

Steindorf, Dana LAc

Provider ID: N/A
1529 Grand Ave Ste B
San Marcos, CA 92078

Dang, Sheri LAc

Provider ID: N/A
9225 Carlton Hills Blvd Ste 18
Santee, CA 92071

Marcy, Melissa LAc

Provider ID: N/A
10201 Mission Gorge Rd Ste A
Santee, CA 92071

Liu, Dawn LAc

Provider ID: N/A
977 Lomas Santa Fe Dr Ste D
Solana Beach, CA 92075

Rogers-Cavender, Amy LAc

Provider ID: N/A
140 Lomas Santa Fe Dr Ste 101
Solana Beach, CA 92075

Son, Jae Jin LAc

Provider ID: N/A
990 Highland Dr Ste 320
Solana Beach, CA 92075

Wells, Emily LAc

Provider ID: N/A
444 S Cedros Ave Ste 120
Solana Beach, CA 92075

Duffield, Gary LAc

Provider ID: N/A
1000 Vale Terrace Dr
Vista, CA 92084

Son, Jae Jin LAc

Provider ID: N/A
277 Rancheros Dr Ste 101
San Marcos, CA 92069

Alexander, Rebecca LAc

Provider ID: N/A
10201 Mission Gorge Rd Ste A
Santee, CA 92071

Handy, Heidi LAc

Provider ID: N/A
9307 Carlton Hills Blvd Ste A
Santee, CA 92071

Seo, Wanhee LAc

Provider ID: N/A
9225 Carlton Hills Blvd Ste 18
Santee, CA 92071

Liu, Frank LAc

Provider ID: N/A
265 Santa Helena Ste 103
Solana Beach, CA 92075

Sando, Kelsi LAc

Provider ID: N/A
977 Lomas Santa Fe Dr Ste D
Solana Beach, CA 92075

Stevenson, Nancy LAc

Provider ID: N/A
765 Academy Dr
Solana Beach, CA 92075

Chen, Yuelan LAc

Provider ID: N/A
1830 Hacienda Dr Ste 3
Vista, CA 92081

Feig, Kimberley LAc

Provider ID: N/A
410 S Melrose Dr Ste 200
Vista, CA 92081

Kim, Min Joo LAc

Provider ID: N/A
115 Main St
Vista, CA 92084

Rogers-Cavender, Amy LAc

Provider ID: N/A
115 Main St
Vista, CA 92084

Song, Carol LAc

Provider ID: N/A
1000 Vale Terrace Dr
Vista, CA 92084

Park, Seonghyeon LAc

Provider ID: N/A
410 S Melrose Dr Ste 200
Vista, CA 92081

Schwartz, Daniel LAc

Provider ID: N/A
933 Vale Terrace Dr Ste A
Vista, CA 92084

Médicos de atención especializada: VISTA

My Linh Ton-nu, OD

Provider ID: N/A
1620 Alpine Blvd Ste 117
Alpine, CA 91901

Sulki Han, OD

Provider ID: N/A
1620 Alpine Blvd Ste 117
Alpine, CA 91901

Beverly Tu, OD

Provider ID: N/A
1620 Alpine Blvd Ste 117
Alpine, CA 91901

Noorina Zaidi, OD

Provider ID: N/A
1620 Alpine Blvd Ste 117
Alpine, CA 91901

Jeffrey I. Scott, OD

Provider ID: N/A
1620 Alpine Blvd Ste 117
Alpine, CA 91901

Stephanie Asis, OD

Provider ID: N/A
1620 Alpine Blvd Ste 117
Alpine, CA 91901

Judy Hamouie, OD

Provider ID: N/A
1620 Alpine Blvd Ste 117
Alpine, CA 91901

Nataly Kalbakji, OD

Provider ID: N/A
1620 Alpine Blvd Ste 117
Alpine, CA 91901

Ryan Marr, OD

Provider ID: N/A
1620 Alpine Blvd Ste 117
Alpine, CA 91901

Janice Hung, OD

Provider ID: N/A
1620 Alpine Blvd Ste 117
Alpine, CA 91901

Nicholas Binder, MD

Provider ID: N/A
1620 Alpine Blvd Ste 117
Alpine, CA 91901

Nancy Tsui, OD

Provider ID: N/A
1620 Alpine Blvd Ste 117
Alpine, CA 91901

Moena Dean, OD

Provider ID: N/A
1620 Alpine Blvd Ste 117
Alpine, CA 91901

Mary Vivirito, OD

Provider ID: N/A
1620 Alpine Blvd Ste 117
Alpine, CA 91901

Sylvia Tillman, OD

Provider ID: N/A
1620 Alpine Blvd Ste 117
Alpine, CA 91901

Bhumika Pandya, OD

Provider ID: N/A
1620 Alpine Blvd Ste 117
Alpine, CA 91901

Tina Khieu, OD

Provider ID: N/A
1620 Alpine Blvd Ste 117
Alpine, CA 91901

Vady Khalil, OD

Provider ID: N/A
1620 Alpine Blvd Ste 117
Alpine, CA 91901

Christopher Hsu, MD

Provider ID: N/A
1620 Alpine Blvd Ste 117
Alpine, CA 91901

Thy T. Nguyen, OD

Provider ID: N/A
1620 Alpine Blvd Ste 117
Alpine, CA 91901

Barry Katzman, MD

Provider ID: N/A
1620 Alpine Blvd Ste 117
Alpine, CA 91901

Joseph Mcgraw, MD

Provider ID: N/A
1620 Alpine Blvd Ste 117
Alpine, CA 91901

Gitane Patel, MD

Provider ID: N/A
1620 Alpine Blvd Ste 117
Alpine, CA 91901

Donald R. Zvanut, OD

Provider ID: N/A
1620 Alpine Blvd Ste 117
Alpine, CA 91901

Kim N. Aoto, OD

Provider ID: N/A
1620 Alpine Blvd Ste 117
Alpine, CA 91901

Joshua Morrison Reyes, MD

Provider ID: N/A
1620 Alpine Blvd Ste 117
Alpine, CA 91901

Wesley S. Chew, OD

Provider ID: N/A
1620 Alpine Blvd Ste 117
Alpine, CA 91901

Henry V. Tran, OD

Provider ID: N/A
1620 Alpine Blvd Ste 117
Alpine, CA 91901

John B. Vinh, OD

Provider ID: N/A
1620 Alpine Blvd Ste 117
Alpine, CA 91901

Marineh Baghoumian, OD

Provider ID: N/A
1620 Alpine Blvd Ste 117
Alpine, CA 91901

Daniela Baumann, OD

Provider ID: N/A
1620 Alpine Blvd Ste 117
Alpine, CA 91901

Sharon M. Dyer, OD

Provider ID: N/A
1620 Alpine Blvd Ste 117
Alpine, CA 91901

Anh T. Tonnu, OD

Provider ID: N/A
1620 Alpine Blvd Ste 117
Alpine, CA 91901

Sujata P. Prabhu, MD

Provider ID: N/A
1620 Alpine Blvd Ste 117
Alpine, CA 91901

Murtaza Merali, OD

Provider ID: N/A
1620 Alpine Blvd Ste 117
Alpine, CA 91901

Sarjan H. Patel, MD

Provider ID: N/A
1620 Alpine Blvd Ste 117
Alpine, CA 91901

Melissa M. Willey, OD

Provider ID: N/A
1620 Alpine Blvd Ste 117
Alpine, CA 91901

Sharon A. Wong, OD

Provider ID: N/A
1620 Alpine Blvd Ste 117
Alpine, CA 91901

Phuc Quach, OD

Provider ID: N/A
1620 Alpine Blvd Ste 117
Alpine, CA 91901

Daniel D. Cha, OD

Provider ID: N/A
4502 Bonita Rd
Bonita, CA 91902

Ying Ju Chen, OD

Provider ID: N/A

McX Camp Pendleton Bldg 2010
Camp Pendleton, CA 92055

Tania Kaczanowski, OD

Provider ID: N/A

2027 San Elijo Ave Ste 2027
Cardiff, CA 92007

John J. Riggs, OD

Provider ID: N/A

3257 Cam De Los Coches Ste 201
Carlsbad, CA 92009

Anika Ramolia, OD

Provider ID: N/A

7720 El Camino Real Ste G
Carlsbad, CA 92009

Ventures Optometric Solutions, NA

Provider ID: N/A

2653 Gateway Rd Ste 101
Carlsbad, CA 92009

Sylvia Tillman, OD

Provider ID: N/A

2653 Gateway Rd Ste 101
Carlsbad, CA 92009

Katherine Witmeyer, OD

Provider ID: N/A

2653 Gateway Rd Ste 101
Carlsbad, CA 92009

Adam Rosa, OD

Provider ID: N/A

711 Grand Ave Ste 2
Carlsbad, CA 92008

Douglas M. Osborne, OD

Provider ID: N/A

711 Grand Ave Ste 2
Carlsbad, CA 92008

Hunter Morgan, OD

Provider ID: N/A

6949 El Camino Real Ste 105
Carlsbad, CA 92009

Steven Thurston, OD

Provider ID: N/A

McX Camp Pendleton Bldg 2010
Camp Pendleton, CA 92055

Michelle Kim, OD

Provider ID: N/A

2027 San Elijo Ave Ste 2027
Cardiff, CA 92007

Noam Nicholson, OD

Provider ID: N/A

6949 El Camino Real Ste 105
Carlsbad, CA 92009

Tram M. Ho, OD

Provider ID: N/A

5814 Van Allen Way Ste 146
Carlsbad, CA 92008

Libna Palma, OD

Provider ID: N/A

2653 Gateway Rd Ste 101
Carlsbad, CA 92009

Ilya Volk, OD

Provider ID: N/A

2653 Gateway Rd Ste 101
Carlsbad, CA 92009

Rachel Niskanen, OD

Provider ID: N/A

711 Grand Ave Ste 2
Carlsbad, CA 92008

Sarah C. Kasai, OD

Provider ID: N/A

711 Grand Ave Ste 2
Carlsbad, CA 92008

Howard C. Wang, OD

Provider ID: N/A

7630 Via Campanile Ste 134
Carlsbad, CA 92009

Jacqueline Sung, OD

Provider ID: N/A

951 Palomar Airport Rd
Carlsbad, CA 92011

Paul H. Chen, MD

Provider ID: N/A
1905 Calle Barcelona Ste 208
Carlsbad, CA 92009

Oliver T. Chen, OD

Provider ID: N/A
1905 Calle Barcelona Ste 208
Carlsbad, CA 92009

Linda Nguyen, OD

Provider ID: N/A
951 Palomar Airport Rd
Carlsbad, CA 92011

Melissa M. Willey, OD

Provider ID: N/A
2628 Gateway Rd Ste 125
Carlsbad, CA 92009

Costco Warehouse 0462, NA

Provider ID: N/A
951 Palomar Airport Rd
Carlsbad, CA 92011

David Najafi, MD

Provider ID: N/A
251 Landis Ave
Chula Vista, CA 91910

Michelle Pham, OD

Provider ID: N/A
1360 Eastlake Pkwy
Chula Vista, CA 91915

Nina Pham, OD

Provider ID: N/A
342 F St
Chula Vista, CA 91910

Alexandra Scovill, OD

Provider ID: N/A
342 F St
Chula Vista, CA 91910

Minh Hanh Nguyen, OD

Provider ID: N/A
251 Landis Ave
Chula Vista, CA 91910

David A. Bloch, OD

Provider ID: N/A
2814 Roosevelt St
Carlsbad, CA 92008

Stephen A. Luskin, OD

Provider ID: N/A
951 Palomar Airport Rd
Carlsbad, CA 92011

Cecilia Kavanagh, OD

Provider ID: N/A
951 Palomar Airport Rd
Carlsbad, CA 92011

Salomi Rajadhyksha, OD

Provider ID: N/A
6949 El Camino Real Ste 105
Carlsbad, CA 92009

Luis A. Molina, OD

Provider ID: N/A
251 Landis Ave
Chula Vista, CA 91910

Stanley Plucinik, OD

Provider ID: N/A
342 F St
Chula Vista, CA 91910

Paymon Hossini, OD

Provider ID: N/A
1150 Broadway
Chula Vista, CA 91911

Julia Richardson, OD

Provider ID: N/A
342 F St
Chula Vista, CA 91910

Maria E. Castillejos, MD

Provider ID: N/A
342 F St
Chula Vista, CA 91910

David Castillejos, MD

Provider ID: N/A
342 F St
Chula Vista, CA 91910

Nazret Weldeghiorgis, OD

Provider ID: N/A
251 Landis Ave
Chula Vista, CA 91910

Anita K. Koo, OD

Provider ID: N/A
681 Third Ave
Chula Vista, CA 91910

Aileen Jacob, OD

Provider ID: N/A
1360 Eastlake Pkwy
Chula Vista, CA 91915

Jennifer N. Tam, OD

Provider ID: N/A
1400 E Palomar St
Chula Vista, CA 91913

Angelica M. Villa, OD

Provider ID: N/A
523 Telegraph Canyon Rd
Chula Vista, CA 91910

Florena Culas, OD

Provider ID: N/A
251 Landis Ave
Chula Vista, CA 91910

Nilam Bansal, OD

Provider ID: N/A
251 Landis Ave
Chula Vista, CA 91910

Maria Camila Molina Velandia, OD

Provider ID: N/A
251 Landis Ave
Chula Vista, CA 91910

Elias Toubia, OD

Provider ID: N/A
251 Landis Ave
Chula Vista, CA 91910

Mashia Ghods, OD

Provider ID: N/A
251 Landis Ave
Chula Vista, CA 91910

Farrah M. Sitto, OD

Provider ID: N/A
681 Third Ave
Chula Vista, CA 91910

Thu T. Nguyen, OD

Provider ID: N/A
342 F St
Chula Vista, CA 91910

Tania Kaczanowski, OD

Provider ID: N/A
681 Third Ave
Chula Vista, CA 91910

Kwok Fung Chan, OD

Provider ID: N/A
523 Telegraph Canyon Rd
Chula Vista, CA 91910

John J. Clark, OD

Provider ID: N/A
75 N Broadway
Chula Vista, CA 91910

Tracy T. Nguyen, OD

Provider ID: N/A
345 F St Ste 240
Chula Vista, CA 91910

Anita Sheck, OD

Provider ID: N/A
895 E H St
Chula Vista, CA 91910

Kevin Hoang, OD

Provider ID: N/A
251 Landis Ave
Chula Vista, CA 91910

Shervin Alborzian, MD

Provider ID: N/A
251 Landis Ave
Chula Vista, CA 91910

Walmart Optical 2291, NA

Provider ID: N/A
75 N Broadway
Chula Vista, CA 91910

Joan Keddington, OD

Provider ID: N/A
1741 Eastlake Pkwy Ste 101
Chula Vista, CA 91915

Karen Chisholm, OD

Provider ID: N/A
1741 Eastlake Pkwy Ste 101
Chula Vista, CA 91915

Andreea NastasoIU, OD

Provider ID: N/A
1741 Eastlake Pkwy Ste 101
Chula Vista, CA 91915

Anita R. Niederberger, OD

Provider ID: N/A
1400 E Palomar St
Chula Vista, CA 91913

Theresa Nguyen, OD

Provider ID: N/A
1741 Eastlake Pkwy Ste 101
Chula Vista, CA 91915

Efrain Mascareno, OD

Provider ID: N/A
440 4th Ave
Chula Vista, CA 91910

Efrain Mascareno, OD

Provider ID: N/A
2260 Otay Lakes Rd Ste 111
Chula Vista, CA 91915

Gary M. Jacobs, MD

Provider ID: N/A
681 Third Ave
Chula Vista, CA 91910

Kevin R. Solis, OD

Provider ID: N/A
895 E H St
Chula Vista, CA 91910

Costco Warehouse 0460, NA

Provider ID: N/A
895 E H St
Chula Vista, CA 91910

Stephen Huang, OD

Provider ID: N/A
1400 E Palomar St
Chula Vista, CA 91913

Michael S. Ventura, OD

Provider ID: N/A
1400 E Palomar St
Chula Vista, CA 91913

Elias Toubia, OD

Provider ID: N/A
1741 Eastlake Pkwy Ste 101
Chula Vista, CA 91915

Mary M. King, OD

Provider ID: N/A
1741 Eastlake Pkwy Ste 101
Chula Vista, CA 91915

Ankur Kalra, OD

Provider ID: N/A
1741 Eastlake Pkwy Ste 101
Chula Vista, CA 91915

Carl A. Boeck, OD

Provider ID: N/A
440 4th Ave
Chula Vista, CA 91910

Carl A. Boeck, OD

Provider ID: N/A
2260 Otay Lakes Rd Ste 111
Chula Vista, CA 91915

Kevin R. Solis, OD

Provider ID: N/A
1741 Eastlake Pkwy Ste 101
Chula Vista, CA 91915

Gayle C. Howard, MD

Provider ID: N/A
681 Third Ave
Chula Vista, CA 91910

Costco Warehouse 0781, NA

Provider ID: N/A
1130 Broadway
Chula Vista, CA 91911

Laila Brown-aijala, OD

Provider ID: N/A
1741 Eastlake Pkwy Ste 101
Chula Vista, CA 91915

Gregory M. Steele, OD

Provider ID: N/A
1400 E Palomar St
Chula Vista, CA 91913

Tram M. Nguyen, OD

Provider ID: N/A
557 H St
Chula Vista, CA 91910

Ketan Bakriwala, OD

Provider ID: N/A
1400 E Palomar St
Chula Vista, CA 91913

Chad M. Barritt, OD

Provider ID: N/A
1130 Broadway
Chula Vista, CA 91911

Walmart Optical, NA

Provider ID: N/A
1360 Eastlake Pkwy
Chula Vista, CA 91915

Stephen J. Moffett, OD

Provider ID: N/A
950 Orange Ave
Coronado, CA 92118

Gregory E. Giles, OD

Provider ID: N/A
950 Orange Ave
Coronado, CA 92118

Michelle Pham, OD

Provider ID: N/A
171 C Ave Ste B
Coronado, CA 92118

Elaine J. Limpiado, OD

Provider ID: N/A
171 C Ave Ste B
Coronado, CA 92118

Walmart Optical, NA

Provider ID: N/A
1150 Broadway
Chula Vista, CA 91911

Payman I. Khalighi, OD

Provider ID: N/A
895 E H St
Chula Vista, CA 91910

Peter D. Huang, OD

Provider ID: N/A
557 H St
Chula Vista, CA 91910

Thu K. Nguyen, OD

Provider ID: N/A
1400 E Palomar St
Chula Vista, CA 91913

Maedi M. Bartolacci, OD

Provider ID: N/A
1400 E Palomar St
Chula Vista, CA 91913

Kimberly Cockerham, MD

Provider ID: N/A
801 Orange Ave Ste 204
Coronado, CA 92118

Robert M. Howard, OD

Provider ID: N/A
950 Orange Ave
Coronado, CA 92118

Michael A. Foyle, OD

Provider ID: N/A
950 Orange Ave
Coronado, CA 92118

Viet Nguyen, OD

Provider ID: N/A
950 Orange Ave
Coronado, CA 92118

Iga Gray, MD

Provider ID: N/A
801 Orange Ave Ste 204
Coronado, CA 92118

Alla Young, OD

Provider ID: N/A
801 Orange Ave Ste 204
Coronado, CA 92118

Joseph Mannen, OD

Provider ID: N/A
801 Orange Ave Ste 204
Coronado, CA 92118

Smit A. Patel, OD

Provider ID: N/A
171 C Ave Ste B
Coronado, CA 92118

Andrew J. Fasciani, OD

Provider ID: N/A
1349 Camino Del Mar Ste C
Del Mar, CA 92014

Samantha Daoud, OD

Provider ID: N/A
2673 Via De La Valle Ste Ef
Del Mar, CA 92014

Gordon G. Wong, OD

Provider ID: N/A
2673 Via De La Valle Ste Ef
Del Mar, CA 92014

Ryan Marr, OD

Provider ID: N/A
300 S Pierce St Ste 200
El Cajon, CA 92020

Sarjan H. Patel, MD

Provider ID: N/A
300 S Pierce St Ste 200
El Cajon, CA 92020

Sharon M. Dyer, OD

Provider ID: N/A
300 S Pierce St Ste 200
El Cajon, CA 92020

Donald R. Zvanut, OD

Provider ID: N/A
300 S Pierce St Ste 200
El Cajon, CA 92020

Jocelyn Ou, OD

Provider ID: N/A
801 Orange Ave Ste 204
Coronado, CA 92118

Lee R. Katzman, MD

Provider ID: N/A
801 Orange Ave Ste 204
Coronado, CA 92118

Irene J. Gendelman, OD

Provider ID: N/A
171 C Ave Ste B
Coronado, CA 92118

Amanda K. Dexter, OD

Provider ID: N/A
1349 Camino Del Mar Ste C
Del Mar, CA 92014

Wildon C. Wong, OD

Provider ID: N/A
2673 Via De La Valle Ste Ef
Del Mar, CA 92014

Tania Stevens, OD

Provider ID: N/A
2673 Via De La Valle Ste Ef
Del Mar, CA 92014

Noorina Zaidi, OD

Provider ID: N/A
300 S Pierce St Ste 200
El Cajon, CA 92020

John B. Vinh, OD

Provider ID: N/A
300 S Pierce St Ste 200
El Cajon, CA 92020

Jeffrey I. Scott, OD

Provider ID: N/A
300 S Pierce St Ste 200
El Cajon, CA 92020

Nicholas Binder, MD

Provider ID: N/A
300 S Pierce St Ste 200
El Cajon, CA 92020

Sulki Han, OD

Provider ID: N/A
300 S Pierce St Ste 200
El Cajon, CA 92020

Kim N. Aoto, OD

Provider ID: N/A
300 S Pierce St Ste 200
El Cajon, CA 92020

Daniela Baumann, OD

Provider ID: N/A
300 S Pierce St Ste 200
El Cajon, CA 92020

Bhumika Pandya, OD

Provider ID: N/A
300 S Pierce St Ste 200
El Cajon, CA 92020

Vady Khalil, OD

Provider ID: N/A
300 S Pierce St Ste 200
El Cajon, CA 92020

Thu N. Tran, OD

Provider ID: N/A
13487 Camino Canada
El Cajon, CA 92021

Anh T. Tonnu, OD

Provider ID: N/A
300 S Pierce St Ste 200
El Cajon, CA 92020

Tina Khieu, OD

Provider ID: N/A
300 S Pierce St Ste 200
El Cajon, CA 92020

Nilam Bansal, OD

Provider ID: N/A
525 E Main St
El Cajon, CA 92020

Andrea Meagher, OD

Provider ID: N/A
2907 Jamacha Rd Ste A
El Cajon, CA 92019

Moena Dean, OD

Provider ID: N/A
300 S Pierce St Ste 200
El Cajon, CA 92020

Stephanie Asis, OD

Provider ID: N/A
300 S Pierce St Ste 200
El Cajon, CA 92020

My Linh Ton-nu, OD

Provider ID: N/A
300 S Pierce St Ste 200
El Cajon, CA 92020

Judy Hamouie, OD

Provider ID: N/A
300 S Pierce St Ste 200
El Cajon, CA 92020

Tailun Zhao, MD

Provider ID: N/A
300 S Pierce St Ste 200
El Cajon, CA 92020

Walmart Optical 2253, NA

Provider ID: N/A
13487 Camino Canada
El Cajon, CA 92021

David Najafi, MD

Provider ID: N/A
525 E Main St
El Cajon, CA 92020

Luis A. Molina, OD

Provider ID: N/A
525 E Main St
El Cajon, CA 92020

Gitane Patel, MD

Provider ID: N/A
300 S Pierce St Ste 200
El Cajon, CA 92020

Kim J. Butler, OD

Provider ID: N/A
1273 Broadway
El Cajon, CA 92021

Minh Hanh Nguyen, OD

Provider ID: N/A
525 E Main St
El Cajon, CA 92020

Mashia Ghods, OD

Provider ID: N/A
525 E Main St
El Cajon, CA 92020

Elias Toubia, OD

Provider ID: N/A
525 E Main St
El Cajon, CA 92020

Garrett Pennell, OD

Provider ID: N/A
605 Fletcher Pkwy
El Cajon, CA 92020

Nazret Weldeghiorgis, OD

Provider ID: N/A
525 E Main St
El Cajon, CA 92020

Rex A. Werner, OD

Provider ID: N/A
2650 Jamacha Rd Ste 155
El Cajon, CA 92019

Kwok Fung Chan, OD

Provider ID: N/A
2650 Jamacha Rd Ste 155
El Cajon, CA 92019

Theresa Nguyen, OD

Provider ID: N/A
2907 Jamacha Rd Ste A
El Cajon, CA 92019

Hoang Ho, OD

Provider ID: N/A
605 Fletcher Pkwy
El Cajon, CA 92020

Beverly Tu, OD

Provider ID: N/A
320 Santa Fe Dr Ste 104
Encinitas, CA 92024

Mary M. King, OD

Provider ID: N/A
2907 Jamacha Rd Ste A
El Cajon, CA 92019

Shervin Alborzian, MD

Provider ID: N/A
525 E Main St
El Cajon, CA 92020

Tiana Mathieson, OD

Provider ID: N/A
525 E Main St
El Cajon, CA 92020

Maria Camila Molina Velandia, OD

Provider ID: N/A
525 E Main St
El Cajon, CA 92020

R Aaron Werner, OD

Provider ID: N/A
2650 Jamacha Rd Ste 155
El Cajon, CA 92019

Brittany J. McMurren, OD

Provider ID: N/A
2650 Jamacha Rd Ste 155
El Cajon, CA 92019

Barry Katzman, MD

Provider ID: N/A
300 S Pierce St Ste 200
El Cajon, CA 92020

Christopher Hsu, MD

Provider ID: N/A
300 S Pierce St Ste 200
El Cajon, CA 92020

Florena Culas, OD

Provider ID: N/A
525 E Main St
El Cajon, CA 92020

Noorina Zaidi, OD

Provider ID: N/A
320 Santa Fe Dr Ste 104
Encinitas, CA 92024

Stephanie Asis, OD

Provider ID: N/A
320 Santa Fe Dr Ste 104
Encinitas, CA 92024

Sharon A. Wong, OD

Provider ID: N/A
320 Santa Fe Dr Ste 104
Encinitas, CA 92024

Mary Vivirito, OD

Provider ID: N/A
320 Santa Fe Dr Ste 104
Encinitas, CA 92024

Jeffrey I. Scott, OD

Provider ID: N/A
320 Santa Fe Dr Ste 104
Encinitas, CA 92024

Joshua Morrison Reyes, MD

Provider ID: N/A
320 Santa Fe Dr Ste 104
Encinitas, CA 92024

Henry V. Tran, OD

Provider ID: N/A
320 Santa Fe Dr Ste 104
Encinitas, CA 92024

Michelle B. Crosby, MD

Provider ID: N/A
477 N El Camino Real Ste C300
Encinitas, CA 92024

Phuc Quach, OD

Provider ID: N/A
320 Santa Fe Dr Ste 104
Encinitas, CA 92024

Noam Nicholson, OD

Provider ID: N/A
205 S El Camino Real Ste A
Encinitas, CA 92024

Salomi Rajadhyksha, OD

Provider ID: N/A
205 S El Camino Real Ste A
Encinitas, CA 92024

Daniela Baumann, OD

Provider ID: N/A
320 Santa Fe Dr Ste 104
Encinitas, CA 92024

Janice Hung, OD

Provider ID: N/A
320 Santa Fe Dr Ste 104
Encinitas, CA 92024

Sulki Han, OD

Provider ID: N/A
320 Santa Fe Dr Ste 104
Encinitas, CA 92024

Sharon M. Dyer, OD

Provider ID: N/A
320 Santa Fe Dr Ste 104
Encinitas, CA 92024

John B. Vinh, OD

Provider ID: N/A
320 Santa Fe Dr Ste 104
Encinitas, CA 92024

Sylvia Tillman, OD

Provider ID: N/A
320 Santa Fe Dr Ste 104
Encinitas, CA 92024

Michael A. Samuel, MD

Provider ID: N/A
320 Santa Fe Dr Ste 104
Encinitas, CA 92024

Ryan Marr, OD

Provider ID: N/A
320 Santa Fe Dr Ste 104
Encinitas, CA 92024

Hunter Morgan, OD

Provider ID: N/A
205 S El Camino Real Ste A
Encinitas, CA 92024

Connor Caldwell, OD

Provider ID: N/A
477 N El Camino Real Ste C300
Encinitas, CA 92024

Neeta Varshney, MD

Provider ID: N/A
477 N El Camino Real Ste C300
Encinitas, CA 92024

Nancy Tsui, OD

Provider ID: N/A
320 Santa Fe Dr Ste 104
Encinitas, CA 92024

Wesley S. Chew, OD

Provider ID: N/A
320 Santa Fe Dr Ste 104
Encinitas, CA 92024

Vady Khalil, OD

Provider ID: N/A
320 Santa Fe Dr Ste 104
Encinitas, CA 92024

Nataly Kalbakji, OD

Provider ID: N/A
320 Santa Fe Dr Ste 104
Encinitas, CA 92024

Judy Hamouie, OD

Provider ID: N/A
320 Santa Fe Dr Ste 104
Encinitas, CA 92024

Henry L. Hudson, MD

Provider ID: N/A
320 Santa Fe Dr Ste 104
Encinitas, CA 92024

Johnny Cao-nguyen, OD

Provider ID: N/A
477 N El Camino Real Ste C202
Encinitas, CA 92024

Michael Fimreite, OD

Provider ID: N/A
944 Regal Rd
Encinitas, CA 92024

Claudia Montana Collins, OD

Provider ID: N/A
944 Regal Rd
Encinitas, CA 92024

Victoria V. Vuong Nguyen, OD

Provider ID: N/A
477 N El Camino Real Ste C300
Encinitas, CA 92024

Tailun Zhao, MD

Provider ID: N/A
320 Santa Fe Dr Ste 104
Encinitas, CA 92024

My Linh Ton-nu, OD

Provider ID: N/A
320 Santa Fe Dr Ste 104
Encinitas, CA 92024

Stephan Chiu, MD

Provider ID: N/A
320 Santa Fe Dr Ste 104
Encinitas, CA 92024

Tina Khieu, OD

Provider ID: N/A
320 Santa Fe Dr Ste 104
Encinitas, CA 92024

Bhumika Pandya, OD

Provider ID: N/A
320 Santa Fe Dr Ste 104
Encinitas, CA 92024

Steven Fish, MD

Provider ID: N/A
320 Santa Fe Dr Ste 104
Encinitas, CA 92024

Vanessa Grichine, OD

Provider ID: N/A
944 Regal Rd
Encinitas, CA 92024

Christina M. Turner, OD

Provider ID: N/A
944 Regal Rd
Encinitas, CA 92024

Kha T. Do, OD

Provider ID: N/A
944 Regal Rd
Encinitas, CA 92024

Patricia A. Atie, OD

Provider ID: N/A
944 Regal Rd
Encinitas, CA 92024

Michael J. Haug, OD

Provider ID: N/A
893 Santa Fe Dr
Encinitas, CA 92024

Mona Moshtaghi, OD

Provider ID: N/A
477 N El Camino Real Ste C202
Encinitas, CA 92024

Connie Tan, OD

Provider ID: N/A
477 N El Camino Real Ste C202
Encinitas, CA 92024

Catherine Y. Tan, OD

Provider ID: N/A
235 N El Camino Real
Encinitas, CA 92024

Moena Dean, OD

Provider ID: N/A
320 Santa Fe Dr Ste 104
Encinitas, CA 92024

Thy T. Nguyen, OD

Provider ID: N/A
320 Santa Fe Dr Ste 104
Encinitas, CA 92024

Tom S. Chang, MD

Provider ID: N/A
320 Santa Fe Dr Ste 104
Encinitas, CA 92024

Angela Moll, MD

Provider ID: N/A
477 N El Camino Real Ste D302
Encinitas, CA 92024

Anh T. Tonnu, OD

Provider ID: N/A
320 Santa Fe Dr Ste 104
Encinitas, CA 92024

Preeti Bansal, MD

Provider ID: N/A
477 N El Camino Real Ste D302
Encinitas, CA 92024

Deborah S. Haug, OD

Provider ID: N/A
893 Santa Fe Dr
Encinitas, CA 92024

Ardalan E. Aminlari, MD

Provider ID: N/A
477 N El Camino Real Ste C202
Encinitas, CA 92024

Jeffrey B. Morris, MD

Provider ID: N/A
477 N El Camino Real Ste C202
Encinitas, CA 92024

Marineh Baghoumian, OD

Provider ID: N/A
320 Santa Fe Dr Ste 104
Encinitas, CA 92024

Jeanne W. Louie, OD

Provider ID: N/A
893 Santa Fe Dr
Encinitas, CA 92024

Murtaza Merali, OD

Provider ID: N/A
320 Santa Fe Dr Ste 104
Encinitas, CA 92024

Eric Johnston, MD

Provider ID: N/A
477 N El Camino Real Ste C202
Encinitas, CA 92024

Kim N. Aoto, OD

Provider ID: N/A
320 Santa Fe Dr Ste 104
Encinitas, CA 92024

Joseph McGraw, MD

Provider ID: N/A
320 Santa Fe Dr Ste 104
Encinitas, CA 92024

Christopher Hsu, MD

Provider ID: N/A
320 Santa Fe Dr Ste 104
Encinitas, CA 92024

Stephen J. Moffett, OD

Provider ID: N/A
282 N El Camino Real Ste F
Encinitas, CA 92024

Michael A. Foyle, OD

Provider ID: N/A
282 N El Camino Real Ste F
Encinitas, CA 92024

Viet Nguyen, OD

Provider ID: N/A
282 N El Camino Real Ste F
Encinitas, CA 92024

Donald R. Zvanut, OD

Provider ID: N/A
320 Santa Fe Dr Ste 104
Encinitas, CA 92024

Mona N. Adams, OD

Provider ID: N/A
477 N El Camino Real Ste D302
Encinitas, CA 92024

Sharon M. Dyer, OD

Provider ID: N/A
700 W El Norte Pkwy Ste 200
Escondido, CA 92026

Nicholas Binder, MD

Provider ID: N/A
700 W El Norte Pkwy Ste 200
Escondido, CA 92026

Sulki Han, OD

Provider ID: N/A
700 W El Norte Pkwy Ste 200
Escondido, CA 92026

Tom S. Chang, MD

Provider ID: N/A
700 W El Norte Pkwy Ste 200
Escondido, CA 92026

Mansoor Movaghar, MD

Provider ID: N/A
477 N El Camino Real Ste D302
Encinitas, CA 92024

Robert M. Howard, OD

Provider ID: N/A
282 N El Camino Real Ste F
Encinitas, CA 92024

Shagun Bhatia, MD

Provider ID: N/A
477 N El Camino Real Ste D302
Encinitas, CA 92024

Henry O Halloran, MD

Provider ID: N/A
477 N El Camino Real Ste D302
Encinitas, CA 92024

Jason Lee, OD

Provider ID: N/A
477 N El Camino Real Ste D302
Encinitas, CA 92024

Joshua Morrison Reyes, MD

Provider ID: N/A
700 W El Norte Pkwy Ste 200
Escondido, CA 92026

Jeffrey I. Scott, OD

Provider ID: N/A
700 W El Norte Pkwy Ste 200
Escondido, CA 92026

Philip Kim, OD

Provider ID: N/A
700 W El Norte Pkwy Ste 200
Escondido, CA 92026

Phuc Quach, OD

Provider ID: N/A
700 W El Norte Pkwy Ste 200
Escondido, CA 92026

Nancy Tsui, OD

Provider ID: N/A
700 W El Norte Pkwy Ste 200
Escondido, CA 92026

Beverly Tu, OD

Provider ID: N/A
700 W El Norte Pkwy Ste 200
Escondido, CA 92026

John B. Vinh, OD

Provider ID: N/A
700 W El Norte Pkwy Ste 200
Escondido, CA 92026

Henry V. Tran, OD

Provider ID: N/A
700 W El Norte Pkwy Ste 200
Escondido, CA 92026

Wesley S. Chew, OD

Provider ID: N/A
700 W El Norte Pkwy Ste 200
Escondido, CA 92026

Murtaza Merali, OD

Provider ID: N/A
700 W El Norte Pkwy Ste 200
Escondido, CA 92026

Moena Dean, OD

Provider ID: N/A
700 W El Norte Pkwy Ste 200
Escondido, CA 92026

Marineh Baghoumian, OD

Provider ID: N/A
700 W El Norte Pkwy Ste 200
Escondido, CA 92026

Preeti Bansal, MD

Provider ID: N/A
2125 Citracado Pkwy Ste 200
Escondido, CA 92029

Luis A. Molina, OD

Provider ID: N/A
128 N Broadway
Escondido, CA 92025

Puneh Baha, OD

Provider ID: N/A
1802 S Escondido Blvd
Escondido, CA 92025

Sujata P. Prabhu, MD

Provider ID: N/A
700 W El Norte Pkwy Ste 200
Escondido, CA 92026

Sharon A. Wong, OD

Provider ID: N/A
700 W El Norte Pkwy Ste 200
Escondido, CA 92026

Michael A. Samuel, MD

Provider ID: N/A
700 W El Norte Pkwy Ste 200
Escondido, CA 92026

Sarjan H. Patel, MD

Provider ID: N/A
700 W El Norte Pkwy Ste 200
Escondido, CA 92026

Kim N. Aoto, OD

Provider ID: N/A
700 W El Norte Pkwy Ste 200
Escondido, CA 92026

Arvind Saini, MD

Provider ID: N/A
1802 S Escondido Blvd
Escondido, CA 92025

Tina Khieu, OD

Provider ID: N/A
700 W El Norte Pkwy Ste 200
Escondido, CA 92026

Maria Camila Molina Velandia, OD

Provider ID: N/A
128 N Broadway
Escondido, CA 92025

Sara Julazadeh, OD

Provider ID: N/A
700 W El Norte Pkwy Ste 200
Escondido, CA 92026

Vivian Chau, OD

Provider ID: N/A
700 W El Norte Pkwy Ste 200
Escondido, CA 92026

Tailun Zhao, MD

Provider ID: N/A
700 W El Norte Pkwy Ste 200
Escondido, CA 92026

Ryan Marr, OD

Provider ID: N/A
700 W El Norte Pkwy Ste 200
Escondido, CA 92026

Nataly Kalbakji, OD

Provider ID: N/A
700 W El Norte Pkwy Ste 200
Escondido, CA 92026

Judy Hamouie, OD

Provider ID: N/A
700 W El Norte Pkwy Ste 200
Escondido, CA 92026

Henry L. Hudson, MD

Provider ID: N/A
700 W El Norte Pkwy Ste 200
Escondido, CA 92026

Sylvia Tillman, OD

Provider ID: N/A
700 W El Norte Pkwy Ste 200
Escondido, CA 92026

Daniela Baumann, OD

Provider ID: N/A
700 W El Norte Pkwy Ste 200
Escondido, CA 92026

Stephanie Asis, OD

Provider ID: N/A
700 W El Norte Pkwy Ste 200
Escondido, CA 92026

Ashley Mccafferty, OD

Provider ID: N/A
201 W Valley Pkwy
Escondido, CA 92025

Jeffrey S. Fimreite, OD

Provider ID: N/A
201 N Fig St
Escondido, CA 92025

Elena Karapetian, OD

Provider ID: N/A
700 W El Norte Pkwy Ste 200
Escondido, CA 92026

Steven Fish, MD

Provider ID: N/A
700 W El Norte Pkwy Ste 200
Escondido, CA 92026

Noorina Zaidi, OD

Provider ID: N/A
700 W El Norte Pkwy Ste 200
Escondido, CA 92026

Bhumika Pandya, OD

Provider ID: N/A
700 W El Norte Pkwy Ste 200
Escondido, CA 92026

My Linh Ton-nu, OD

Provider ID: N/A
700 W El Norte Pkwy Ste 200
Escondido, CA 92026

Janice Hung, OD

Provider ID: N/A
700 W El Norte Pkwy Ste 200
Escondido, CA 92026

Mary Vivirito, OD

Provider ID: N/A
700 W El Norte Pkwy Ste 200
Escondido, CA 92026

Vady Khalil, OD

Provider ID: N/A
700 W El Norte Pkwy Ste 200
Escondido, CA 92026

Christina M. Turner, OD

Provider ID: N/A
201 N Fig St
Escondido, CA 92025

Kha T. Do, OD

Provider ID: N/A
201 N Fig St
Escondido, CA 92025

Patricia A. Atie, OD

Provider ID: N/A
201 N Fig St
Escondido, CA 92025

Basanti Shaw, OD

Provider ID: N/A
1835 S Centre City Pkwy Ste E
Escondido, CA 92025

Jeanne W. Louie, OD

Provider ID: N/A
316 W Mission Ave Ste 118
Escondido, CA 92025

Matthew Kirk, MD

Provider ID: N/A
201 W Valley Pkwy
Escondido, CA 92025

Terilyn T. Thach, OD

Provider ID: N/A
2419 E Valley Pkwy
Escondido, CA 92027

Marty C. Tornatore, OD

Provider ID: N/A
225 E 2nd Ave Ste 310
Escondido, CA 92025

Michelle Rosenblatt, OD

Provider ID: N/A
225 E 2nd Ave Ste 310
Escondido, CA 92025

Lorne D. Kapner, MD

Provider ID: N/A
225 E 2nd Ave Ste 310
Escondido, CA 92025

Angela Moll, MD

Provider ID: N/A
2125 Citracado Pkwy Ste 200
Escondido, CA 92029

Mansoor Movaghar, MD

Provider ID: N/A
2125 Citracado Pkwy Ste 200
Escondido, CA 92029

Tam T. Le, OD

Provider ID: N/A
1711 E Valley Pkwy Ste 109
Escondido, CA 92027

Garrick T. Sit, OD

Provider ID: N/A
441 S Escondido Blvd
Escondido, CA 92025

Vanessa Grichine, OD

Provider ID: N/A
201 N Fig St
Escondido, CA 92025

Michael Fimreite, OD

Provider ID: N/A
201 N Fig St
Escondido, CA 92025

Coral St Onge, OD

Provider ID: N/A
225 E 2nd Ave Ste 310
Escondido, CA 92025

Ioana M. Swikard, OD

Provider ID: N/A
225 E 2nd Ave Ste 310
Escondido, CA 92025

Marianna Samuels, OD

Provider ID: N/A
225 E 2nd Ave Ste 310
Escondido, CA 92025

Afsaneh Amini, OD

Provider ID: N/A
225 E 2nd Ave Ste 310
Escondido, CA 92025

Michael J. Haug, OD

Provider ID: N/A
316 W Mission Ave Ste 118
Escondido, CA 92025

Anh T. Tonnu, OD

Provider ID: N/A
700 W El Norte Pkwy Ste 200
Escondido, CA 92026

Catherine F. Soriano, OD

Provider ID: N/A
700 W El Norte Pkwy Ste 200
Escondido, CA 92026

Thy T. Nguyen, OD

Provider ID: N/A
700 W El Norte Pkwy Ste 200
Escondido, CA 92026

Christopher Hsu, MD

Provider ID: N/A
700 W El Norte Pkwy Ste 200
Escondido, CA 92026

Megha Pansara, MD

Provider ID: N/A
2125 Citracado Pkwy Ste 200
Escondido, CA 92029

Shagun Bhatia, MD

Provider ID: N/A
2125 Citracado Pkwy Ste 200
Escondido, CA 92029

Donald R. Zvanut, OD

Provider ID: N/A
700 W El Norte Pkwy Ste 200
Escondido, CA 92026

Alexander Tran, OD

Provider ID: N/A
2125 Citracado Pkwy Ste 200
Escondido, CA 92029

Jamie L. Bergmark, OD

Provider ID: N/A
2125 Citracado Pkwy Ste 200
Escondido, CA 92029

Henry O Halloran, MD

Provider ID: N/A
2125 Citracado Pkwy Ste 200
Escondido, CA 92029

Amanda E. Beaudry, OD

Provider ID: N/A
2125 Citracado Pkwy Ste 200
Escondido, CA 92029

Gitane Patel, MD

Provider ID: N/A
700 W El Norte Pkwy Ste 200
Escondido, CA 92026

Joseph McGraw, MD

Provider ID: N/A
700 W El Norte Pkwy Ste 200
Escondido, CA 92026

Adam D. Goldstone, OD

Provider ID: N/A
700 W El Norte Pkwy Ste 200
Escondido, CA 92026

Claudia Montana Collins, OD

Provider ID: N/A
201 N Fig St
Escondido, CA 92025

Karen E. Love, OD

Provider ID: N/A
1299 E Pennsylvania Ave Ste B
Escondido, CA 92027

Eric Verret, OD

Provider ID: N/A
613 E Grand Ave
Escondido, CA 92025

David N. Ardakani, OD

Provider ID: N/A
3440 Del Lago Blvd Ste E
Escondido, CA 92029

Amanda Klaren, OD

Provider ID: N/A
2125 Citracado Pkwy Ste 200
Escondido, CA 92029

Mona N. Adams, OD

Provider ID: N/A
2125 Citracado Pkwy Ste 200
Escondido, CA 92029

Jason Lee, OD

Provider ID: N/A
2125 Citracado Pkwy Ste 200
Escondido, CA 92029

Kim S. Duong, OD

Provider ID: N/A
2125 Citracado Pkwy Ste 200
Escondido, CA 92029

Anthony J. Bullum, OD

Provider ID: N/A
1328 S Mission Rd
Fallbrook, CA 92028

Bruce D. George, OD

Provider ID: N/A
1102 S Main Ave
Fallbrook, CA 92028

Cheryl Duong, OD

Provider ID: N/A
521 E Elder St Ste 102
Fallbrook, CA 92028

Eric J. Ramos, OD

Provider ID: N/A
645 E Elder St Ste D
Fallbrook, CA 92028

Brooke A. Coleman, OD

Provider ID: N/A
521 E Elder St Ste 102
Fallbrook, CA 92028

Roger D. Johnson, MD

Provider ID: N/A
521 E Elder St Ste 102
Fallbrook, CA 92028

Abraham Hanono, OD

Provider ID: N/A
894 Palm Ave Ste B
Imperial Beach, CA 91932

Henry L. Hudson, MD

Provider ID: N/A
9850 Genesee Ave Ste 310
La Jolla, CA 92037

Maulik S. Zaveri, MD

Provider ID: N/A
8950 Villa La Jolla Dr # C130
La Jolla, CA 92037

John G. Tew, MD

Provider ID: N/A
521 E Elder St Ste 102
Fallbrook, CA 92028

Kendall George, OD

Provider ID: N/A
1102 S Main Ave
Fallbrook, CA 92028

Suneha Khinda, OD

Provider ID: N/A
521 E Elder St Ste 102
Fallbrook, CA 92028

Jeffrey Connor, OD

Provider ID: N/A
521 E Elder St Ste 102
Fallbrook, CA 92028

John D. Archibald, OD

Provider ID: N/A
521 E Elder St Ste 102
Fallbrook, CA 92028

Michael J. Cooper, OD

Provider ID: N/A
521 E Elder St Ste 102
Fallbrook, CA 92028

Helfon Hanono, OD

Provider ID: N/A
894 Palm Ave Ste B
Imperial Beach, CA 91932

Krista Gardner, OD

Provider ID: N/A
8950 Villa La Jolla Dr # C130
La Jolla, CA 92037

Stephan Chiu, MD

Provider ID: N/A
9850 Genesee Ave Ste 310
La Jolla, CA 92037

Patricia S. Bainter, MD

Provider ID: N/A
8950 Villa La Jolla Dr # C130
La Jolla, CA 92037

Ying Liu, OD

Provider ID: N/A
8831 Villa La Jolla Dr Ste 201
La Jolla, CA 92037

Ryan Marr, OD

Provider ID: N/A
9850 Genesee Ave Ste 310
La Jolla, CA 92037

Nataly Kalbakji, OD

Provider ID: N/A
9850 Genesee Ave Ste 310
La Jolla, CA 92037

Anne B. Lam, OD

Provider ID: N/A
9350 Campus Point Dr Ste 1B
La Jolla, CA 92037

Amiee S. Ho, OD

Provider ID: N/A
9350 Campus Point Dr Ste 1B
La Jolla, CA 92037

Sylvia Tillman, OD

Provider ID: N/A
9850 Genesee Ave Ste 310
La Jolla, CA 92037

Daniela Baumann, OD

Provider ID: N/A
9850 Genesee Ave Ste 310
La Jolla, CA 92037

Judy Hamouie, OD

Provider ID: N/A
9850 Genesee Ave Ste 310
La Jolla, CA 92037

David J. Schanzlin, MD

Provider ID: N/A
4130 La Jolla Village Dr # 300
La Jolla, CA 92037

Wendy Jones, OD

Provider ID: N/A
4130 La Jolla Village Dr # 300
La Jolla, CA 92037

Tailun Zhao, MD

Provider ID: N/A
9850 Genesee Ave Ste 310
La Jolla, CA 92037

Vady Khalil, OD

Provider ID: N/A
9850 Genesee Ave Ste 310
La Jolla, CA 92037

Tina Khieu, OD

Provider ID: N/A
9850 Genesee Ave Ste 310
La Jolla, CA 92037

Bhumika Pandya, OD

Provider ID: N/A
9850 Genesee Ave Ste 310
La Jolla, CA 92037

My Linh Ton-nu, OD

Provider ID: N/A
9850 Genesee Ave Ste 310
La Jolla, CA 92037

Janice Hung, OD

Provider ID: N/A
9850 Genesee Ave Ste 310
La Jolla, CA 92037

Mary Vivirito, OD

Provider ID: N/A
9850 Genesee Ave Ste 310
La Jolla, CA 92037

Tracy Moor, OD

Provider ID: N/A
9350 Campus Point Dr Ste 1B
La Jolla, CA 92037

Julio Echegoyen, MD

Provider ID: N/A
4130 La Jolla Village Dr # 300
La Jolla, CA 92037

Pearle Vision F114, NA

Provider ID: N/A
8843 Villa La Jolla Dr Ste 201
La Jolla, CA 92037

Michael Gordon, MD

Provider ID: N/A
4130 La Jolla Village Dr # 300
La Jolla, CA 92037

David I. Geffen, OD

Provider ID: N/A
4130 La Jolla Village Dr # 300
La Jolla, CA 92037

Lianne T. Mizoguchi, OD

Provider ID: N/A
9350 Campus Point Dr Ste 1B
La Jolla, CA 92037

Pamela A. Hoo, OD

Provider ID: N/A
9350 Campus Point Dr Ste 1B
La Jolla, CA 92037

Andrew Minh Vo, OD

Provider ID: N/A
9350 Campus Point Dr Ste 1B
La Jolla, CA 92037

Philip Kim, OD

Provider ID: N/A
9350 Campus Point Dr Ste 1B
La Jolla, CA 92037

Esmeralda C. Mcclean, OD

Provider ID: N/A
9350 Campus Point Dr Ste 1B
La Jolla, CA 92037

Lara Hustana, OD

Provider ID: N/A
9350 Campus Point Dr Ste 1B
La Jolla, CA 92037

Tracy Moor, OD

Provider ID: N/A
9415 Campus Point Dr
La Jolla, CA 92093

Matthew W. Gentile, OD

Provider ID: N/A
4150 Regents Park Row Ste 160
La Jolla, CA 92037

Alison Gordon, MD

Provider ID: N/A
4130 La Jolla Village Dr # 300
La Jolla, CA 92037

Alyssa Pack, OD

Provider ID: N/A
702 Pearl St Ste G
La Jolla, CA 92037

Beverly P. Bienes, OD

Provider ID: N/A
702 Pearl St Ste G
La Jolla, CA 92037

Caitlin Jomoc, OD

Provider ID: N/A
9350 Campus Point Dr Ste 1B
La Jolla, CA 92037

Carol Yu, OD

Provider ID: N/A
9350 Campus Point Dr Ste 1B
La Jolla, CA 92037

Stephanie Asis, OD

Provider ID: N/A
9850 Genesee Ave Ste 310
La Jolla, CA 92037

John F. Kulischak, OD

Provider ID: N/A
9350 Campus Point Dr Ste 1B
La Jolla, CA 92037

Justin Nguyen, OD

Provider ID: N/A
702 Pearl St Ste G
La Jolla, CA 92037

Steven P. Tayman, OD

Provider ID: N/A
4150 Regents Park Row Ste 160
La Jolla, CA 92037

Franklin W. Lusby, MD

Provider ID: N/A
9850 Genesee Ave Ste 220
La Jolla, CA 92037

Colin R. Bernstein, OD

Provider ID: N/A
9834 Genesee Ave Ste 209
La Jolla, CA 92037

Wildon C. Wong, OD

Provider ID: N/A
7841 Fay Ave
La Jolla, CA 92037

Thomas Avallone, MD

Provider ID: N/A
9834 Genesee Ave Ste 428
La Jolla, CA 92037

John E. Bokosky, MD

Provider ID: N/A
9834 Genesee Ave Ste 428
La Jolla, CA 92037

Andrew Minh Vo, OD

Provider ID: N/A
9415 Campus Point Dr
La Jolla, CA 92093

Nevin W. El-nimri, OD

Provider ID: N/A
9415 Campus Point Dr
La Jolla, CA 92093

Ucsd Shiley Eye Center, ES

Provider ID: N/A
9415 Campus Point Dr
La Jolla, CA 92093

Garrett Pennell, OD

Provider ID: N/A
4130 La Jolla Village Dr # 300
La Jolla, CA 92037

Sara Julazadeh, OD

Provider ID: N/A
9834 Genesee Ave Ste 428
La Jolla, CA 92037

Moena Dean, OD

Provider ID: N/A
9850 Genesee Ave Ste 310
La Jolla, CA 92037

Samantha Daoud, OD

Provider ID: N/A
7841 Fay Ave
La Jolla, CA 92037

Gordon G. Wong, OD

Provider ID: N/A
7841 Fay Ave
La Jolla, CA 92037

Daniel J. Coden, MD

Provider ID: N/A
9850 Genesee Ave Ste 310
La Jolla, CA 92037

Caitlin Jomoc, OD

Provider ID: N/A
9415 Campus Point Dr
La Jolla, CA 92093

Philip Kim, OD

Provider ID: N/A
9415 Campus Point Dr
La Jolla, CA 92093

Amiee S. Ho, OD

Provider ID: N/A
9415 Campus Point Dr
La Jolla, CA 92093

Lara Hustana, OD

Provider ID: N/A
9415 Campus Point Dr
La Jolla, CA 92093

Noorina Zaidi, OD

Provider ID: N/A
9850 Genesee Ave Ste 310
La Jolla, CA 92037

Joshua Morrison Reyes, MD

Provider ID: N/A
9850 Genesee Ave Ste 310
La Jolla, CA 92037

Beverly Tu, OD

Provider ID: N/A
9850 Genesee Ave Ste 310
La Jolla, CA 92037

Carol Yu, OD

Provider ID: N/A
9415 Campus Point Dr
La Jolla, CA 92093

Nancy Tsui, OD

Provider ID: N/A
9850 Genesee Ave Ste 310
La Jolla, CA 92037

Sharon M. Dyer, OD

Provider ID: N/A
9850 Genesee Ave Ste 310
La Jolla, CA 92037

John B. Vinh, OD

Provider ID: N/A
9850 Genesee Ave Ste 310
La Jolla, CA 92037

Thy T. Nguyen, OD

Provider ID: N/A
9850 Genesee Ave Ste 310
La Jolla, CA 92037

Jeffrey I. Scott, OD

Provider ID: N/A
9850 Genesee Ave Ste 310
La Jolla, CA 92037

Henry V. Tran, OD

Provider ID: N/A
9850 Genesee Ave Ste 310
La Jolla, CA 92037

Anh T. Tonnu, OD

Provider ID: N/A
9850 Genesee Ave Ste 310
La Jolla, CA 92037

Marineh Baghoumian, OD

Provider ID: N/A
9850 Genesee Ave Ste 310
La Jolla, CA 92037

Donald R. Zvanut, OD

Provider ID: N/A
9850 Genesee Ave Ste 310
La Jolla, CA 92037

Christopher Hsu, MD

Provider ID: N/A
9850 Genesee Ave Ste 310
La Jolla, CA 92037

Sulki Han, OD

Provider ID: N/A
9850 Genesee Ave Ste 310
La Jolla, CA 92037

Phuc Quach, OD

Provider ID: N/A
9850 Genesee Ave Ste 310
La Jolla, CA 92037

Sharon A. Wong, OD

Provider ID: N/A
9850 Genesee Ave Ste 310
La Jolla, CA 92037

Steven G. Pratt, MD

Provider ID: N/A
9850 Genesee Ave Ste 310
La Jolla, CA 92037

Arthur C. Perry, MD

Provider ID: N/A
9850 Genesee Ave Ste 310
La Jolla, CA 92037

Kim N. Aoto, OD

Provider ID: N/A
9850 Genesee Ave Ste 310
La Jolla, CA 92037

Murtaza Merali, OD

Provider ID: N/A
9850 Genesee Ave Ste 310
La Jolla, CA 92037

Wesley S. Chew, OD

Provider ID: N/A
9850 Genesee Ave Ste 310
La Jolla, CA 92037

Heidrun Gollogly, MD

Provider ID: N/A
7339 El Cajon Blvd Ste J
La Mesa, CA 91942

Sharon A. Wong, OD

Provider ID: N/A
7339 El Cajon Blvd Ste J
La Mesa, CA 91942

Wesley S. Chew, OD

Provider ID: N/A
7339 El Cajon Blvd Ste J
La Mesa, CA 91942

John B. Vinh, OD

Provider ID: N/A
7339 El Cajon Blvd Ste J
La Mesa, CA 91942

Sharon M. Dyer, OD

Provider ID: N/A
7339 El Cajon Blvd Ste J
La Mesa, CA 91942

Bruce T. Haight, MD

Provider ID: N/A
7339 El Cajon Blvd Ste J
La Mesa, CA 91942

Nicholas Binder, MD

Provider ID: N/A
7339 El Cajon Blvd Ste J
La Mesa, CA 91942

Murtaza Merali, OD

Provider ID: N/A
7339 El Cajon Blvd Ste J
La Mesa, CA 91942

Sujata P. Prabhu, MD

Provider ID: N/A
7339 El Cajon Blvd Ste J
La Mesa, CA 91942

Anh T. Tonnu, OD

Provider ID: N/A
7339 El Cajon Blvd Ste J
La Mesa, CA 91942

Thy T. Nguyen, OD

Provider ID: N/A
7339 El Cajon Blvd Ste J
La Mesa, CA 91942

Henry V. Tran, OD

Provider ID: N/A
7339 El Cajon Blvd Ste J
La Mesa, CA 91942

Sarjan H. Patel, MD

Provider ID: N/A
7339 El Cajon Blvd Ste J
La Mesa, CA 91942

Joshua Morrison Reyes, MD

Provider ID: N/A
7339 El Cajon Blvd Ste J
La Mesa, CA 91942

Marineh Baghoumian, OD

Provider ID: N/A
7339 El Cajon Blvd Ste J
La Mesa, CA 91942

Jeffrey I. Scott, OD

Provider ID: N/A
7339 El Cajon Blvd Ste J
La Mesa, CA 91942

Phuc Quach, OD

Provider ID: N/A
7339 El Cajon Blvd Ste J
La Mesa, CA 91942

Kim N. Aoto, OD

Provider ID: N/A
7339 El Cajon Blvd Ste J
La Mesa, CA 91942

Donald R. Zvanut, OD

Provider ID: N/A
7339 El Cajon Blvd Ste J
La Mesa, CA 91942

Gitane Patel, MD

Provider ID: N/A
7339 El Cajon Blvd Ste J
La Mesa, CA 91942

Joseph Mcgraw, MD

Provider ID: N/A
7339 El Cajon Blvd Ste J
La Mesa, CA 91942

Christopher Hsu, MD

Provider ID: N/A
7339 El Cajon Blvd Ste J
La Mesa, CA 91942

Caroline Guerrero Cauchi, OD

Provider ID: N/A
8235 University Ave
La Mesa, CA 91942

Andreea Nastasoiu, OD

Provider ID: N/A
8321 La Mesa Blvd
La Mesa, CA 91942

Tina Khieu, OD

Provider ID: N/A
7339 El Cajon Blvd Ste J
La Mesa, CA 91942

Gregory E. Giles, OD

Provider ID: N/A
7863 La Mesa Blvd Ste 202
La Mesa, CA 91942

Ryan N. Aboul-hosn, OD

Provider ID: N/A
5642 Lake Murray Blvd
La Mesa, CA 91942

Phillip A. Levy, OD

Provider ID: N/A
5020 Baltimore Dr Ste B
La Mesa, CA 91942

Chantelle Davis, OD

Provider ID: N/A
8321 La Mesa Blvd
La Mesa, CA 91942

Rachel J. Lee, OD

Provider ID: N/A
8321 La Mesa Blvd
La Mesa, CA 91942

Ryan Marr, OD

Provider ID: N/A
7339 El Cajon Blvd Ste J
La Mesa, CA 91942

Jamie S. Peters, OD

Provider ID: N/A
8235 University Ave
La Mesa, CA 91942

Sulki Han, OD

Provider ID: N/A
7339 El Cajon Blvd Ste J
La Mesa, CA 91942

Barry Katzman, MD

Provider ID: N/A
7339 El Cajon Blvd Ste J
La Mesa, CA 91942

Sally S. Lee, DO

Provider ID: N/A
8291 La Mesa Blvd
La Mesa, CA 91942

David M. Newman, OD

Provider ID: N/A
5642 Lake Murray Blvd
La Mesa, CA 91942

Tina Bui, OD

Provider ID: N/A
5020 Baltimore Dr Ste B
La Mesa, CA 91942

Thomas Avallone, MD

Provider ID: N/A
5565 Grossmont Center Dr # 551
La Mesa, CA 91942

Dave S. Perey, OD

Provider ID: N/A
8125 Fletcher Pkwy
La Mesa, CA 91942

Meredith G. Walton, OD

Provider ID: N/A
8321 La Mesa Blvd
La Mesa, CA 91942

Crizelda Lauron, OD

Provider ID: N/A
8321 La Mesa Blvd
La Mesa, CA 91942

Nataly Kalbakji, OD

Provider ID: N/A
7339 El Cajon Blvd Ste J
La Mesa, CA 91942

Judy Hamouie, OD

Provider ID: N/A
7339 El Cajon Blvd Ste J
La Mesa, CA 91942

Henry L. Hudson, MD

Provider ID: N/A
7339 El Cajon Blvd Ste J
La Mesa, CA 91942

Sylvia Tillman, OD

Provider ID: N/A
7339 El Cajon Blvd Ste J
La Mesa, CA 91942

Daniela Baumann, OD

Provider ID: N/A
7339 El Cajon Blvd Ste J
La Mesa, CA 91942

Stephanie Asis, OD

Provider ID: N/A
7339 El Cajon Blvd Ste J
La Mesa, CA 91942

Moena Dean, OD

Provider ID: N/A
7339 El Cajon Blvd Ste J
La Mesa, CA 91942

Vady Khalil, OD

Provider ID: N/A
7339 El Cajon Blvd Ste J
La Mesa, CA 91942

Marineh Baghoumian, OD

Provider ID: N/A
5565 Grossmont Center Dr # 551
La Mesa, CA 91942

Tom S. Chang, MD

Provider ID: N/A
5565 Grossmont Center Dr # 551
La Mesa, CA 91942

Nancy Tsui, OD

Provider ID: N/A
7339 El Cajon Blvd Ste J
La Mesa, CA 91942

Bhumika Pandya, OD

Provider ID: N/A
7339 El Cajon Blvd Ste J
La Mesa, CA 91942

My Linh Ton-nu, OD

Provider ID: N/A
7339 El Cajon Blvd Ste J
La Mesa, CA 91942

Janice Hung, OD

Provider ID: N/A
7339 El Cajon Blvd Ste J
La Mesa, CA 91942

Mary Vivirito, OD

Provider ID: N/A
7339 El Cajon Blvd Ste J
La Mesa, CA 91942

Noorina Zaidi, OD

Provider ID: N/A
7339 El Cajon Blvd Ste J
La Mesa, CA 91942

Beverly Tu, OD

Provider ID: N/A
7339 El Cajon Blvd Ste J
La Mesa, CA 91942

Alla Young, OD

Provider ID: N/A
7877 Parkway Dr Ste 100
La Mesa, CA 91942

Murtaza Merali, OD

Provider ID: N/A
5565 Grossmont Center Dr # 551
La Mesa, CA 91942

Kim N. Aoto, OD

Provider ID: N/A
5565 Grossmont Center Dr # 551
La Mesa, CA 91942

Sujata P. Prabhu, MD

Provider ID: N/A

5565 Grossmont Center Dr # 551
La Mesa, CA 91942

Anh T. Tonnu, OD

Provider ID: N/A

5565 Grossmont Center Dr # 551
La Mesa, CA 91942

Joseph Mcgraw, MD

Provider ID: N/A

5565 Grossmont Center Dr # 551
La Mesa, CA 91942

Ryan Marr, OD

Provider ID: N/A

5565 Grossmont Center Dr # 551
La Mesa, CA 91942

My Linh Ton-nu, OD

Provider ID: N/A

5565 Grossmont Center Dr # 551
La Mesa, CA 91942

Jocelyn Ou, OD

Provider ID: N/A

7877 Parkway Dr Ste 100
La Mesa, CA 91942

Lee R. Katzman, MD

Provider ID: N/A

7877 Parkway Dr Ste 100
La Mesa, CA 91942

Costco Warehouse 0469, NA

Provider ID: N/A

8125 Fletcher Pkwy
La Mesa, CA 91942

Thomas M. Hixson, OD

Provider ID: N/A

8007 La Mesa Blvd
La Mesa, CA 91942

Kwok Fung Chan, OD

Provider ID: N/A

5500 Grsmnt Ctr Dr Ste 215
La Mesa, CA 91942

Donald R. Zvanut, OD

Provider ID: N/A

5565 Grossmont Center Dr # 551
La Mesa, CA 91942

Thy T. Nguyen, OD

Provider ID: N/A

5565 Grossmont Center Dr # 551
La Mesa, CA 91942

Christopher Hsu, MD

Provider ID: N/A

5565 Grossmont Center Dr # 551
La Mesa, CA 91942

Wesley S. Chew, OD

Provider ID: N/A

5565 Grossmont Center Dr # 551
La Mesa, CA 91942

Bruce T. Haight, MD

Provider ID: N/A

5565 Grossmont Center Dr # 551
La Mesa, CA 91942

Joseph Mannen, OD

Provider ID: N/A

7877 Parkway Dr Ste 100
La Mesa, CA 91942

Randall E. Conrad, OD

Provider ID: N/A

7877 Parkway Dr Ste 100
La Mesa, CA 91942

Walmart Optical, NA

Provider ID: N/A

5500 Grossmont Center Dr
La Mesa, CA 91942

David M. Kasanoff, OD

Provider ID: N/A

7339 El Cajon Blvd Ste G
La Mesa, CA 91942

Kevin M. Riggs, OD

Provider ID: N/A

5500 Grsmnt Ctr Dr Ste 215
La Mesa, CA 91942

Jeffrey Gregg, OD

Provider ID: N/A
5500 Grossmont Center Dr
La Mesa, CA 91942

Stephan Chiu, MD

Provider ID: N/A
5565 Grossmont Center Dr # 551
La Mesa, CA 91942

Vady Khalil, OD

Provider ID: N/A
5565 Grossmont Center Dr # 551
La Mesa, CA 91942

Nataly Kalbakji, OD

Provider ID: N/A
5565 Grossmont Center Dr # 551
La Mesa, CA 91942

Judy Hamouie, OD

Provider ID: N/A
5565 Grossmont Center Dr # 551
La Mesa, CA 91942

Henry L. Hudson, MD

Provider ID: N/A
5565 Grossmont Center Dr # 551
La Mesa, CA 91942

Janice Hung, OD

Provider ID: N/A
5565 Grossmont Center Dr # 551
La Mesa, CA 91942

Mary Vivirito, OD

Provider ID: N/A
5565 Grossmont Center Dr # 551
La Mesa, CA 91942

Henry V. Tran, OD

Provider ID: N/A
5565 Grossmont Center Dr # 551
La Mesa, CA 91942

Melissa M. Willey, OD

Provider ID: N/A
5565 Grossmont Center Dr # 551
La Mesa, CA 91942

Kimberly Cockerham, MD

Provider ID: N/A
7877 Parkway Dr Ste 100
La Mesa, CA 91942

Iga Gray, MD

Provider ID: N/A
7877 Parkway Dr Ste 100
La Mesa, CA 91942

Michael A. Samuel, MD

Provider ID: N/A
5565 Grossmont Center Dr # 551
La Mesa, CA 91942

Tina Khieu, OD

Provider ID: N/A
5565 Grossmont Center Dr # 551
La Mesa, CA 91942

Bhumika Pandya, OD

Provider ID: N/A
5565 Grossmont Center Dr # 551
La Mesa, CA 91942

Sylvia Tillman, OD

Provider ID: N/A
5565 Grossmont Center Dr # 551
La Mesa, CA 91942

Daniela Baumann, OD

Provider ID: N/A
5565 Grossmont Center Dr # 551
La Mesa, CA 91942

Stephanie Asis, OD

Provider ID: N/A
5565 Grossmont Center Dr # 551
La Mesa, CA 91942

Noorina Zaidi, OD

Provider ID: N/A
5565 Grossmont Center Dr # 551
La Mesa, CA 91942

Sharon A. Wong, OD

Provider ID: N/A
5565 Grossmont Center Dr # 551
La Mesa, CA 91942

John B. Vinh, OD

Provider ID: N/A

5565 Grossmont Center Dr # 551
La Mesa, CA 91942

Joshua Morrison Reyes, MD

Provider ID: N/A

5565 Grossmont Center Dr # 551
La Mesa, CA 91942

Sulki Han, OD

Provider ID: N/A

5565 Grossmont Center Dr # 551
La Mesa, CA 91942

Moena Dean, OD

Provider ID: N/A

5565 Grossmont Center Dr # 551
La Mesa, CA 91942

Heidrun Gollogly, MD

Provider ID: N/A

5565 Grossmont Center Dr # 551
La Mesa, CA 91942

Christopher Johnson, OD

Provider ID: N/A

9710 Winter Gardens Blvd Ste A
Lakeside, CA 92040

John C. Fleming, OD

Provider ID: N/A

9710 Winter Gardens Blvd Ste A
Lakeside, CA 92040

Kha T. Do, OD

Provider ID: N/A

7922 Palm St
Lemon Grove, CA 91945

Michael Fimreite, OD

Provider ID: N/A

8351 Broadway
Lemon Grove, CA 91945

Claudia Montana Collins, OD

Provider ID: N/A

8351 Broadway
Lemon Grove, CA 91945

Phuc Quach, OD

Provider ID: N/A

5565 Grossmont Center Dr # 551
La Mesa, CA 91942

Jeffrey I. Scott, OD

Provider ID: N/A

5565 Grossmont Center Dr # 551
La Mesa, CA 91942

Nancy Tsui, OD

Provider ID: N/A

5565 Grossmont Center Dr # 551
La Mesa, CA 91942

Beverly Tu, OD

Provider ID: N/A

5565 Grossmont Center Dr # 551
La Mesa, CA 91942

Sharon M. Dyer, OD

Provider ID: N/A

5565 Grossmont Center Dr # 551
La Mesa, CA 91942

Kenny Hoang, OD

Provider ID: N/A

9710 Winter Gardens Blvd Ste A
Lakeside, CA 92040

Kha T. Do, OD

Provider ID: N/A

8351 Broadway
Lemon Grove, CA 91945

Vanessa Grichine, OD

Provider ID: N/A

8351 Broadway
Lemon Grove, CA 91945

Christina M. Turner, OD

Provider ID: N/A

8351 Broadway
Lemon Grove, CA 91945

Jeffrey S. Fimreite, OD

Provider ID: N/A

8351 Broadway
Lemon Grove, CA 91945

Daniel D. Cha, OD

Provider ID: N/A
8351 Broadway
Lemon Grove, CA 91945

Vanessa Grichine, OD

Provider ID: N/A
7922 Palm St
Lemon Grove, CA 91945

Christina M. Turner, OD

Provider ID: N/A
7922 Palm St
Lemon Grove, CA 91945

Patricia A. Atie, OD

Provider ID: N/A
7922 Palm St
Lemon Grove, CA 91945

Andreea Nastasoiu, OD

Provider ID: N/A
1481 E Plaza Blvd
National City, CA 91950

Walmart Optical, NA

Provider ID: N/A
1200 Highland Ave
National City, CA 91950

Eva Y. Wu, OD

Provider ID: N/A
1033 Highland Ave
National City, CA 91950

Joan Keddington, OD

Provider ID: N/A
1481 E Plaza Blvd
National City, CA 91950

Tina Khieu, OD

Provider ID: N/A
2240 E Plaza Blvd Ste Fg
National City, CA 91950

Joshua Morrison Reyes, MD

Provider ID: N/A
655 Euclid Ave Ste 302
National City, CA 91950

Patricia A. Atie, OD

Provider ID: N/A
8351 Broadway
Lemon Grove, CA 91945

Michael Fimreite, OD

Provider ID: N/A
7922 Palm St
Lemon Grove, CA 91945

Jeffrey S. Fimreite, OD

Provider ID: N/A
7922 Palm St
Lemon Grove, CA 91945

Claudia Montana Collins, OD

Provider ID: N/A
7922 Palm St
Lemon Grove, CA 91945

Greg L. Marlay, OD

Provider ID: N/A
1132 E Plaza Blvd Ste 201
National City, CA 91950

Austin T. Lee, OD

Provider ID: N/A
1033 Highland Ave
National City, CA 91950

Ankur Kalra, OD

Provider ID: N/A
1481 E Plaza Blvd
National City, CA 91950

Donald R. Zvanut, OD

Provider ID: N/A
655 Euclid Ave Ste 302
National City, CA 91950

Sharon M. Dyer, OD

Provider ID: N/A
655 Euclid Ave Ste 302
National City, CA 91950

Phuc Quach, OD

Provider ID: N/A
655 Euclid Ave Ste 302
National City, CA 91950

John B. Vinh, OD

Provider ID: N/A

655 Euclid Ave Ste 302
National City, CA 91950**Henry V. Tran, OD**

Provider ID: N/A

655 Euclid Ave Ste 302
National City, CA 91950**Sulki Han, OD**

Provider ID: N/A

655 Euclid Ave Ste 302
National City, CA 91950**Nancy Tsui, OD**

Provider ID: N/A

655 Euclid Ave Ste 302
National City, CA 91950**Thy T. Nguyen, OD**

Provider ID: N/A

655 Euclid Ave Ste 302
National City, CA 91950**Christopher Hsu, MD**

Provider ID: N/A

655 Euclid Ave Ste 302
National City, CA 91950**Ryan Marr, OD**

Provider ID: N/A

2240 E Plaza Blvd Ste Fg
National City, CA 91950**Nataly Kalbakji, OD**

Provider ID: N/A

2240 E Plaza Blvd Ste Fg
National City, CA 91950**My Linh Ton-nu, OD**

Provider ID: N/A

655 Euclid Ave Ste 302
National City, CA 91950**Sally S. Lee, DO**

Provider ID: N/A

2345 E 8th St Ste 111
National City, CA 91950**Sharon A. Wong, OD**

Provider ID: N/A

655 Euclid Ave Ste 302
National City, CA 91950**Wesley S. Chew, OD**

Provider ID: N/A

655 Euclid Ave Ste 302
National City, CA 91950**Kim N. Aoto, OD**

Provider ID: N/A

655 Euclid Ave Ste 302
National City, CA 91950**Anh T. Tonnu, OD**

Provider ID: N/A

655 Euclid Ave Ste 302
National City, CA 91950**Joseph McGraw, MD**

Provider ID: N/A

655 Euclid Ave Ste 302
National City, CA 91950**Bruce T. Haight, MD**

Provider ID: N/A

655 Euclid Ave Ste 302
National City, CA 91950**Vady Khalil, OD**

Provider ID: N/A

2240 E Plaza Blvd Ste Fg
National City, CA 91950**Murtaza Merali, OD**

Provider ID: N/A

655 Euclid Ave Ste 302
National City, CA 91950**Mary M. King, OD**

Provider ID: N/A

1481 E Plaza Blvd
National City, CA 91950**Steven Fish, MD**

Provider ID: N/A

655 Euclid Ave Ste 302
National City, CA 91950

Ryan Marr, OD

Provider ID: N/A
655 Euclid Ave Ste 302
National City, CA 91950

Nataly Kalbakji, OD

Provider ID: N/A
655 Euclid Ave Ste 302
National City, CA 91950

Judy Hamouie, OD

Provider ID: N/A
655 Euclid Ave Ste 302
National City, CA 91950

Henry L. Hudson, MD

Provider ID: N/A
655 Euclid Ave Ste 302
National City, CA 91950

Sylvia Tillman, OD

Provider ID: N/A
655 Euclid Ave Ste 302
National City, CA 91950

Daniela Baumann, OD

Provider ID: N/A
655 Euclid Ave Ste 302
National City, CA 91950

Stephanie Asis, OD

Provider ID: N/A
655 Euclid Ave Ste 302
National City, CA 91950

Moena Dean, OD

Provider ID: N/A
655 Euclid Ave Ste 302
National City, CA 91950

Bhumika Pandya, OD

Provider ID: N/A
655 Euclid Ave Ste 302
National City, CA 91950

Henry V. Tran, OD

Provider ID: N/A
2240 E Plaza Blvd Ste Fg
National City, CA 91950

Vady Khalil, OD

Provider ID: N/A
655 Euclid Ave Ste 302
National City, CA 91950

Tina Khieu, OD

Provider ID: N/A
655 Euclid Ave Ste 302
National City, CA 91950

Jeffrey I. Scott, OD

Provider ID: N/A
655 Euclid Ave Ste 302
National City, CA 91950

Marineh Baghoumian, OD

Provider ID: N/A
655 Euclid Ave Ste 302
National City, CA 91950

Janice Hung, OD

Provider ID: N/A
655 Euclid Ave Ste 302
National City, CA 91950

Mary Vivirito, OD

Provider ID: N/A
655 Euclid Ave Ste 302
National City, CA 91950

Noorina Zaidi, OD

Provider ID: N/A
655 Euclid Ave Ste 302
National City, CA 91950

Beverly Tu, OD

Provider ID: N/A
655 Euclid Ave Ste 302
National City, CA 91950

Judy Hamouie, OD

Provider ID: N/A
2240 E Plaza Blvd Ste Fg
National City, CA 91950

Melissa M. Willey, OD

Provider ID: N/A
2240 E Plaza Blvd Ste Fg
National City, CA 91950

Wesley S. Chew, OD

Provider ID: N/A
2240 E Plaza Blvd Ste Fg
National City, CA 91950

Marineh Baghoumian, OD

Provider ID: N/A
2240 E Plaza Blvd Ste Fg
National City, CA 91950

Kim N. Aoto, OD

Provider ID: N/A
2240 E Plaza Blvd Ste Fg
National City, CA 91950

Sharon A. Wong, OD

Provider ID: N/A
2240 E Plaza Blvd Ste Fg
National City, CA 91950

Gitane Patel, MD

Provider ID: N/A
2240 E Plaza Blvd Ste Fg
National City, CA 91950

Heidrun Gollogly, MD

Provider ID: N/A
655 Euclid Ave Ste 302
National City, CA 91950

Christopher Hsu, MD

Provider ID: N/A
2240 E Plaza Blvd Ste Fg
National City, CA 91950

Stephen Lum, OD

Provider ID: N/A
1200 Highland Ave
National City, CA 91950

Laila Brown-aijala, OD

Provider ID: N/A
1481 E Plaza Blvd
National City, CA 91950

Donald R. Zvanut, OD

Provider ID: N/A
2240 E Plaza Blvd Ste Fg
National City, CA 91950

Sarjan H. Patel, MD

Provider ID: N/A
2240 E Plaza Blvd Ste Fg
National City, CA 91950

Murtaza Merali, OD

Provider ID: N/A
2240 E Plaza Blvd Ste Fg
National City, CA 91950

Sujata P. Prabhu, MD

Provider ID: N/A
2240 E Plaza Blvd Ste Fg
National City, CA 91950

Anh T. Tonnu, OD

Provider ID: N/A
2240 E Plaza Blvd Ste Fg
National City, CA 91950

Thy T. Nguyen, OD

Provider ID: N/A
2240 E Plaza Blvd Ste Fg
National City, CA 91950

Barry Katzman, MD

Provider ID: N/A
2240 E Plaza Blvd Ste Fg
National City, CA 91950

Raymundo G. Mendoza, OD

Provider ID: N/A
2403 E Plaza Blvd
National City, CA 91950

Theresa Nguyen, OD

Provider ID: N/A
1481 E Plaza Blvd
National City, CA 91950

Elias Toubia, OD

Provider ID: N/A
1481 E Plaza Blvd
National City, CA 91950

Stephanie Asis, OD

Provider ID: N/A
2240 E Plaza Blvd Ste Fg
National City, CA 91950

Joseph Mcgraw, MD

Provider ID: N/A
2240 E Plaza Blvd Ste Fg
National City, CA 91950

Alexander Chen, MD

Provider ID: N/A
2240 E Plaza Blvd Ste Fg
National City, CA 91950

Sylvia Tillman, OD

Provider ID: N/A
2240 E Plaza Blvd Ste Fg
National City, CA 91950

Mary Vivirito, OD

Provider ID: N/A
2240 E Plaza Blvd Ste Fg
National City, CA 91950

Moena Dean, OD

Provider ID: N/A
2240 E Plaza Blvd Ste Fg
National City, CA 91950

Phuc Quach, OD

Provider ID: N/A
2240 E Plaza Blvd Ste Fg
National City, CA 91950

Daniela Baumann, OD

Provider ID: N/A
2240 E Plaza Blvd Ste Fg
National City, CA 91950

Beverly Tu, OD

Provider ID: N/A
2240 E Plaza Blvd Ste Fg
National City, CA 91950

Sulki Han, OD

Provider ID: N/A
2240 E Plaza Blvd Ste Fg
National City, CA 91950

Nancy Tsui, OD

Provider ID: N/A
2240 E Plaza Blvd Ste Fg
National City, CA 91950

John B. Vinh, OD

Provider ID: N/A
2240 E Plaza Blvd Ste Fg
National City, CA 91950

My Linh Ton-nu, OD

Provider ID: N/A
2240 E Plaza Blvd Ste Fg
National City, CA 91950

Janice Hung, OD

Provider ID: N/A
2240 E Plaza Blvd Ste Fg
National City, CA 91950

Noorina Zaidi, OD

Provider ID: N/A
2240 E Plaza Blvd Ste Fg
National City, CA 91950

Jeffrey I. Scott, OD

Provider ID: N/A
2240 E Plaza Blvd Ste Fg
National City, CA 91950

Joshua Morrison Reyes, MD

Provider ID: N/A
2240 E Plaza Blvd Ste Fg
National City, CA 91950

Sharon M. Dyer, OD

Provider ID: N/A
2240 E Plaza Blvd Ste Fg
National City, CA 91950

Nicholas Binder, MD

Provider ID: N/A
2240 E Plaza Blvd Ste Fg
National City, CA 91950

Bhumika Pandya, OD

Provider ID: N/A
2240 E Plaza Blvd Ste Fg
National City, CA 91950

Robert B. Pendleton, MD

Provider ID: N/A
3637 Vista Way
Oceanside, CA 92056

Walmart Optical, NA

Provider ID: N/A
3405 Marron Rd
Oceanside, CA 92056

Adam Rosa, OD

Provider ID: N/A
3915 Mission Ave Ste 2
Oceanside, CA 92058

Sarah C. Kasai, OD

Provider ID: N/A
3915 Mission Ave Ste 2
Oceanside, CA 92058

Michael C. Morgan, OD

Provider ID: N/A
2110 S Coast Hwy Ste D
Oceanside, CA 92054

Kevin Guck, OD

Provider ID: N/A
3621 Vista Way
Oceanside, CA 92056

Ramin Tayani, MD

Provider ID: N/A
3621 Vista Way
Oceanside, CA 92056

Peter J. Josen, MD

Provider ID: N/A
3621 Vista Way
Oceanside, CA 92056

Donald E. Percy, OD

Provider ID: N/A
4065 Oceanside Blvd Ste C
Oceanside, CA 92056

Stephanie L. Mulick, OD

Provider ID: N/A
3621 Vista Way
Oceanside, CA 92056

Ioana M. Swikard, OD

Provider ID: N/A
15706 Pomerado Rd Ste 103
Poway, CA 92064

Rachel Niskanen, OD

Provider ID: N/A
3915 Mission Ave Ste 2
Oceanside, CA 92058

Walmart Optical 2245, NA

Provider ID: N/A
705 College Blvd
Oceanside, CA 92057

Patty L. Cheng, OD

Provider ID: N/A
3405 Marron Rd
Oceanside, CA 92056

Walmart Walmart Optical 2494, NA

Provider ID: N/A
2100 Vista Way
Oceanside, CA 92054

Farzaneh Moin, OD

Provider ID: N/A
3621 Vista Way
Oceanside, CA 92056

Robert A. Ring, OD

Provider ID: N/A
3621 Vista Way
Oceanside, CA 92056

Caroline Tran, OD

Provider ID: N/A
4065 Oceanside Blvd Ste C
Oceanside, CA 92056

Ashley K. Butler, OD

Provider ID: N/A
3637 Vista Way
Oceanside, CA 92056

Afsaneh Amini, OD

Provider ID: N/A
15706 Pomerado Rd Ste 103
Poway, CA 92064

Yanina Repkin, OD

Provider ID: N/A
13425 Community Rd
Poway, CA 92064

Walmart Optical, NA

Provider ID: N/A
13425 Community Rd
Poway, CA 92064

Matthew Q. La, OD

Provider ID: N/A
12155 Tech Center Dr
Poway, CA 92064

Michelle Rosenblatt, OD

Provider ID: N/A
15706 Pomerado Rd Ste 103
Poway, CA 92064

Marianna Samuels, OD

Provider ID: N/A
15706 Pomerado Rd Ste 103
Poway, CA 92064

Lillian C. Lee, MD

Provider ID: N/A
15706 Pomerado Rd Ste 103
Poway, CA 92064

Mary M. King, OD

Provider ID: N/A
14757 Pomerado Rd
Poway, CA 92064

Nghi U. Duong, OD

Provider ID: N/A
14757 Pomerado Rd
Poway, CA 92064

Susan D. Homesley, OD

Provider ID: N/A
1516 Main St Ste 102
Ramona, CA 92065

Yvette Diaz, OD

Provider ID: N/A
1662 Main St Ste B
Ramona, CA 92065

Tina Khieu, OD

Provider ID: N/A
4344 Convoy St Ste C2
San Diego, CA 92111

Costco Warehouse 0775, NA

Provider ID: N/A
12155 Tech Center Dr
Poway, CA 92064

David I. Bloomberg, OD

Provider ID: N/A
13035 Pomerado Rd Ste C
Poway, CA 92064

Robert C. Rosa, OD

Provider ID: N/A
13035 Pomerado Rd Ste C
Poway, CA 92064

Lorne D. Kapner, MD

Provider ID: N/A
15706 Pomerado Rd Ste 103
Poway, CA 92064

Karen Chisholm, OD

Provider ID: N/A
14757 Pomerado Rd
Poway, CA 92064

Robert M. Howard, OD

Provider ID: N/A
14757 Pomerado Rd
Poway, CA 92064

Diane L. Yang, OD

Provider ID: N/A
13373 Poway Rd
Poway, CA 92064

Susan Truong Cervantes, OD

Provider ID: N/A
1662 Main St Ste B
Ramona, CA 92065

Lisa M. Weiss, OD

Provider ID: N/A
6037 La Granada Ste A
Rancho Santa Fe, CA 92067

Michael Tran, OD

Provider ID: N/A
4822 Newport Ave
San Diego, CA 92107

Eli Ben Moshe, OD

Provider ID: N/A
4822 Newport Ave
San Diego, CA 92107

Brian Chou, OD

Provider ID: N/A
2020 Camino Del Rio N Ste 109
San Diego, CA 92108

Gary G. Schwab, OD

Provider ID: N/A
4290 Polk Ave
San Diego, CA 92105

Neeta Varshney, MD

Provider ID: N/A
5550 Carmel Mtn Rd Ste 206
San Diego, CA 92130

Victoria V. Vuong Nguyen, OD

Provider ID: N/A
5550 Carmel Mtn Rd Ste 206
San Diego, CA 92130

Tailun Zhao, MD

Provider ID: N/A
4344 Convoy St Ste C2
San Diego, CA 92111

Preeti Bansal, MD

Provider ID: N/A
7910 Frost St Ste 200
San Diego, CA 92123

Kim S. Duong, OD

Provider ID: N/A
7910 Frost St Ste 200
San Diego, CA 92123

Bhumika Pandya, OD

Provider ID: N/A
4344 Convoy St Ste C2
San Diego, CA 92111

Sylvia Tillman, OD

Provider ID: N/A
4344 Convoy St Ste C2
San Diego, CA 92111

Christopher Johnson, OD

Provider ID: N/A
4822 Newport Ave
San Diego, CA 92107

Gregory G. Hom, OD

Provider ID: N/A
11230 Sorrento Vly Rd Ste 145
San Diego, CA 92121

Connor Caldwell, OD

Provider ID: N/A
5550 Carmel Mtn Rd Ste 206
San Diego, CA 92130

Jared C. Hagan, OD

Provider ID: N/A
4822 Newport Ave
San Diego, CA 92107

Michelle B. Crosby, MD

Provider ID: N/A
5550 Carmel Mtn Rd Ste 206
San Diego, CA 92130

Ryan Marr, OD

Provider ID: N/A
4344 Convoy St Ste C2
San Diego, CA 92111

Nataly Kalbakji, OD

Provider ID: N/A
4344 Convoy St Ste C2
San Diego, CA 92111

Judy Hamouie, OD

Provider ID: N/A
4344 Convoy St Ste C2
San Diego, CA 92111

My Linh Ton-nu, OD

Provider ID: N/A
4344 Convoy St Ste C2
San Diego, CA 92111

Vady Khalil, OD

Provider ID: N/A
4344 Convoy St Ste C2
San Diego, CA 92111

Megha Pansara, MD

Provider ID: N/A
7910 Frost St Ste 200
San Diego, CA 92123

Thu K. Nguyen, OD

Provider ID: N/A
9516 Miramar Rd
San Diego, CA 92126

Mikala Herr, OD

Provider ID: N/A
1555 Palm Ave Ste A2
San Diego, CA 92154

Charles Tu, OD

Provider ID: N/A
1555 Palm Ave Ste A2
San Diego, CA 92154

May C. Tam, OD

Provider ID: N/A
1555 Palm Ave Ste A2
San Diego, CA 92154

Henry C. Lin, OD

Provider ID: N/A
1555 Palm Ave Ste A2
San Diego, CA 92154

Emily S. Sandoc, OD

Provider ID: N/A
1555 Palm Ave Ste A2
San Diego, CA 92154

Alexander Tran, OD

Provider ID: N/A
7910 Frost St Ste 200
San Diego, CA 92123

Mansoor Movaghar, MD

Provider ID: N/A
7910 Frost St Ste 200
San Diego, CA 92123

Nancy Tsui, OD

Provider ID: N/A
4344 Convoy St Ste C2
San Diego, CA 92111

Karen T. Barbadillo, OD

Provider ID: N/A
12895 Paseo Village Way # 1220
San Diego, CA 92130

Fabian I. Luna, OD

Provider ID: N/A
9855 Erma Rd Ste 130
San Diego, CA 92131

Stephanie Cao, OD

Provider ID: N/A
1555 Palm Ave Ste A2
San Diego, CA 92154

Walter R. Thomas, OD

Provider ID: N/A
1555 Palm Ave Ste A2
San Diego, CA 92154

Kevin R. Solis, OD

Provider ID: N/A
1555 Palm Ave Ste A2
San Diego, CA 92154

Amanda E. Beaudry, OD

Provider ID: N/A
7910 Frost St Ste 200
San Diego, CA 92123

Amanda Klaren, OD

Provider ID: N/A
7910 Frost St Ste 200
San Diego, CA 92123

Shagun Bhatia, MD

Provider ID: N/A
7910 Frost St Ste 200
San Diego, CA 92123

Jamie L. Bergmark, OD

Provider ID: N/A
7910 Frost St Ste 200
San Diego, CA 92123

Jason Lee, OD

Provider ID: N/A
7910 Frost St Ste 200
San Diego, CA 92123

Janice Hung, OD

Provider ID: N/A
4344 Convoy St Ste C2
San Diego, CA 92111

Henry O Halloran, MD

Provider ID: N/A
7910 Frost St Ste 200
San Diego, CA 92123

Kuen Chine Lau, OD

Provider ID: N/A
1555 Palm Ave Ste A2
San Diego, CA 92154

Joseph McGraw, MD

Provider ID: N/A
4344 Convoy St Ste C2
San Diego, CA 92111

Christopher Hsu, MD

Provider ID: N/A
4344 Convoy St Ste C2
San Diego, CA 92111

Vady Khalil, OD

Provider ID: N/A
6945 El Cajon Blvd
San Diego, CA 92115

Beverly Tu, OD

Provider ID: N/A
6945 El Cajon Blvd
San Diego, CA 92115

Judy Hamouie, OD

Provider ID: N/A
6945 El Cajon Blvd
San Diego, CA 92115

Henry L. Hudson, MD

Provider ID: N/A
6945 El Cajon Blvd
San Diego, CA 92115

Sylvia Tillman, OD

Provider ID: N/A
6945 El Cajon Blvd
San Diego, CA 92115

Mona N. Adams, OD

Provider ID: N/A
7910 Frost St Ste 200
San Diego, CA 92123

Angela Moll, MD

Provider ID: N/A
7910 Frost St Ste 200
San Diego, CA 92123

My Linh Ton-nu, OD

Provider ID: N/A
6945 El Cajon Blvd
San Diego, CA 92115

Barry Katzman, MD

Provider ID: N/A
4344 Convoy St Ste C2
San Diego, CA 92111

Ryan Marr, OD

Provider ID: N/A
6945 El Cajon Blvd
San Diego, CA 92115

Nataly Kalbakji, OD

Provider ID: N/A
6945 El Cajon Blvd
San Diego, CA 92115

Tina Khieu, OD

Provider ID: N/A
6945 El Cajon Blvd
San Diego, CA 92115

Moena Dean, OD

Provider ID: N/A
4344 Convoy St Ste C2
San Diego, CA 92111

Anh T. Tonnu, OD

Provider ID: N/A
4344 Convoy St Ste C2
San Diego, CA 92111

Janice Hung, OD

Provider ID: N/A
6945 El Cajon Blvd
San Diego, CA 92115

Daniela Baumann, OD

Provider ID: N/A
6945 El Cajon Blvd
San Diego, CA 92115

Stephanie Asis, OD

Provider ID: N/A
6945 El Cajon Blvd
San Diego, CA 92115

Moena Dean, OD

Provider ID: N/A
6945 El Cajon Blvd
San Diego, CA 92115

Michelle V. Fitzpatrick, OD

Provider ID: N/A
12895 Paseo Village Way # 1220
San Diego, CA 92130

Sharon A. Wong, OD

Provider ID: N/A
4344 Convoy St Ste C2
San Diego, CA 92111

Stephanie Asis, OD

Provider ID: N/A
4344 Convoy St Ste C2
San Diego, CA 92111

Beverly Tu, OD

Provider ID: N/A
4344 Convoy St Ste C2
San Diego, CA 92111

Nicholas Binder, MD

Provider ID: N/A
4344 Convoy St Ste C2
San Diego, CA 92111

Sharon M. Dyer, OD

Provider ID: N/A
4344 Convoy St Ste C2
San Diego, CA 92111

Thy T. Nguyen, OD

Provider ID: N/A
4344 Convoy St Ste C2
San Diego, CA 92111

Mary Vivirito, OD

Provider ID: N/A
6945 El Cajon Blvd
San Diego, CA 92115

Noorina Zaidi, OD

Provider ID: N/A
6945 El Cajon Blvd
San Diego, CA 92115

Lianne T. Mizoguchi, OD

Provider ID: N/A
16950 Via Tazon
San Diego, CA 92127

Bhumika Pandya, OD

Provider ID: N/A
6945 El Cajon Blvd
San Diego, CA 92115

Mary Vivirito, OD

Provider ID: N/A
4344 Convoy St Ste C2
San Diego, CA 92111

Noorina Zaidi, OD

Provider ID: N/A
4344 Convoy St Ste C2
San Diego, CA 92111

Sulki Han, OD

Provider ID: N/A
4344 Convoy St Ste C2
San Diego, CA 92111

Jeffrey I. Scott, OD

Provider ID: N/A
4344 Convoy St Ste C2
San Diego, CA 92111

Joshua Morrison Reyes, MD

Provider ID: N/A
4344 Convoy St Ste C2
San Diego, CA 92111

John B. Vinh, OD

Provider ID: N/A
4344 Convoy St Ste C2
San Diego, CA 92111

Gitane Patel, MD

Provider ID: N/A
4344 Convoy St Ste C2
San Diego, CA 92111

Melissa M. Willey, OD

Provider ID: N/A
4344 Convoy St Ste C2
San Diego, CA 92111

Sarjan H. Patel, MD

Provider ID: N/A
4344 Convoy St Ste C2
San Diego, CA 92111

Murtaza Merali, OD

Provider ID: N/A
4344 Convoy St Ste C2
San Diego, CA 92111

Sujata P. Prabhu, MD

Provider ID: N/A
4344 Convoy St Ste C2
San Diego, CA 92111

Daniela Baumann, OD

Provider ID: N/A
4344 Convoy St Ste C2
San Diego, CA 92111

Nancy Tsui, OD

Provider ID: N/A
6945 El Cajon Blvd
San Diego, CA 92115

Dana J. Huth, OD

Provider ID: N/A
402 W Broadway Ste 100
San Diego, CA 92101

Caitlin Jomoc, OD

Provider ID: N/A
16950 Via Tazon
San Diego, CA 92127

Carol Yu, OD

Provider ID: N/A
16950 Via Tazon
San Diego, CA 92127

Henry V. Tran, OD

Provider ID: N/A
4344 Convoy St Ste C2
San Diego, CA 92111

Wesley S. Chew, OD

Provider ID: N/A
4344 Convoy St Ste C2
San Diego, CA 92111

Marineh Baghoumian, OD

Provider ID: N/A
4344 Convoy St Ste C2
San Diego, CA 92111

Kim N. Aoto, OD

Provider ID: N/A
4344 Convoy St Ste C2
San Diego, CA 92111

Donald R. Zvanut, OD

Provider ID: N/A
4344 Convoy St Ste C2
San Diego, CA 92111

Phuc Quach, OD

Provider ID: N/A
4344 Convoy St Ste C2
San Diego, CA 92111

Amiee S. Ho, OD

Provider ID: N/A
4060 4th Ave Ste 610
San Diego, CA 92103

Tracy Moor, OD

Provider ID: N/A
16950 Via Tazon
San Diego, CA 92127

Andrew Minh Vo, OD

Provider ID: N/A
16950 Via Tazon
San Diego, CA 92127

Philip Kim, OD

Provider ID: N/A
16950 Via Tazon
San Diego, CA 92127

Amiee S. Ho, OD

Provider ID: N/A
16950 Via Tazon
San Diego, CA 92127

Edward K. Harver, OD

Provider ID: N/A
3412 College Ave
San Diego, CA 92115

Videne Sath, OD

Provider ID: N/A
3412 College Ave
San Diego, CA 92115

Anne B. Lam, OD

Provider ID: N/A
16950 Via Tazon
San Diego, CA 92127

Hoang Ho, OD

Provider ID: N/A
10737 Camino Ruiz Ste 220
San Diego, CA 92126

Tracy Moor, OD

Provider ID: N/A
4060 4th Ave Ste 610
San Diego, CA 92103

Andrew Minh Vo, OD

Provider ID: N/A
4060 4th Ave Ste 610
San Diego, CA 92103

Lara Hustana, OD

Provider ID: N/A
16950 Via Tazon
San Diego, CA 92127

Simona Grosu, OD

Provider ID: N/A
8010 Frost St Ste 510
San Diego, CA 92123

Sara Julazadeh, OD

Provider ID: N/A
3939 3rd Ave
San Diego, CA 92103

Esmeralda C. Mcclean, OD

Provider ID: N/A
16950 Via Tazon
San Diego, CA 92127

John F. Kulischak, OD

Provider ID: N/A
16950 Via Tazon
San Diego, CA 92127

Pamela A. Hoo, OD

Provider ID: N/A
16950 Via Tazon
San Diego, CA 92127

Pei Chi Chain, OD

Provider ID: N/A
7835 Highlands Vlg Pl D 106
San Diego, CA 92129

Janet M. Beack, OD

Provider ID: N/A
7420 Clairemont Mesa Blvd # 10
San Diego, CA 92111

Caitlin Jomoc, OD

Provider ID: N/A
4060 4th Ave Ste 610
San Diego, CA 92103

Carol Yu, OD

Provider ID: N/A
4060 4th Ave Ste 610
San Diego, CA 92103

Donald R. Zvanut, OD

Provider ID: N/A
6945 El Cajon Blvd
San Diego, CA 92115

Philip M. Taunton, OD

Provider ID: N/A
3939 3rd Ave
San Diego, CA 92103

Steven Giang, OD

Provider ID: N/A
3145 Rosecrans St Ste C
San Diego, CA 92110

Ashley Tang, OD

Provider ID: N/A
3145 Rosecrans St Ste C
San Diego, CA 92110

Maggie Nguyen, OD

Provider ID: N/A
12350 Carmel Mountain Rd
San Diego, CA 92128

Courtney Cape, OD

Provider ID: N/A
8010 Frost St Ste 510
San Diego, CA 92123

Bruce C. Nguyen, OD

Provider ID: N/A
10715 Tierrasanta Blvd Ste F
San Diego, CA 92124

Esmeralda C. McClean, OD

Provider ID: N/A
4060 4th Ave Ste 610
San Diego, CA 92103

Ellie E. Samadani, MD

Provider ID: N/A
8010 Frost St Ste 510
San Diego, CA 92123

Kelvin H. Nguyen, OD

Provider ID: N/A
3807 Fairmount Ave Ste 200
San Diego, CA 92105

Amanda Thai, OD

Provider ID: N/A
3788 Park Blvd Ste 5
San Diego, CA 92103

Gary A. Klein, OD

Provider ID: N/A
3788 Park Blvd Ste 5
San Diego, CA 92103

Edward K. Harver, OD

Provider ID: N/A
3382 Murphy Canyon Rd
San Diego, CA 92123

Michael S. Matthews, OD

Provider ID: N/A
3145 Rosecrans St Ste C
San Diego, CA 92110

Hoang Ho, OD

Provider ID: N/A
710 Dennery Rd
San Diego, CA 92154

Ananya Jalsingh, OD

Provider ID: N/A
8010 Frost St Ste 510
San Diego, CA 92123

Angelique Jessica Pillar Topaloglu, MD

Provider ID: N/A
8010 Frost St Ste 510
San Diego, CA 92123

Shiloh Simons, DO

Provider ID: N/A
8010 Frost St Ste 510
San Diego, CA 92123

Bruce C. Nguyen, OD

Provider ID: N/A
3807 Fairmount Ave Ste 200
San Diego, CA 92105

Ananya Jalsingh, OD

Provider ID: N/A
3788 Park Blvd Ste 5
San Diego, CA 92103

Wilson Phu, OD

Provider ID: N/A
3788 Park Blvd Ste 5
San Diego, CA 92103

Mary L. Howard, OD

Provider ID: N/A
3382 Murphy Canyon Rd
San Diego, CA 92123

Aileen Jacob, OD

Provider ID: N/A
8010 Frost St Ste 510
San Diego, CA 92123

Eng Ann Sung, OD

Provider ID: N/A
10549 Scripps Poway Pkwy Ste G
San Diego, CA 92131

Melanie Langford, OD

Provider ID: N/A
4310 Genesee Ave Ste 101
San Diego, CA 92117

Andrea Russo, OD

Provider ID: N/A
3830 Valley Centre Dr Ste 703
San Diego, CA 92130

Jason D. Tu, OD

Provider ID: N/A
3830 Valley Centre Dr Ste 703
San Diego, CA 92130

Fahad Khan, MD

Provider ID: N/A
233 Lewis St
San Diego, CA 92103

Kim E. Admire, OD

Provider ID: N/A
12853 El Camino Real Ste 103
San Diego, CA 92130

Afsaneh Amini, OD

Provider ID: N/A
12853 El Camino Real Ste 103
San Diego, CA 92130

Jay M. Mashouf, OD

Provider ID: N/A
10549 Scripps Poway Pkwy Ste G
San Diego, CA 92131

Wilson Phu, OD

Provider ID: N/A
3345 Rosecrans St Ste B
San Diego, CA 92110

Sheiva L. Pousti, OD

Provider ID: N/A
3560 Fairmount Ave Ste A
San Diego, CA 92105

Philip Kim, OD

Provider ID: N/A
4060 4th Ave Ste 610
San Diego, CA 92103

Matthew S. Langford, OD

Provider ID: N/A
4310 Genesee Ave Ste 101
San Diego, CA 92117

Michael C. Morgan, OD

Provider ID: N/A
3830 Valley Centre Dr Ste 703
San Diego, CA 92130

Michael A. Kling, OD

Provider ID: N/A
3830 Valley Centre Dr Ste 703
San Diego, CA 92130

Pearle Vision, NA

Provider ID: N/A
2017 Navy Air Station N Island
San Diego, CA 92135

Cindy Q. Than, OD

Provider ID: N/A
2017 Navy Air Station N Island
San Diego, CA 92135

Keith M. Wan, OD

Provider ID: N/A
10549 Scripps Poway Pkwy Ste G
San Diego, CA 92131

Pearle Vision, NA

Provider ID: N/A
3345 Rosecrans St Ste B
San Diego, CA 92110

Kathryn Recker, OD

Provider ID: N/A
655 Saturn Blvd Ste H
San Diego, CA 92154

Julia Richardson, OD

Provider ID: N/A
9460 Mira Mesa Blvd Ste A
San Diego, CA 92126

Pei Chi Chain, OD

Provider ID: N/A
9460 Mira Mesa Blvd Ste A
San Diego, CA 92126

Allen Chung, OD

Provider ID: N/A
9460 Mira Mesa Blvd Ste A
San Diego, CA 92126

Steven G. Peterson, OD

Provider ID: N/A
3737 Moraga Ave Ste A105
San Diego, CA 92117

John F. Kulischak, OD

Provider ID: N/A
4060 4th Ave Ste 610
San Diego, CA 92103

Pamela A. Hoo, OD

Provider ID: N/A
4060 4th Ave Ste 610
San Diego, CA 92103

Kevin Hoang, OD

Provider ID: N/A
4840 Shawline St
San Diego, CA 92111

Carl A. Boeck, OD

Provider ID: N/A
7246 Clairemont Mesa Blvd
San Diego, CA 92111

Gary Sneag, OD

Provider ID: N/A
4310 Genesee Ave Ste 101
San Diego, CA 92117

Leslie Pham, OD

Provider ID: N/A
9460 Mira Mesa Blvd Ste A
San Diego, CA 92126

Kelly S. Keefe, MD

Provider ID: N/A
3969 4th Ave Ste 301
San Diego, CA 92103

Ashley Tang, OD

Provider ID: N/A
9460 Mira Mesa Blvd Ste A
San Diego, CA 92126

Cindy Q. Than, OD

Provider ID: N/A
2017 Navy Air Station N Island
San Diego, CA 92135

Lianne T. Mizoguchi, OD

Provider ID: N/A
4060 4th Ave Ste 610
San Diego, CA 92103

Lara Hustana, OD

Provider ID: N/A
4060 4th Ave Ste 610
San Diego, CA 92103

Anne B. Lam, OD

Provider ID: N/A
4060 4th Ave Ste 610
San Diego, CA 92103

Marc Van Hoose, OD

Provider ID: N/A
7246 Clairemont Mesa Blvd
San Diego, CA 92111

Archie Ackroyd, OD

Provider ID: N/A
7246 Clairemont Mesa Blvd
San Diego, CA 92111

Ellie E. Samadani, MD

Provider ID: N/A
3737 Moraga Ave Ste A105
San Diego, CA 92117

Steven Giang, OD

Provider ID: N/A
3969 4th Ave Ste 301
San Diego, CA 92103

Suzanne P. Handler, MD

Provider ID: N/A
3969 4th Ave Ste 301
San Diego, CA 92103

Michael T. Couris, MD

Provider ID: N/A
3969 4th Ave Ste 301
San Diego, CA 92103

Mini P. Ta, OD

Provider ID: N/A
4240 Kearny Mesa Rd Ste 101
San Diego, CA 92111

Nghi U. Duong, OD

Provider ID: N/A
4240 Kearny Mesa Rd Ste 101
San Diego, CA 92111

Catherine F. Soriano, OD

Provider ID: N/A
2404 Madison Ave
San Diego, CA 92116

Puneh Baha, OD

Provider ID: N/A
9975 Carmel Mountain Rd Ste G6
San Diego, CA 92129

Walmart Optical, NA

Provider ID: N/A
4840 Shawline St
San Diego, CA 92111

Khoa D. Truong, OD

Provider ID: N/A
6336 College Grove Way
San Diego, CA 92115

Michael T. Couris, MD

Provider ID: N/A
3969 4th Ave Ste 301
San Diego, CA 92103

Sarah C. Kasai, OD

Provider ID: N/A
9975 Carmel Mountain Rd Ste G6
San Diego, CA 92129

Costco Warehouse 0483, NA

Provider ID: N/A
650 Gateway Center Dr
San Diego, CA 92102

Amanda Thai, OD

Provider ID: N/A
4240 Kearny Mesa Rd Ste 101
San Diego, CA 92111

Michael D. Tran, OD

Provider ID: N/A
4240 Kearny Mesa Rd Ste 101
San Diego, CA 92111

Jason Moss, MD

Provider ID: N/A
5555 Reservoir Dr Ste 201
San Diego, CA 92120

Angelique Jessica Pillar Topaloglu, MD

Provider ID: N/A
3737 Moraga Ave Ste A105
San Diego, CA 92117

Sams Optical, NA

Provider ID: N/A
6336 College Grove Way
San Diego, CA 92115

Richard N V Phung, OD

Provider ID: N/A
9880 Hibert St Ste E1
San Diego, CA 92131

Steven R. Larsen, OD

Provider ID: N/A
4096 Park Blvd
San Diego, CA 92103

Shelby Esambolchi, OD

Provider ID: N/A
9975 Carmel Mountain Rd Ste G6
San Diego, CA 92129

Angela C. Wernow, OD

Provider ID: N/A
9975 Carmel Mountain Rd Ste G6
San Diego, CA 92129

Michelle A. Gan, OD

Provider ID: N/A
9975 Carmel Mountain Rd Ste G6
San Diego, CA 92129

Kuen Chine Lau, OD

Provider ID: N/A
5638 Mission Center Rd Ste 103
San Diego, CA 92108

Dorothy Z. Wang, OD

Provider ID: N/A
13350 Camino Del Sur Ste 8
San Diego, CA 92129

Steven Hoffman, OD

Provider ID: N/A
8312 Lake Murray Blvd Ste C
San Diego, CA 92119

Robert M. Gonzalez, OD

Provider ID: N/A
8312 Lake Murray Blvd Ste C
San Diego, CA 92119

Kristine T. Pham, OD

Provider ID: N/A
1890 Garnet Ave
San Diego, CA 92109

Robert M. Howard, OD

Provider ID: N/A
9975 Carmel Mountain Rd Ste G6
San Diego, CA 92129

Costco Warehouse 0401, NA

Provider ID: N/A
4605 Morena Blvd
San Diego, CA 92117

Costco Warehouse 0452, NA

Provider ID: N/A
12350 Carmel Mountain Rd
San Diego, CA 92128

Elizabeth A. Kolodzey, OD

Provider ID: N/A
2850 Womble Rd Ste 106
San Diego, CA 92106

Rosina M. Cullins, OD

Provider ID: N/A
5175 Waring Rd
San Diego, CA 92120

Tri D. Phan, OD

Provider ID: N/A
1246 University Ave
San Diego, CA 92103

Justine Blumenstock, OD

Provider ID: N/A
8312 Lake Murray Blvd Ste C
San Diego, CA 92119

Steven Giang, OD

Provider ID: N/A
8312 Lake Murray Blvd Ste C
San Diego, CA 92119

Yosuke Yonemasu, OD

Provider ID: N/A
1890 Garnet Ave
San Diego, CA 92109

Sulki Han, OD

Provider ID: N/A
6945 El Cajon Blvd
San Diego, CA 92115

Henry C. Lin, OD

Provider ID: N/A
7007 Friars Rd Ste 351
San Diego, CA 92108

Costco Warehouse 0488, NA

Provider ID: N/A
2345 Fenton Pkwy
San Diego, CA 92108

Paul D. Huynh, MD

Provider ID: N/A
4844 University Ave Ste A
San Diego, CA 92105

Loan Huynh, OD

Provider ID: N/A
5175 Waring Rd
San Diego, CA 92120

Mikala Herr, OD

Provider ID: N/A
7007 Friars Rd Ste 351
San Diego, CA 92108

Stephanie Cao, OD

Provider ID: N/A
7007 Friars Rd Ste 351
San Diego, CA 92108

Kevin R. Solis, OD

Provider ID: N/A
7007 Friars Rd Ste 351
San Diego, CA 92108

Kuen Chine Lau, OD

Provider ID: N/A
7007 Friars Rd Ste 351
San Diego, CA 92108

Jade Davis, OD

Provider ID: N/A
7007 Friars Rd Ste 351
San Diego, CA 92108

Stephanie Cao, OD

Provider ID: N/A
5638 Mission Center Rd Ste 103
San Diego, CA 92108

May C. Tam, OD

Provider ID: N/A
5638 Mission Center Rd Ste 103
San Diego, CA 92108

Henry C. Lin, OD

Provider ID: N/A
5638 Mission Center Rd Ste 103
San Diego, CA 92108

Walter R. Thomas, OD

Provider ID: N/A
7007 Friars Rd Ste 351
San Diego, CA 92108

Keith M. Wan, OD

Provider ID: N/A
10531 4S Commons Dr Ste 168
San Diego, CA 92127

Dora Doan, OD

Provider ID: N/A
4060 Fairmount Ave
San Diego, CA 92105

Jade Davis, OD

Provider ID: N/A
5638 Mission Center Rd Ste 103
San Diego, CA 92108

Emily S. Sandoc, OD

Provider ID: N/A
5638 Mission Center Rd Ste 103
San Diego, CA 92108

Emily S. Sandoc, OD

Provider ID: N/A
7007 Friars Rd Ste 351
San Diego, CA 92108

Mikala Herr, OD

Provider ID: N/A
5638 Mission Center Rd Ste 103
San Diego, CA 92108

Walter R. Thomas, OD

Provider ID: N/A
5638 Mission Center Rd Ste 103
San Diego, CA 92108

Kevin R. Solis, OD

Provider ID: N/A
5638 Mission Center Rd Ste 103
San Diego, CA 92108

Natalie Li, OD

Provider ID: N/A
10531 4S Commons Dr Ste 168
San Diego, CA 92127

Lydia M. Torres, OD

Provider ID: N/A
10243 Genetic Center Dr
San Diego, CA 92121

Lori J. Bende, OD

Provider ID: N/A
9320 Carmel Mountain Rd Ste E
San Diego, CA 92129

Chau H. Trang, OD

Provider ID: N/A
6947 Linda Vista Rd Ste A
San Diego, CA 92111

Annie T. Chin, OD

Provider ID: N/A
3075 Health Center Dr Ste 401
San Diego, CA 92123

Ketan Bakriwala, OD

Provider ID: N/A
300 Fir St
San Diego, CA 92101

Grace Buenaventura, OD

Provider ID: N/A
300 Fir St
San Diego, CA 92101

Annie T. Chin, OD

Provider ID: N/A
10670 Wexford St
San Diego, CA 92131

Craig C. Liu, OD

Provider ID: N/A
10243 Genetic Center Dr
San Diego, CA 92121

Suzanne P. Handler, MD

Provider ID: N/A
3969 4th Ave Ste 301
San Diego, CA 92103

Loan Huynh, OD

Provider ID: N/A
11835 Carmel Mtn Rd Ste 1313
San Diego, CA 92128

Johnny T. Wu, OD

Provider ID: N/A
12070 Carmel Mtn Rd Ste 292
San Diego, CA 92128

Jean D. Yu, OD

Provider ID: N/A
8137 Mira Mesa Blvd
San Diego, CA 92126

Stephen Huang, OD

Provider ID: N/A
10670 Wexford St
San Diego, CA 92131

Krystal T. Vanichsarn, OD

Provider ID: N/A
300 Fir St
San Diego, CA 92101

Jane Goodwin, OD

Provider ID: N/A
300 Fir St
San Diego, CA 92101

Kevin M. Reeder, OD

Provider ID: N/A
9320 Carmel Mountain Rd Ste E
San Diego, CA 92129

Earl Sandler, OD

Provider ID: N/A
9320 Carmel Mountain Rd Ste E
San Diego, CA 92129

Lucinda Y. Li, OD

Provider ID: N/A
1018 Grand Ave
San Diego, CA 92109

Tony D. Pham, OD

Provider ID: N/A
6755 Mira Mesa Blvd Ste 141
San Diego, CA 92121

Mitchell S. Shulkin, OD

Provider ID: N/A
11835 Carmel Mtn Rd Ste 1313
San Diego, CA 92128

Denis T. Iwamoto, OD

Provider ID: N/A
9186 Mira Mesa Blvd
San Diego, CA 92126

Leslie L. Chen, OD

Provider ID: N/A
4475 University Ave
San Diego, CA 92105

Christy Chu Park, OD

Provider ID: N/A
1939 Grand Ave
San Diego, CA 92109

Tiffany C. Turner, OD

Provider ID: N/A
10531 4S Commons Dr Ste 168
San Diego, CA 92127

Justine Blumenstock, OD

Provider ID: N/A
1947 Fern St Ste 3
San Diego, CA 92102

Karen T. Barbadillo, OD

Provider ID: N/A
1947 Fern St Ste 3
San Diego, CA 92102

Long Dinh, OD

Provider ID: N/A
650 Gateway Center Dr
San Diego, CA 92102

Ruby L. Bello, OD

Provider ID: N/A
650 Gateway Center Dr
San Diego, CA 92102

David C. Park, OD

Provider ID: N/A
1939 Grand Ave
San Diego, CA 92109

Sylvia Tillman, OD

Provider ID: N/A
4029 43rd St Ste 300
San Diego, CA 92105

Steven Giang, OD

Provider ID: N/A
4029 43rd St Ste 300
San Diego, CA 92105

Trang T. Ta, OD

Provider ID: N/A
4029 43rd St Ste 300
San Diego, CA 92105

Jasmine P. Nguyen, OD

Provider ID: N/A
4029 43rd St Ste 300
San Diego, CA 92105

Andrew J. Fasciani, OD

Provider ID: N/A
10531 4S Commons Dr Ste 168
San Diego, CA 92127

Michelle V. Fitzpatrick, OD

Provider ID: N/A
1947 Fern St Ste 3
San Diego, CA 92102

Kelly S. Keefe, MD

Provider ID: N/A
3969 4th Ave Ste 301
San Diego, CA 92103

Sylvia Tillman, OD

Provider ID: N/A
650 Gateway Center Dr
San Diego, CA 92102

Barbara H. Bytomski, OD

Provider ID: N/A
9320 Carmel Mountain Rd Ste E
San Diego, CA 92129

Kim N. Aoto, OD

Provider ID: N/A
6945 El Cajon Blvd
San Diego, CA 92115

Steven Hoffman, OD

Provider ID: N/A
4029 43rd St Ste 300
San Diego, CA 92105

Kevin Hoang, OD

Provider ID: N/A
4029 43rd St Ste 300
San Diego, CA 92105

Thanh T. Nguyen, OD

Provider ID: N/A
4029 43rd St Ste 300
San Diego, CA 92105

Payman I. Khalighi, OD

Provider ID: N/A
4029 43rd St Ste 300
San Diego, CA 92105

Mark E. Warlen, MD

Provider ID: N/A
3720 3rd Ave
San Diego, CA 92103

Benjamin P. Llanes, OD

Provider ID: N/A
9580 Black Mountain Rd Ste J
San Diego, CA 92126

Andreea NastasoIU, OD

Provider ID: N/A
3068 University Ave
San Diego, CA 92104

Crizelda Lauron, OD

Provider ID: N/A
3068 University Ave
San Diego, CA 92104

Meredith G. Walton, OD

Provider ID: N/A
3068 University Ave
San Diego, CA 92104

Cheryl Duong, OD

Provider ID: N/A
16615 Dove Canyon Rd Ste 105
San Diego, CA 92127

Brooke A. Coleman, OD

Provider ID: N/A
16615 Dove Canyon Rd Ste 105
San Diego, CA 92127

Andreea NastasoIU, OD

Provider ID: N/A
3404 Adams Ave
San Diego, CA 92116

Crizelda Lauron, OD

Provider ID: N/A
3404 Adams Ave
San Diego, CA 92116

Michael S. Ventura, OD

Provider ID: N/A
16899 W Bernardo Dr
San Diego, CA 92127

Timothy M. Van Kirk, OD

Provider ID: N/A
3670 Clairemont Dr Ste 1
San Diego, CA 92117

Chantelle Davis, OD

Provider ID: N/A
3404 Adams Ave
San Diego, CA 92116

Chantelle Davis, OD

Provider ID: N/A
3068 University Ave
San Diego, CA 92104

Rachel J. Lee, OD

Provider ID: N/A
3068 University Ave
San Diego, CA 92104

Suneha Khinda, OD

Provider ID: N/A
16615 Dove Canyon Rd Ste 105
San Diego, CA 92127

Michael J. Cooper, OD

Provider ID: N/A
16615 Dove Canyon Rd Ste 105
San Diego, CA 92127

Rambod A. Esfandiari, OD

Provider ID: N/A
3895 Clairemont Dr Ste 101
San Diego, CA 92117

Isabel Val, OD

Provider ID: N/A
4605 Morena Blvd
San Diego, CA 92117

Rachel J. Lee, OD

Provider ID: N/A
3404 Adams Ave
San Diego, CA 92116

Nicholas Binder, MD

Provider ID: N/A
6945 El Cajon Blvd
San Diego, CA 92115

Stephen Huang, OD

Provider ID: N/A
16899 W Bernardo Dr
San Diego, CA 92127

Alexis Mccullough, OD

Provider ID: N/A
3895 Clairemont Dr Ste 101
San Diego, CA 92117

Vaishali Keswani, OD

Provider ID: N/A
3895 Clairemont Dr Ste 101
San Diego, CA 92117

Sarjan H. Patel, MD

Provider ID: N/A
6945 El Cajon Blvd
San Diego, CA 92115

Suzanne P. Lee, OD

Provider ID: N/A
11972 Bernardo Plaza Dr
San Diego, CA 92128

Sharon M. Dyer, OD

Provider ID: N/A
6945 El Cajon Blvd
San Diego, CA 92115

Phuc Quach, OD

Provider ID: N/A
6945 El Cajon Blvd
San Diego, CA 92115

Sharon A. Wong, OD

Provider ID: N/A
6945 El Cajon Blvd
San Diego, CA 92115

Andrew B. Romeril, OD

Provider ID: N/A
13173 Black Mountain Rd Ste 7
San Diego, CA 92129

Manel Lamouchi, OD

Provider ID: N/A
13173 Black Mountain Rd Ste 7
San Diego, CA 92129

Noam Nicholson, OD

Provider ID: N/A
3895 Clairemont Dr Ste 101
San Diego, CA 92117

Jordan Pinozek, OD

Provider ID: N/A
3895 Clairemont Dr Ste 101
San Diego, CA 92117

John D. Archibald, OD

Provider ID: N/A
16615 Dove Canyon Rd Ste 105
San Diego, CA 92127

Lucia E. Millet, OD

Provider ID: N/A
10531 4S Commons Dr Ste 168
San Diego, CA 92127

Jeffrey I. Scott, OD

Provider ID: N/A
6945 El Cajon Blvd
San Diego, CA 92115

Joshua Morrison Reyes, MD

Provider ID: N/A
6945 El Cajon Blvd
San Diego, CA 92115

John B. Vinh, OD

Provider ID: N/A
6945 El Cajon Blvd
San Diego, CA 92115

Henry V. Tran, OD

Provider ID: N/A
6945 El Cajon Blvd
San Diego, CA 92115

Wesley S. Chew, OD

Provider ID: N/A
6945 El Cajon Blvd
San Diego, CA 92115

Marineh Baghoumian, OD

Provider ID: N/A
6945 El Cajon Blvd
San Diego, CA 92115

Murtaza Merali, OD

Provider ID: N/A
6945 El Cajon Blvd
San Diego, CA 92115

Anh T. Tonnu, OD

Provider ID: N/A
6945 El Cajon Blvd
San Diego, CA 92115

Thy T. Nguyen, OD

Provider ID: N/A
6945 El Cajon Blvd
San Diego, CA 92115

Barry Katzman, MD

Provider ID: N/A
6945 El Cajon Blvd
San Diego, CA 92115

Charles W. Tornatore, OD

Provider ID: N/A
16899 W Bernardo Dr
San Diego, CA 92127

Kevin R. Solis, OD

Provider ID: N/A
5075 Ruffin Rd Ste B
San Diego, CA 92123

David Najafi, MD

Provider ID: N/A
4725 Market St
San Diego, CA 92102

Gary G. Schwab, OD

Provider ID: N/A
6973 Linda Vista Rd
San Diego, CA 92111

Thanh T. Nguyen, OD

Provider ID: N/A
12650 Sabre Spgs Pkwy Ste 203
San Diego, CA 92128

Mingjun Wang, OD

Provider ID: N/A
10066 Pacific Hts Blvd Ste 112
San Diego, CA 92121

Sujata P. Prabhu, MD

Provider ID: N/A
6945 El Cajon Blvd
San Diego, CA 92115

Gitane Patel, MD

Provider ID: N/A
6945 El Cajon Blvd
San Diego, CA 92115

Joseph McGraw, MD

Provider ID: N/A
6945 El Cajon Blvd
San Diego, CA 92115

Christopher Hsu, MD

Provider ID: N/A
6945 El Cajon Blvd
San Diego, CA 92115

Melissa M. Willey, OD

Provider ID: N/A
6945 El Cajon Blvd
San Diego, CA 92115

Nilam Bansal, OD

Provider ID: N/A
4725 Market St
San Diego, CA 92102

Luis A. Molina, OD

Provider ID: N/A
4725 Market St
San Diego, CA 92102

Jennifer Chinn, OD

Provider ID: N/A
2856 University Ave
San Diego, CA 92104

Meredith G. Walton, OD

Provider ID: N/A
3404 Adams Ave
San Diego, CA 92116

Michelle V. Fitzpatrick, OD

Provider ID: N/A
2355 India St
San Diego, CA 92101

Mashia Ghods, OD

Provider ID: N/A
4725 Market St
San Diego, CA 92102

Padma Nanduri, MD

Provider ID: N/A
5330 Carroll Canyon Rd Ste 210
San Diego, CA 92121

Maria Camila Molina Velandia, OD

Provider ID: N/A
1809 National Ave
San Diego, CA 92113

Elias Toubia, OD

Provider ID: N/A
1809 National Ave
San Diego, CA 92113

Mashia Ghods, OD

Provider ID: N/A
1809 National Ave
San Diego, CA 92113

Minh Hanh Nguyen, OD

Provider ID: N/A
1809 National Ave
San Diego, CA 92113

Luis A. Molina, OD

Provider ID: N/A
1809 National Ave
San Diego, CA 92113

Nina Song, OD

Provider ID: N/A
2345 Fenton Pkwy
San Diego, CA 92108

Chi T. Huynh, OD

Provider ID: N/A
9225 Mira Mesa Blvd Ste 108
San Diego, CA 92126

Janice L. Lau, OD

Provider ID: N/A
12650 Sabre Spgs Pkwy Ste 203
San Diego, CA 92128

Eric M. White, OD

Provider ID: N/A
5075 Ruffin Rd Ste B
San Diego, CA 92123

Nazret Weldeghiorgis, OD

Provider ID: N/A
1809 National Ave
San Diego, CA 92113

Florena Culas, OD

Provider ID: N/A
1809 National Ave
San Diego, CA 92113

Shervin Alborzian, MD

Provider ID: N/A
1809 National Ave
San Diego, CA 92113

Nilam Bansal, OD

Provider ID: N/A
1809 National Ave
San Diego, CA 92113

David Najafi, MD

Provider ID: N/A
1809 National Ave
San Diego, CA 92113

Karen T. Barbadillo, OD

Provider ID: N/A
2355 India St
San Diego, CA 92101

Stephen Chinn, OD

Provider ID: N/A
2856 University Ave
San Diego, CA 92104

Shelby Esambolchi, OD

Provider ID: N/A
2345 Fenton Pkwy
San Diego, CA 92108

Maryam Mehrzad, OD

Provider ID: N/A
2345 Fenton Pkwy
San Diego, CA 92108

Shervin Alborzian, MD

Provider ID: N/A
4725 Market St
San Diego, CA 92102

Han Bui, OD

Provider ID: N/A
2345 Fenton Pkwy
San Diego, CA 92108

Helen Tang, OD

Provider ID: N/A
2345 Fenton Pkwy
San Diego, CA 92108

Michael A. Kling, OD

Provider ID: N/A
3434 4th Ave
San Diego, CA 92103

Marianna Samuels, OD

Provider ID: N/A
2345 Fenton Pkwy
San Diego, CA 92108

Elias Toubia, OD

Provider ID: N/A
4725 Market St
San Diego, CA 92102

Kathryn Ordonez, OD

Provider ID: N/A
3434 4th Ave
San Diego, CA 92103

Andrea Meagher, OD

Provider ID: N/A
3434 4th Ave
San Diego, CA 92103

Matthew Q. La, OD

Provider ID: N/A
2345 Fenton Pkwy
San Diego, CA 92108

Mika E. Fu, OD

Provider ID: N/A
1628 San Elijo Rd Ste 101
San Marcos, CA 92078

Robyn Slikker, OD

Provider ID: N/A
2345 Fenton Pkwy
San Diego, CA 92108

Thu K. Nguyen, OD

Provider ID: N/A
2345 Fenton Pkwy
San Diego, CA 92108

Ryan P. Nguyen, OD

Provider ID: N/A
2345 Fenton Pkwy
San Diego, CA 92108

Loan Huynh, OD

Provider ID: N/A
2345 Fenton Pkwy
San Diego, CA 92108

Maria Camila Molina Velandia, OD

Provider ID: N/A
4725 Market St
San Diego, CA 92102

Jason D. Tu, OD

Provider ID: N/A
3434 4th Ave
San Diego, CA 92103

Andrea Russo, OD

Provider ID: N/A
3434 4th Ave
San Diego, CA 92103

Paul D. Huynh, MD

Provider ID: N/A
10737 Camino Ruiz Ste 100
San Diego, CA 92126

Florena Culas, OD

Provider ID: N/A
4725 Market St
San Diego, CA 92102

Michael D. Tran, OD

Provider ID: N/A
640 Grand Ave Ste 101
San Marcos, CA 92078

Gina M. Grasso, OD

Provider ID: N/A
1628 San Elijo Rd Ste 101
San Marcos, CA 92078

Kathryn Ordonez, OD

Provider ID: N/A
1628 San Elijo Rd Ste 101
San Marcos, CA 92078

Nghi U. Duong, OD

Provider ID: N/A
640 Grand Ave Ste 101
San Marcos, CA 92078

Amanda Thai, OD

Provider ID: N/A
640 Grand Ave Ste 101
San Marcos, CA 92078

Tory Prestera, MD

Provider ID: N/A
100 N Rancho Santa Fe Rd Ste 12
San Marcos, CA 92069

Coral St Onge, OD

Provider ID: N/A
1537 Grand Ave Ste A
San Marcos, CA 92078

Kevin Garff, MD

Provider ID: N/A
100 N Rancho Santa Fe Rd Ste 12
San Marcos, CA 92069

Vanessa Grichine, OD

Provider ID: N/A
1586 W San Marcos Blvd
San Marcos, CA 92078

Richard M. Skay, OD

Provider ID: N/A
1903 W San Marcos Blvd Ste 130
San Marcos, CA 92078

Iris Wong, OD

Provider ID: N/A
151 S Las Posas Rd Ste 171
San Marcos, CA 92078

Iris Wong, OD

Provider ID: N/A
1628 San Elijo Rd Ste 101
San Marcos, CA 92078

Dominique Lam, OD

Provider ID: N/A
1628 San Elijo Rd Ste 101
San Marcos, CA 92078

Mini P. Ta, OD

Provider ID: N/A
640 Grand Ave Ste 101
San Marcos, CA 92078

Howard G. Guan, MD

Provider ID: N/A
100 N Rancho Santa Fe Rd Ste 12
San Marcos, CA 92069

Karen L. Peschke, OD

Provider ID: N/A
1537 Grand Ave Ste A
San Marcos, CA 92078

Daniel D. Cha, OD

Provider ID: N/A
1586 W San Marcos Blvd
San Marcos, CA 92078

Gina M. Grasso, OD

Provider ID: N/A
151 S Las Posas Rd Ste 171
San Marcos, CA 92078

James Phung, OD

Provider ID: N/A
732 Center Dr
San Marcos, CA 92069

Mika E. Fu, OD

Provider ID: N/A
151 S Las Posas Rd Ste 171
San Marcos, CA 92078

Kathryn Ordonez, OD

Provider ID: N/A
151 S Las Posas Rd Ste 171
San Marcos, CA 92078

Dominique Lam, OD

Provider ID: N/A
151 S Las Posas Rd Ste 171
San Marcos, CA 92078

Walmart Optical, NA

Provider ID: N/A
732 Center Dr
San Marcos, CA 92069

Costco Warehouse 1080, NA

Provider ID: N/A
725 Center Dr
San Marcos, CA 92069

Jeffrey S. Fimreite, OD

Provider ID: N/A
1586 W San Marcos Blvd
San Marcos, CA 92078

Patricia A. Atie, OD

Provider ID: N/A
1586 W San Marcos Blvd
San Marcos, CA 92078

Michelle Pham, OD

Provider ID: N/A
9349 Mission Gorge Rd Ste 114
Santee, CA 92071

Patty L. Cheng, OD

Provider ID: N/A
170 Town Center Pkwy
Santee, CA 92071

Ketan Bakriwala, OD

Provider ID: N/A
8701 Cuyamaca St
Santee, CA 92071

Gregory M. Steele, OD

Provider ID: N/A
8701 Cuyamaca St
Santee, CA 92071

Elaine J. Limpiado, OD

Provider ID: N/A
9349 Mission Gorge Rd Ste 114
Santee, CA 92071

Christina M. Turner, OD

Provider ID: N/A
1586 W San Marcos Blvd
San Marcos, CA 92078

Michael Fimreite, OD

Provider ID: N/A
1586 W San Marcos Blvd
San Marcos, CA 92078

Claudia Montana Collins, OD

Provider ID: N/A
1586 W San Marcos Blvd
San Marcos, CA 92078

Kha T. Do, OD

Provider ID: N/A
1586 W San Marcos Blvd
San Marcos, CA 92078

Allison D. Pierce, OD

Provider ID: N/A
8701 Cuyamaca St
Santee, CA 92071

Edward K. Harver, OD

Provider ID: N/A
170 Town Center Pkwy
Santee, CA 92071

Garrett Pennell, OD

Provider ID: N/A
170 Town Center Pkwy
Santee, CA 92071

Jennifer N. Tam, OD

Provider ID: N/A
8701 Cuyamaca St
Santee, CA 92071

Mary L. Howard, OD

Provider ID: N/A
170 Town Center Pkwy
Santee, CA 92071

Irene J. Gendelman, OD

Provider ID: N/A
9349 Mission Gorge Rd Ste 114
Santee, CA 92071

Walmart Optical, NA

Provider ID: N/A
170 Town Center Pkwy
Santee, CA 92071

Craig C. Liu, OD

Provider ID: N/A
8701 Cuyamaca St
Santee, CA 92071

Costco Warehouse 0403, NA

Provider ID: N/A
101 Town Center Pkwy
Santee, CA 92071

Stephen Huang, OD

Provider ID: N/A
8701 Cuyamaca St
Santee, CA 92071

Kevin R. Solis, OD

Provider ID: N/A
687 Sweetwater Rd
Spring Valley, CA 91977

Kenny Hoang, OD

Provider ID: N/A
9628 Campo Rd Ste C
Spring Valley, CA 91977

John C. Fleming, OD

Provider ID: N/A
9628 Campo Rd Ste C
Spring Valley, CA 91977

Elias Toubia, OD

Provider ID: N/A
687 Sweetwater Rd
Spring Valley, CA 91977

Joan Keddington, OD

Provider ID: N/A
687 Sweetwater Rd
Spring Valley, CA 91977

Andrea NastasoIU, OD

Provider ID: N/A
687 Sweetwater Rd
Spring Valley, CA 91977

Smit A. Patel, OD

Provider ID: N/A
9349 Mission Gorge Rd Ste 114
Santee, CA 92071

Mario A. Arellano, OD

Provider ID: N/A
101 Town Center Pkwy
Santee, CA 92071

Robert L. Grazian, OD

Provider ID: N/A
9727 Mission Gorge Rd
Santee, CA 92071

Kristin M. Peterson, OD

Provider ID: N/A
977 Lomas Santa Fe Dr Ste B
Solana Beach, CA 92075

Laila Brown-aijala, OD

Provider ID: N/A
687 Sweetwater Rd
Spring Valley, CA 91977

Christopher Johnson, OD

Provider ID: N/A
9628 Campo Rd Ste C
Spring Valley, CA 91977

Theresa Nguyen, OD

Provider ID: N/A
687 Sweetwater Rd
Spring Valley, CA 91977

Mary M. King, OD

Provider ID: N/A
687 Sweetwater Rd
Spring Valley, CA 91977

Ankur Kalra, OD

Provider ID: N/A
687 Sweetwater Rd
Spring Valley, CA 91977

Robert J. Joyce, OD

Provider ID: N/A
29115 Valley Center Rd Ste E
Valley Center, CA 92082

Tam T. Le, OD

Provider ID: N/A
29115 Valley Center Rd Ste E
Valley Center, CA 92082

Eric Johnston, MD

Provider ID: N/A
1930 Via Ctr
Vista, CA 92081

Miriam Fuchs, OD

Provider ID: N/A
1800 University Dr
Vista, CA 92083

Costco Warehouse 0124, NA

Provider ID: N/A
1755 Hacienda Dr
Vista, CA 92081

Ryan N. Aboul-hosn, OD

Provider ID: N/A
1755 Hacienda Dr
Vista, CA 92081

Kimberly A. Michel, OD

Provider ID: N/A
1755 Hacienda Dr
Vista, CA 92081

Patricia Wai, OD

Provider ID: N/A
1755 Hacienda Dr
Vista, CA 92081

Kendall George, OD

Provider ID: N/A
931 Anza Ave Ste B
Vista, CA 92084

Ardalan E. Aminlari, MD

Provider ID: N/A
1930 Via Ctr
Vista, CA 92081

Brandyn Chen, OD

Provider ID: N/A
2067 W Vista Way Ste 120
Vista, CA 92083

Vanessa S. Kashak, OD

Provider ID: N/A
1755 Hacienda Dr
Vista, CA 92081

Johnny Cao-nguyen, OD

Provider ID: N/A
1930 Via Ctr
Vista, CA 92081

Walmart Optical, NA

Provider ID: N/A
1800 University Dr
Vista, CA 92083

Glenn M. Demlinger, OD

Provider ID: N/A
741 Shadowridge Dr
Vista, CA 92083

Mona Moshtaghi, OD

Provider ID: N/A
1930 Via Ctr
Vista, CA 92081

Benjamin Stephens, MD

Provider ID: N/A
2067 W Vista Way Ste 120
Vista, CA 92083

Bruce D. George, OD

Provider ID: N/A
931 Anza Ave Ste B
Vista, CA 92084

Sharon F. Leong, OD

Provider ID: N/A
1755 Hacienda Dr
Vista, CA 92081

Connie Tan, OD

Provider ID: N/A
1930 Via Ctr
Vista, CA 92081

Thao P. Tran, OD

Provider ID: N/A
110 Civic Center Dr Ste 204
Vista, CA 92084

Heather Chen, MD

Provider ID: N/A
2067 W Vista Way Ste 120
Vista, CA 92083

Ashley Tang, OD

Provider ID: N/A
2067 W Vista Way Ste 120
Vista, CA 92083

Maulik S. Zaveri, MD

Provider ID: N/A
2067 W Vista Way Ste 120
Vista, CA 92083

Yasmin A. Kouchak, OD

Provider ID: N/A
2067 W Vista Way Ste 120
Vista, CA 92083

David I. Bloomberg, OD

Provider ID: N/A
2067 W Vista Way Ste 120
Vista, CA 92083

Jeffrey B. Morris, MD

Provider ID: N/A
1930 Via Ctr
Vista, CA 92081

Steven Giang, OD

Provider ID: N/A
2067 W Vista Way Ste 120
Vista, CA 92083

Krista Gardner, OD

Provider ID: N/A
2067 W Vista Way Ste 120
Vista, CA 92083

Randy L. Stone, OD

Provider ID: N/A
2067 W Vista Way Ste 120
Vista, CA 92083

Bradley W. Greider, MD



Provider ID: N/A
2067 W Vista Way Ste 120
Vista, CA 92083

Sherri S. Azimi, OD



Provider ID: N/A
2067 W Vista Way Ste 120
Vista, CA 92083

C3. Centros de enfermería especializada (SNF)



CAPISTRANO BEACH CARE CENTER

 35410 DEL REY
CAPISTRANO BEACH, CA
92624
 (949) 496-5786
Effective as of 01-AUG-14



CAPISTRANO BEACH EXTENDED CARE AND LIVING CTR

 35410 DEL REY
CAPISTRANO BEACH, CA
92624
 (949) 496-5786
Effective as of 01-JAN-12



BAYSHIRE CARLSBAD

 3140 EL CAMINO REAL
CARLSBAD, CA 92008
 (760) 720-9898
Effective as of 01-JUL-22



LAS VILLAS DE CARLSBAD OPERATIONS LLC

 1088 LAGUNA DR
CARLSBAD, CA 92008
 (760) 434-7116
Effective as of 01-FEB-13



SOUTH BAY POST ACUTE CARE

 553 F ST
CHULA VISTA, CA 91910
 (619) 426-8611
Effective as of 01-NOV-19



AVOCADO POST ACUTE

 510 E WASHINGTON AVE
EL CAJON, CA 92020
 (619) 440-1211
Effective as of 01-JAN-20



BRADLEY COURT SPECIAL CARE CENTER

 675 E BRADLEY AVE
EL CAJON, CA 92021
 (619) 448-6633
Effective as of 01-DEC-21



COTTONWOOD CANYON HEALTHCARE CENTER

 1391 E MADISON AVE
EL CAJON, CA 92021
 (619) 444-1107
Effective as of 01-OCT-11



COUNTRY HILLS POST ACUTE

 1580 BROADWAY
EL CAJON, CA 92021
 (619) 441-8745
Effective as of 15-NOV-20



MAGNOLIA POST ACUTE CARE

 635 S MAGNOLIA AVE
EL CAJON, CA 92020
 (616) 442-8826
Effective as of 01-NOV-19



MAGNOLIA SPECIAL CARE CENTER

 635 S MAGNOLIA AVE
EL CAJON, CA 92020
 (619) 442-8826
Effective as of 01-JAN-12

MAGNOLIA SPECIAL CARE CTR



 635 S MAGNOLIA AVE
EL CAJON, CA 92020
 (619) 442-8826
Effective as of 01-JAN-12

PARKSIDE HEALTH AND WELLNESS CENTER



 444 W LEXINGTON AVE
EL CAJON, CA 92020
 (619) 442-7744
Effective as of 01-NOV-19

PARKSIDE SPECIAL CARE



CENTER

 444 W LEXINGTON AVE
EL CAJON, CA 92020
 (619) 442-7744
Effective as of 01-JAN-12



SAN DIEGO POST ACUTE CENTER

 1201 S ORANGE AVE
EL CAJON, CA 92020
 (619) 441-1988
Effective as of 01-SEP-14



SOMERSET SUBACUTE AND CARE

 151 CLAYDELLE AVE
EL CAJON, CA 92020
 (619) 442-0245
Effective as of 01-NOV-19



VICTORIA POST ACUTE CARE

 654 S ANZA ST
EL CAJON, CA 92020
 (619) 440-5005
Effective as of 01-NOV-19



VICTORIA SPECIAL CARE CTR

 654 S ANZA ST
EL CAJON, CA 92020
 (619) 440-5005
Effective as of 01-JAN-12

VILLA LAS PALMAS HEALTHCARE CTR

 622 S ANZA ST
EL CAJON, CA 92020
 (619) 442-0544
Effective as of 01-OCT-11



AVIARA HEALTHCARE CENTER

 944 REGAL RD
ENCINITAS, CA 92024
 (760) 944-0331
Effective as of 01-OCT-11



ENCINITAS NURSING AND

C3. Centros de enfermería especializada (SNF)



REHAB CTR

 900 SANTA FE DR
ENCINITAS, CA 92024
 (760) 753-6423
Effective as of 01-DEC-12



ESCONDIDO CARE CENTER

 421 E MISSION AVE
ESCONDIDO, CA 92025
 (760) 747-0430
Effective as of 01-MAY-13



LIFE CARE CENTER OF ESCONDIDO

 1980 FELICITA RD
ESCONDIDO, CA 92025
 (760) 741-6109
Effective as of 01-JAN-12



OCEAN VIEW POST ACUTE

 1980 FELICITA RD
ESCONDIDO, CA 92025
 (760) 741-6109
Effective as of 01-SEP-24



PALOMAR HEIGHTS CARE CTR

 1260 E OHIO AVE
ESCONDIDO, CA 92027
 (760) 746-1100
Effective as of 01-JAN-12

PALOMAR VISTA HEALTHCARE CTR


 201 N FIG ST
ESCONDIDO, CA 92025
 (760) 746-0303
Effective as of 01-NOV-11

REDWOOD TERRACE



 710 W 13TH AVE
ESCONDIDO, CA 92025
 (760) 291-2736
Effective as of 01-NOV-17

VALLE VISTA POST ACUTE


 1025 W 2ND AVE

ESCONDIDO, CA 92025
 (760) 745-1842
Effective as of 01-DEC-12



FALLBROOK SKILLED NURSING

 325 POTTER ST
FALLBROOK, CA 92028
 (760) 728-2330
Effective as of 01-FEB-20



DEVONSHIRE CARE CENTER

 1350 E DEVONSHIRE AVE
HEMET, CA 92544
 (951) 925-2571
Effective as of 01-JAN-12



HEMET GLOBAL MEDICAL CENTER

 1117 E DEVONSHIRE AVE
HEMET, CA 92543
 (951) 652-2811
Effective as of 01-JAN-20



MANORCARE HEALTH SERVICES HEMET

 1717 W STETSON AVE
HEMET, CA 92545
 (951) 925-9171
Effective as of 01-JAN-12

RAMONA REHAB AND POST ACUTE CTR



 485 W JOHNSTON AVE
HEMET, CA 92543
 (951) 652-0011
Effective as of 15-APR-19

SAN JACINTO HEALTHCARE



 275 N SAN JACINTO ST
HEMET, CA 92543
 (951) 658-9441
Effective as of 01-MAR-13

THE VILLAGE HEALTHCARE



CENTER

 2400 W ACACIA AVE
HEMET, CA 92545
 (951) 766-5116
Effective as of 01-JAN-12



LA JOLLA NURSING AND REHAB CTR

 2552 TORREY PINES RD
LA JOLLA, CA 92037
 (858) 453-5810
Effective as of 01-DEC-12



THE COVE AT LA JOLLA

 7160 FAY AVE
LA JOLLA, CA 92037
 (858) 459-4361
Effective as of 01-NOV-19



ARBOR HILLS NURSING CENTER

 7800 PARKWAY DR
LA MESA, CA 91942
 (619) 460-2330
Effective as of 01-DEC-20



COMMUNITY CARE CENTER

 8665 LA MESA BLVD
LA MESA, CA 91942
 (619) 465-0702
Effective as of 01-APR-16

COUNTRY MANOR LA MESA HEALTHCARE CENTER

 5696 LAKE MURRAY BLVD
LA MESA, CA 91942
 (619) 460-7871
Effective as of 01-AUG-14

GROSSMONT POST ACUTE CARE

 8787 CENTER DR
LA MESA, CA 91942
 (619) 460-4444
Effective as of 01-NOV-19

C3. Centros de enfermería especializada (SNF)

LA MESA HEALTHCARE CTR

3780 MASSACHUSETTS AVE
LA MESA, CA 91941
(619) 465-1313
Effective as of 01-OCT-11

PARKWAY HILLS NURSING & REHAB

7760 PARKWAY DR
LA MESA, CA 91942
(619) 469-0124
Effective as of 01-APR-20

LAGUNA HILLS HEALTH AND REHAB CTR

24452 HEALTH CENTER DR
LAGUNA HILLS, CA 92653
(949) 837-8000
Effective as of 01-APR-18

PALM TERRACE HLTHCARE AND REHAB CTR

24962 CALLE ARAGON
LAGUNA WOODS, CA 92637
(949) 587-9000
Effective as of 01-NOV-11

FREEDOM VILLAGE HEALTHCARE CTR

23442 EL TORO RD
LAKE FOREST, CA 92630
(949) 472-8353
Effective as of 01-JAN-12

LAKE FOREST NURSING CENTER

25652 OLD TRABUCO RD
LAKE FOREST, CA 92630
(949) 380-9380
Effective as of 01-JAN-12

TRABUCO HILLS POST ACUTE

25652 OLD TRABUCO RD

LAKE FOREST, CA 92630
(949) 380-9380
Effective as of 01-SEP-24

BELLA VISTA HEALTH CENTER

7922 PALM ST
LEMON GROVE, CA 91945
(619) 644-1000
Effective as of 01-SEP-13

LEMON GROVE CARE AND REHAB CTR

8351 BROADWAY
LEMON GROVE, CA 91945
(619) 463-0294
Effective as of 01-NOV-11

MENIFEE LAKES POST ACUTE

27600 ENCANTO DR
MENIFEE, CA 92586
(951) 679-6858
Effective as of 01-SEP-24

MURRIETA HEALTH AND REHABILITATION CENTER

24100 MONROE AVE
MURRIETA, CA 92562
(951) 600-4640
Effective as of 01-JAN-12

CASTLE MANOR NURSING AND REHABILITATION CTR

541 S V AVE
NATIONAL CITY, CA 91950
(619) 791-7900
Effective as of 01-DEC-20

FRIENDSHIP MANOR NURSING AND REHABILITATION CTR

902 EUCLID AVE
NATIONAL CITY, CA 91950
(619) 791-7700
Effective as of 01-DEC-20

PARADISE VALLEY HEALTH

CARE CENTER

2575 E 8TH ST
NATIONAL CITY, CA 91950
(619) 470-6700
Effective as of 01-OCT-20

WINDSOR GARDENS CONV CTR OF SAN DIEGO

220 E 24TH ST
NATIONAL CITY, CA 91950
(619) 474-6741
Effective as of 01-JAN-12

LA PALOMA HEALTHCARE CTR

3232 THUNDER DR
OCEANSIDE, CA 92056
(760) 724-2193
Effective as of 01-OCT-11

BOULDER CREEK POST ACUTE

12696 MONTE VISTA RD
POWAY, CA 92064
(858) 487-6242
Effective as of 01-APR-20

POWAY HEALTHCARE CENTER

15632 POMERADO RD
POWAY, CA 92064
(858) 485-5153
Effective as of 01-OCT-11

THE VILLAS AT POWAY



15615 POMERADO RD
POWAY, CA 92064
(858) 613-4545
Effective as of 01-JAN-12

VILLA MONTE VISTA



12696 MONTE VISTA RD
POWAY, CA 92064
(858) 487-6242
Effective as of 01-JAN-12

ARROYO VISTA NURSING CTR



C3. Centros de enfermería especializada (SNF)

 3022 45TH ST
SAN DIEGO, CA 92105
 (619) 283-5855
Effective as of 01-NOV-11



BRIGHTON PLACE SAN DIEGO

 1350 EUCLID AVE
SAN DIEGO, CA 92105
 (619) 263-2166
Effective as of 01-JAN-12



CARMEL MOUNTAIN REHAB AND HEALTHCARE CTR

 11895 AVENUE OF
INDUSTRY
SAN DIEGO, CA 92128
 (858) 673-0101
Effective as of 01-NOV-11



CLAIREMONT HEALTHCARE AND WELLNESS CENTER LLC

 8060 FROST ST
SAN DIEGO, CA 92123
 (858) 278-4750
Effective as of 01-NOV-17



GOLDEN HILL POST ACUTE

 1201 34TH ST
SAN DIEGO, CA 92102
 (619) 232-2946
Effective as of 01-MAY-23



HILLCREST HEIGHTS HEALTHCARE CENTER

 4033 6TH AVE
SAN DIEGO, CA 92103
 (619) 297-4086
Effective as of 01-MAY-24



JACOB HEALTH CARE CENTER LLC

 4075 54TH ST
SAN DIEGO, CA 92105
 (619) 582-5168
Effective as of 01-APR-16



KEARNY MESA CONVALESCENT AND NURSING HOME

 7675 FAMILY CIR
SAN DIEGO, CA 92111
 (858) 278-8121
Effective as of 01-DEC-20



MISSION HILLS POST ACUTE CARE

 3680 REYNARD WAY
SAN DIEGO, CA 92103
 (619) 297-4484
Effective as of 01-NOV-19



POINT LOMA CONVALESCENT HSP

 3232 DUKE ST
SAN DIEGO, CA 92110
 (619) 224-4141
Effective as of 01-JAN-12



REO VISTA HEALTHCARE CTR

 6061 BANBURY ST
SAN DIEGO, CA 92139
 (619) 475-2211
Effective as of 01-OCT-11

ST PAULS HEALTH CARE CENTER


 235 NUTMEG ST
SAN DIEGO, CA 92103
 (619) 677-3895
Effective as of 01-JAN-18

THE SHORES POST ACUTE



 2828 MEADOW LARK DR
SAN DIEGO, CA 92123
 (858) 277-6460
Effective as of 01-OCT-13

THE SPRINGS AT PACIFIC REGENT



 3884 NOBEL DR
SAN DIEGO, CA 92122

 (858) 625-8700
Effective as of 01-NOV-11



TORREY PINES SENIOR LIVING

 13101 HARTFIELD AVE
SAN DIEGO, CA 92130
 (858) 259-2222
Effective as of 01-JUN-16



UNIVERSITY CARE CENTER

 5602 UNIVERSITY AVE
SAN DIEGO, CA 92105
 (619) 583-1993
Effective as of 01-OCT-11



VILLA RANCHO BERNARDO CARE CENTER

 15720 BERNARDO CENTER
DR
SAN DIEGO, CA 92127
 (858) 672-3900
Effective as of 01-JAN-12



WINDSOR GARDENS CONV AND REHAB OF GOLDEN HILL

 1201 34TH ST
SAN DIEGO, CA 92102
 (619) 232-2946
Effective as of 01-JAN-12

BROOKDALE SAN JUAN CAPISTRANO

 31741 RANCHO VIEJO RD
SAN JUAN CAPISTRANO,
CA 92675
 (949) 248-8855
Effective as of 01-JUN-16


STANFORD COURT SKILLED NURSING AND REHAB CENTER

 8778 CUYAMACA ST
SANTEE, CA 92071
 (619) 449-5555
Effective as of 01-DEC-20

C3. Centros de enfermería especializada (SNF)

BRIGHTON PLACE EAST


 8625 LAMAR ST
SPRING VALLEY, CA 91977

 (619) 461-3222

Effective as of 01-JAN-12


BRIGHTON PLACE SPRING VALLEY


 9009 CAMPO RD
SPRING VALLEY, CA 91977

 (619) 460-2711

Effective as of 01-JAN-12

SUN CITY CONVALESCENT CENTER


 27600 ENCANTO DR
SUN CITY, CA 92586

 (951) 679-6858

Effective as of 01-JAN-12

TEMECULA HEALTHCARE CENTER


 44280 CAMPANULA WAY
TEMECULA, CA 92592

 (951) 466-0200

Effective as of 02-MAR-22

LA FUENTE POST ACUTE


 247 E BOBIER DR
VISTA, CA 92084

 (760) 945-3033

Effective as of 01-DEC-21

LIFE CARE CENTER OF VISTA


 304 N MELROSE DR
VISTA, CA 92083

 (760) 724-8222

Effective as of 01-JAN-12

RANCHO VISTA


 760 E BOBIER DR
VISTA, CA 92084

 (760) 941-1480

Effective as of 01-FEB-13

VISTA HEALTHCARE CENTER


 247 E BOBIER DR
VISTA, CA 92084

 (760) 945-3033

Effective as of 01-OCT-13

VISTA KNOLL SPECIALIZED CARE FACILITY


 2000 WESTWOOD RD
VISTA, CA 92083

 (760) 630-2273

Effective as of 01-NOV-11

VISTA VIEW POST ACUTE




































 304 N MELROSE DR
VISTA, CA 92083

 (760) 724-8222

Effective as of 01-SEP-24

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

ALPINE		
SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE Provider ID: 517802  1620 ALPINE BLVD STE 110 ALPINE, CA 91901-1103  Phone: 619-662-4100 Fax: 619-205-6305  After Hours Phone: 619-662-4100 License Number: DC28335 NPI: 1598122871 Accepting New Patients: Yes  Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE  Website: www.mtnhealth.org	 Accessibility: CONTACT PROVIDER Medical Group/IPA: SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE  Website: www.mtnhealth.org	 Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE  Website: www.mtnhealth.org
SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE Provider ID: 517802  1620 ALPINE BLVD STE 110 ALPINE, CA 91901-1103  Phone: 619-662-4100  After Hours Phone: 619-662-4100 License Number: PA52347 NPI: 1598122871 Accepting New Patients: Yes  Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE  Website: www.mtnhealth.org	 1620 ALPINE BLVD STE 110 ALPINE, CA 91901-1103  Phone: 619-662-4100  After Hours Phone: 619-662-4100 License Number: PA52347 NPI: 1598122871 Accepting New Patients: Yes  Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE  Website: www.mtnhealth.org	SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE Provider ID: 517802  1620 ALPINE BLVD STE 110 ALPINE, CA 91901-1103  Phone: 619-662-4100  After Hours Phone: 619-662-4100 NPI: 1598122871 Accepting New Patients: Yes  Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE  Website: www.mtnhealth.org
SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE Provider ID: 517802  1620 ALPINE BLVD STE 110 ALPINE, CA 91901-1103  Phone: 619-662-4100 Fax: 619-205-6305  After Hours Phone: 619-662-4100 License Number: C172036 NPI: 1598122871 Accepting New Patients: Yes  Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N	SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE Provider ID: 517802  1620 ALPINE BLVD STE 110 ALPINE, CA 91901-1103  Phone: 619-445-6200  After Hours Phone: 619-445-6200 License Number: 20A17296 NPI: 1598122871 Accepting New Patients: Yes	SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE Provider ID: 517802  1620 ALPINE BLVD STE 110 ALPINE, CA 91901-1103  Phone: 619-662-4100  After Hours Phone: 619-662-4100

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

License Number: 90000681

NPI: 1598122871


Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

 Website: www.mtnhealth.org

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

Provider ID: 517802

 1620 ALPINE BLVD STE 110 ALPINE, CA 91901-1103

 Phone: 619-662-4100

 After Hours Phone: 619-662-4100

License Number: A158569

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

 Website: www.mtnhealth.org

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

Provider ID: 517802

 1620 ALPINE BLVD STE 110 ALPINE, CA 91901-1103


 Phone: 619-662-4100

 After Hours Phone: 619-662-4100

License Number: A97270

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

 Website: www.mtnhealth.org

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

Provider ID: 517802

 1620 ALPINE BLVD STE 110 ALPINE, CA 91901-1103

 Phone: 619-662-4100

 After Hours Phone: 619-662-4100

License Number: NP95005999

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE


 Website: www.mtnhealth.org

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

Provider ID: 517802

 1620 ALPINE BLVD STE 110 ALPINE, CA 91901-1103

 Phone: 619-662-4100

 After Hours Phone: 619-662-4100

License Number: PA20490

NPI: 1598122871


Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE


 Website: www.mtnhealth.org

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

Provider ID: 517802

 1620 ALPINE BLVD STE 110 ALPINE, CA 91901-1103

 Phone: 619-662-4100

 After Hours Phone: 619-662-4100

License Number: NP95006360

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal


YSIDRO HEALTH ALPINE
FAMILY MEDICINE

 Website: www.mtnhealth.org

**SAN YSIDRO HEALTH ALPINE
FAMILY MEDICINE**

Provider ID: 517802

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

 Phone: (619) 662-4100

Fax: (619) 320-3347

 After Hours Phone: (619)
662-4100


License Number: 090000681

NPI: 1770124315


Accepting New Patients: Yes

Min/Max Age: 0\150

 Site English Spoken: Y

 Site Languages(s) Spoken:
Arabic, Norwegian, Spanish,
Swedish

Cultural Competency: N


 Hours: M-F
8:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP of
Southern Cal-PHP

 Website: www.mtnhealth.org

 After Hours Phone:
760-736-6767

License Number: A49273

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: TRUECARE


 Website: N/A

TRUECARE

Provider ID: 480120

 1295 CARLSBAD VILLAGE
DR, STE 100
CARLSBAD, CA 92008-1950

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767

License Number: A131678

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: TRUECARE

 Website: N/A

License Number: PA53036

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: TRUECARE


 Website: N/A

TRUECARE

Provider ID: 480120

 1295 CARLSBAD VILLAGE
DR, STE 100
CARLSBAD, CA 92008-1950

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767

License Number: A93248

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: TRUECARE

 Website: N/A

TRUECARE

Provider ID: 480120

 1295 CARLSBAD VILLAGE
DR, STE 100
CARLSBAD, CA 92008-1950

 Phone: 760-736-6767

Fax: 760-720-7204


 After Hours Phone:
760-736-6767


License Number: PA22667

CARLSBAD

TRUECARE


Provider ID: 480120


 1295 CARLSBAD VILLAGE
DR, STE 100
CARLSBAD, CA 92008-1950


 Phone: 760-736-6767

TRUECARE

Provider ID: 480120

 1295 CARLSBAD VILLAGE
DR, STE 100
CARLSBAD, CA 92008-1950

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: TRUECARE

Website: N/A

TRUECARE

Provider ID: 480120

1295 CARLSBAD VILLAGE DR, STE 100 CARLSBAD, CA 92008-1950

Phone: 760-736-6767

Fax: 760-720-7204

After Hours Phone: 760-736-6767

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: TRUECARE

Website: N/A

TRUECARE

Provider ID: 480120

1295 CARLSBAD VILLAGE DR, STE 100 CARLSBAD, CA 92008-1950

Phone: 760-736-6767

After Hours Phone: 760-736-6767

License Number: G74757

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: TRUECARE

Website: N/A

TRUECARE

Provider ID: 480120

1295 CARLSBAD VILLAGE DR, STE 100 CARLSBAD, CA 92008-1950

Phone: 760-736-6767

Fax: 760-720-7204

After Hours Phone: 760-736-6767

License Number: 80000630

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: TRUECARE

Website: N/A

TRUECARE

Provider ID: 480120

1295 CARLSBAD VILLAGE DR STE 100 CARLSBAD, CA 92008

Phone: (760) 736-6767

Fax: (760) 736-8740

After Hours Phone: (760) 736-6767

License Number: 080000630

NPI: 1245246917

Accepting New Patients: Yes

Min/Max Age: 0\150

Site English Spoken: Y

Cultural Competency: N

Hours: M-F

8:00AM-5:00PM

SA 8:00AM-2:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP of Southern Cal-PHP

Website: N/A

CHULA VISTA

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

252 LANDIS AVE CHULA VISTA, CA 91910-2628

Phone: 619-515-2500

After Hours Phone: 619-515-2500

License Number: A116680

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR

Website: www.fhcsd.org


CHULA VISTA FAMILY HLTH CTR

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500

Fax: 619-397-1161

 After Hours Phone:
619-515-2500

NPI: 1134155377

Accepting New Patients: Yes


Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR


 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500

 After Hours Phone:
619-515-2500

License Number: PT37189

NPI: 1134155377

Accepting New Patients: Yes


Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish


Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR


 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500

 After Hours Phone:
619-515-2500

License Number: PT294245

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR

 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500

 After Hours Phone:
619-515-2500

License Number: PT295173

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:

Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR


 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500

 After Hours Phone:
619-515-2500

License Number: PT293536

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR


 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355



 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500






 After Hours Phone:

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal






D1. Clínicas de salud con calificación federal

619-515-2500
License Number: PT291706
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR
 Website: www.fhcsd.org





CHULA VISTA FAMILY HLTH CTR


Provider ID: 206355
 251 LANDIS AVE
CHULA VISTA, CA
91910-2628
 Phone: 619-515-2500
 After Hours Phone: 619-515-2500
License Number: PT292823
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR
 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR






Provider ID: 206355
 251 LANDIS AVE
CHULA VISTA, CA
91910-2628
 Phone: 619-515-2500
 After Hours Phone: 619-515-2500
License Number: PA21591
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR
 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR




Provider ID: 206355
 251 LANDIS AVE
CHULA VISTA, CA
91910-2628
 Phone: 619-515-2500
 After Hours Phone: 619-515-2500
License Number: NP95001964
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR
 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355
 251 LANDIS AVE
CHULA VISTA, CA
91910-2628
 Phone: 619-515-2500
 After Hours Phone: 619-515-2500
License Number: NP95013978
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR
 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355
 251 LANDIS AVE
CHULA VISTA, CA
91910-2628
 Phone: 619-515-2500
 After Hours Phone: 619-515-2500
License Number: NP23687
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Spanish
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR
 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355
 251 LANDIS AVE
CHULA VISTA, CA
91910-2628
 Phone: 619-515-2500
 After Hours Phone: 619-515-2500
License Number: NP95001492
NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR
 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355
 251 LANDIS AVE
CHULA VISTA, CA
91910-2628
 Phone: 619-515-2500
 After Hours Phone:

619-515-2500
License Number: NP95001705
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR
 Website: www.fhcsd.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone: 619-662-4100
License Number: 20A12555
NPI: 1598122871

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
 678 3RD AVE

CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone: 619-662-4100
License Number: 20A11087
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA


Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone: 619-662-4100
License Number: 20A14025
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org


SAN YSIDRO HEALTH CHULA VISTA


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: 20A19485

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: 20A13225


NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: 20A9060

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A106103

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A120672

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A120584


NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes


Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal


Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A121861

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A123263

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A114600

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A115598

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A115699

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A114893

NPI: 1598122871

Accepting New Patients: Yes


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal

 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A87650

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A93785

NPI: 1598122871
Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: C55563

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:

619-662-4100

License Number: A77936

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100


License Number: A80185

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal






 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: DC33295
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA


Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: DC31963
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA







Provider ID: 427322
 678 3RD AVE

CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: DC20760
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org







SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A69264
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A66903
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A47906
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

678 3RD AVE
CHULA VISTA, CA
91910-5736

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: A56153

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

678 3RD AVE
CHULA VISTA, CA
91910-5736

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: A50477

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

678 3RD AVE
CHULA VISTA, CA
91910-5736

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: A123492

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

678 3RD AVE
CHULA VISTA, CA
91910-5736

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: A123604

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

678 3RD AVE
CHULA VISTA, CA
91910-5736

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: A138534

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

678 3RD AVE
CHULA VISTA, CA
91910-5736

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: A159831

NPI: 1598122871

Accepting New Patients: Yes



Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal


 Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A138474

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A127706

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A134303

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A41486

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100


License Number: A40473

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A177922

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

678 3RD AVE
CHULA VISTA, CA
91910-5736

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: A40061

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

678 3RD AVE
CHULA VISTA, CA
91910-5736

Phone: 619-662-4100

After Hours Phone:

619-662-4100

License Number: A164392

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

678 3RD AVE
CHULA VISTA, CA
91910-5736

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: A162816

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

678 3RD AVE
CHULA VISTA, CA
91910-5736

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: A163183

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

Website: www.ihpsocal.org

OTAY FAMILY HEALTH CLINIC

Provider ID: 314546

1637 3RD AVE STE H
CHULA VISTA, CA
91911-5823

Phone: 619-662-4100

Fax: 619-336-2323

After Hours Phone:
619-662-4100

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: OTAY
FAMILY HEALTH CLINIC

Website: www.ihpsocal.org


OTAY FAMILY HEALTH CLINIC

Provider ID: 314546

1637 3RD AVE STE H
CHULA VISTA, CA
91911-5823

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A123170

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): American Sign Language (ASL): American Sign Language (ASL):


N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: OTAY

FAMILY HEALTH CLINIC

 Website: www.ihpsocal.org

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A82912

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): American Sign Language (ASL): American Sign Language (ASL):


N


 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: CHULA

VISTA PEDIATRICS

 Website: www.ihpsocal.org

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: C51110

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): American Sign Language (ASL): American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: CHULA


VISTA PEDIATRICS


 Website: www.ihpsocal.org

OTAY FAMILY HEALTH CLINIC

Provider ID: 314546

 1637 3RD AVE STE H
CHULA VISTA, CA
91911-5823

 Phone: 619-205-1376

 After Hours Phone:
619-205-1376

License Number: A179598

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): American Sign Language (ASL): American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: OTAY


FAMILY HEALTH CLINIC

 Website: www.ihpsocal.org

CHULA VISTA PEDIATRICS

Provider ID: 482034

 855 3RD AVE STE 2200
CHULA VISTA, CA
91911-1353

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A49591

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): American Sign Language (ASL): American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: CHULA


VISTA PEDIATRICS


 Website: www.ihpsocal.org

OTAY FAMILY HEALTH CLINIC

Provider ID: 314546

 1637 3RD AVE STE H
CHULA VISTA, CA
91911-5823

 Phone: 619-205-1360

 After Hours Phone:
619-205-1360

License Number: A95959

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): American Sign Language (ASL): American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: OTAY

FAMILY HEALTH CLINIC

 Website: www.ihpsocal.org

CHULA VISTA PEDIATRICS

Provider ID: 482034

 855 3RD AVE STE 2200
CHULA VISTA, CA
91911-1353

CHULA VISTA PEDIATRICS

Provider ID: 482034

 855 3RD AVE STE 2200
CHULA VISTA, CA
91911-1353

FAMILY HLTH CTR SAN

DIEGO-RICE FAM HC





Provider ID: 417641







 352 L ST
CHULA VISTA, CA






D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal





91911-1208
 Phone: 619-515-2325
Fax: 619-420-0660
 After Hours Phone:
619-515-2325
License Number: 550002305
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-RICE
FAM HC
 Website: www.fhcsd.org

**FAMILY HLTH CTR SAN
DIEGO-RICE FAM HC**
Provider ID: 417641
 352 L ST
CHULA VISTA, CA
91911-1208
 Phone: 619-515-2325
Fax: 619-420-0660
 After Hours Phone:
619-515-2325
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-RICE
FAM HC
 Website: www.fhcsd.org

**FAMILY HLTH CTR SAN
DIEGO-RICE FAM HC**
Provider ID: 417641
 352 L ST
CHULA VISTA, CA
91911-1208
 Phone: 619-515-2325
 After Hours Phone:
619-515-2325
License Number: PA19306
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-RICE
FAM HC
 Website: www.fhcsd.org

**FAMILY HLTH CTR SAN
DIEGO-RICE FAM HC**
Provider ID: 417641
 352 L ST
CHULA VISTA, CA
91911-1208
 Phone: 619-515-2325
 After Hours Phone:
619-515-2325
License Number: A144995
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: FAMILY


HLTH CTR SAN DIEGO-RICE
FAM HC
 Website: www.fhcsd.org

CHULA VISTA PEDIATRICS
Provider ID: 482034
 855 3RD AVE STE 2200
CHULA VISTA, CA
91911-1353
 Phone: 619-662-4100
Fax: 619-662-4196
 After Hours Phone:
619-662-4100
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: CHULA
VISTA PEDIATRICS
 Website: www.ihpsocal.org




**SAN YSIDRO HEALTH CHULA
VISTA**
Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
Fax: 619-425-1184
 After Hours Phone:
619-662-4100
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal



D1. Clínicas de salud con calificación federal

PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org


SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: NP95015413
NPI: 1598122871



Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org



SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: SP18192
NPI: 1598122871



Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org




SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: PA54404
NPI: 1598122871



Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org



SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: G80234
NPI: 1598122871



Accepting New Patients: Yes
 Site English Spoken: Yes

Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org




SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: NP12112
NPI: 1598122871

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA
91910-5736
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: G74728
NPI: 1598122871

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: G72486


NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: G59670

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: G57243

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: DPM2930


NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE
CHULA VISTA, CA
91910-5736

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: DDS102880


NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH CHULA VISTA

 Website: www.ihpsocal.org







CHULA VISTA FAMILY HLTH CTR








Provider ID: 206355






 251 LANDIS AVE
CHULA VISTA, CA



D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal






D1. Clínicas de salud con calificación federal

91910-2628
 Phone: 619-515-2500
 After Hours Phone:
619-515-2500
License Number: A73172
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR
 Website: www.fhcsd.org

**CHULA VISTA FAMILY HLTH
CTR**
Provider ID: 206355
 251 LANDIS AVE
CHULA VISTA, CA
91910-2628
 Phone: 619-515-2500
 After Hours Phone:
619-515-2500
License Number: A72005
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR
 Website: www.fhcsd.org



**CHULA VISTA FAMILY HLTH
CTR**
Provider ID: 206355
 251 LANDIS AVE
CHULA VISTA, CA
91910-2628
 Phone: 619-515-2500
 After Hours Phone:
619-515-2500
License Number: C174771
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N



 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR
 Website: www.fhcsd.org

**CHULA VISTA FAMILY HLTH
CTR**
Provider ID: 206355
 251 LANDIS AVE
CHULA VISTA, CA
91910-2628
 Phone: 619-515-2500
 After Hours Phone:
619-515-2500
License Number: A78355
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR
 Website: www.fhcsd.org

**CHULA VISTA FAMILY HLTH
CTR**
Provider ID: 206355
 251 LANDIS AVE
CHULA VISTA, CA
91910-2628
 Phone: 619-515-2500
 After Hours Phone:
619-515-2500
License Number: G78814
NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR
 Website: www.fhcsd.org

**CHULA VISTA FAMILY HLTH
CTR**
Provider ID: 206355
 251 LANDIS AVE
CHULA VISTA, CA
91910-2628
 Phone: 619-515-2500
 After Hours Phone:
619-515-2500
License Number: DC26269
NPI: 1134155377

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Accepting New Patients: Yes

- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR


 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500

 After Hours Phone:
619-515-2500

License Number: DPM4819

NPI: 1134155377

Accepting New Patients: Yes

- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR


 Website: www.fhcsd.org


CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA

91910-2628

 Phone: 619-515-2500

 After Hours Phone:
619-515-2500

License Number: NP10943

NPI: 1134155377

Accepting New Patients: Yes

- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR


 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500

 After Hours Phone:
619-515-2500

License Number: NM792

NPI: 1134155377

Accepting New Patients: Yes

- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR


 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500

 After Hours Phone:
619-515-2500

License Number: A153344

NPI: 1134155377

Accepting New Patients: Yes

- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR

 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500

 After Hours Phone:
619-515-2500

License Number: A154298

NPI: 1134155377

Accepting New Patients: Yes





































- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

<p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p>Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR</p> <p> <i>Website: www.fhcsd.org</i></p>	<p><i>Accepting New Patients: Yes</i></p> <p> <i>Site English Spoken: Yes</i></p> <p> <i>Site Languages(s) Spoken: Spanish</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL):</i></p>	<p>91910-2628</p> <p> <i>Phone: 619-515-2500</i></p> <p> <i>After Hours Phone: 619-515-2500</i></p> <p><i>License Number: A68463</i></p> <p><i>NPI: 1134155377</i></p>
<p>CHULA VISTA FAMILY HLTH CTR</p> <p><i>Provider ID: 206355</i></p> <p> 251 LANDIS AVE CHULA VISTA, CA 91910-2628</p> <p> <i>Phone: 619-515-2500</i></p> <p> <i>After Hours Phone: 619-515-2500</i></p> <p><i>License Number: A163464</i></p> <p><i>NPI: 1134155377</i></p> <p><i>Accepting New Patients: Yes</i></p> <p> <i>Site English Spoken: Yes</i></p> <p> <i>Site Languages(s) Spoken: Spanish</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL):</i></p>	<p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p>Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR</p> <p> <i>Website: www.fhcsd.org</i></p>	<p><i>Accepting New Patients: Yes</i></p> <p> <i>Site English Spoken: Yes</i></p> <p> <i>Site Languages(s) Spoken: Spanish</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL):</i></p>
<p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p>Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR</p> <p> <i>Website: www.fhcsd.org</i></p>	<p>CHULA VISTA FAMILY HLTH CTR</p> <p><i>Provider ID: 206355</i></p> <p> 251 LANDIS AVE CHULA VISTA, CA 91910-2628</p> <p> <i>Phone: 619-515-2500</i></p> <p> <i>After Hours Phone: 619-515-2500</i></p> <p><i>License Number: A177698</i></p> <p><i>NPI: 1134155377</i></p> <p><i>Accepting New Patients: Yes</i></p> <p> <i>Site English Spoken: Yes</i></p> <p> <i>Site Languages(s) Spoken: Spanish</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL):</i></p>	<p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p>Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR</p> <p> <i>Website: www.fhcsd.org</i></p>
<p>CHULA VISTA FAMILY HLTH CTR</p> <p><i>Provider ID: 206355</i></p> <p> 251 LANDIS AVE CHULA VISTA, CA 91910-2628</p> <p> <i>Phone: 619-515-2500</i></p> <p> <i>After Hours Phone: 619-515-2500</i></p> <p><i>License Number: A164859</i></p> <p><i>NPI: 1134155377</i></p>	<p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p>Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR</p> <p> <i>Website: www.fhcsd.org</i></p>	<p>CHULA VISTA FAMILY HLTH CTR</p> <p><i>Provider ID: 206355</i></p> <p> 251 LANDIS AVE CHULA VISTA, CA 91910-2628</p> <p> <i>Phone: 619-515-2500</i></p> <p> <i>After Hours Phone: 619-515-2500</i></p> <p><i>License Number: A178499</i></p> <p><i>NPI: 1134155377</i></p> <p><i>Accepting New Patients: Yes</i></p> <p> <i>Site English Spoken: Yes</i></p> <p> <i>Site Languages(s) Spoken: Spanish</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL):</i></p>
<p>CHULA VISTA FAMILY HLTH CTR</p> <p><i>Provider ID: 206355</i></p> <p> 251 LANDIS AVE CHULA VISTA, CA</p>	<p>CHULA VISTA FAMILY HLTH CTR</p> <p><i>Provider ID: 206355</i></p> <p> 251 LANDIS AVE CHULA VISTA, CA</p>	<p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p>Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR</p> <p> <i>Website: www.fhcsd.org</i></p>


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500

 After Hours Phone:
619-515-2500

License Number: A119689

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR

 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500

 After Hours Phone:
619-515-2500

License Number: A148014

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR


 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500

 After Hours Phone:
619-515-2500

License Number: A114181

NPI: 1134155377

Accepting New Patients: Yes


Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR


 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500

 After Hours Phone:
619-515-2500

License Number: A113001

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR

 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA
91910-2628

 Phone: 619-515-2500

 After Hours Phone:
619-515-2500

License Number: A118095

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR

 Website: www.fhcsd.org







CHULA VISTA FAMILY HLTH CTR








Provider ID: 206355

 251 LANDIS AVE
CHULA VISTA, CA

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal

91910-2628
 Phone: 619-515-2500
 After Hours Phone:
619-515-2500
License Number: 20A11535
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR
 Website: www.fhcsd.org





**CHULA VISTA FAMILY HLTH
CTR**
Provider ID: 206355
 251 LANDIS AVE
CHULA VISTA, CA
91910-2628
 Phone: 619-515-2500
 After Hours Phone:
619-515-2500
License Number: A108228
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR
 Website: www.fhcsd.org



**CHULA VISTA FAMILY HLTH
CTR**

Provider ID: 206355
 251 LANDIS AVE
CHULA VISTA, CA
91910-2628
 Phone: 619-515-2500
 After Hours Phone:
619-515-2500
License Number: 20A14919
NPI: 1134155377









Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: CHULA
VISTA FAMILY HLTH CTR
 Website: www.fhcsd.org

**SAN YSIDRO HEALTH CHULA
VISTA**

Provider ID: 427322
 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
Fax: (619) 425-6941
 After Hours Phone: (619)
662-4100
NPI: 1326486861
Accepting New Patients: Yes
Min/Max Age: 0\150
 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish, Tagalog
Cultural Competency: N
 Hours: M-F

8:00AM-5:00PM
SA 8:00AM-4:00PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP of
Southern Cal-PHP
 Website: www.syhealth.org/clinics/chula-vista-medic-al-plaza




**CHULA VISTA FAMILY HLTH
CTR**

Provider ID: 206355
 251 LANDIS AVE
CHULA VISTA, CA 91910
 Phone: (619) 515-2500
Fax: (619) 397-1161
 After Hours Phone: (619)
515-2500
NPI: 1346480837
Accepting New Patients: Yes
Min/Max Age: 0\150
 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish
Cultural Competency: N
 Hours: M-F
8:00AM-5:00PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: Family
Health Centers of San Diego
 Website: www.fhcsd.org
Email:
MARTHAO@FHCS.D.ORG
**SAN YSIDRO HEALTH SOUTH
BAY PEDIATRICS**



D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal


Provider ID: 664445

 280 E ST
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
Fax: (619) 426-2170
 After Hours Phone: (619)
662-4100
License Number: 550002394
NPI: 1184135873


Accepting New Patients: Yes
Min/Max Age: 0\21

 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: N

 Hours: M-F
8:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP of
Southern Cal-PHP

 Website: www.syhealth.org


FAMILY HLTH CTR SAN DIEGO-RICE FAM HC


Provider ID: 417641

 352 L ST
CHULA VISTA, CA 91911
 Phone: (619) 515-2325
Fax: (619) 420-0660
 After Hours Phone: (619)
515-2325

License Number: 550002305
NPI: 1083959464

Accepting New Patients: Yes
Min/Max Age: 0\150


 Site English Spoken: Y
Cultural Competency: N

 Hours: M-F
8:00AM-5:00PM

American Sign Language (ASL): NPI: 1609849074
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: Family
Health Centers of San Diego

 Website: www.fhcsd.org
Email: chantalt@fhcsd.org

EL CAJON

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185267

 165 S 1ST ST
EL CAJON, CA 92019-4795
 Phone: 619-312-0347
 After Hours Phone:
619-312-0347

License Number: A68184
NPI: 1609849074

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA
MAESTRA FAMILY CLINIC INC

 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185267

 165 S 1ST ST
EL CAJON, CA 92019-4795
 Phone: 619-312-0347
 After Hours Phone:
619-312-0347

License Number: PA58466

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA
MAESTRA FAMILY CLINIC INC

 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185267

 165 S 1ST ST
EL CAJON, CA 92019-4795
 Phone: 619-312-0347
 After Hours Phone:
619-312-0347


License Number: A123929

NPI: 1609849074

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N




 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA
MAESTRA FAMILY CLINIC INC

 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185267






 165 S 1ST ST
EL CAJON, CA 92019-4795
 Phone: 619-312-0347
 After Hours Phone:

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal





619-312-0347
License Number: 20A14222
NPI: 1609849074
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LA
MAESTRA FAMILY CLINIC INC
 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC






Provider ID: 185267
 165 S 1ST ST
EL CAJON, CA 92019-4795
 Phone: 619-312-0347
 After Hours Phone:
619-312-0347
License Number: 20A6433
NPI: 1609849074
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LA
MAESTRA FAMILY CLINIC INC
 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

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





 Phone: 619-269-1262
 After Hours Phone:
619-269-1262
License Number: C55979
NPI: 1609849074
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LA
MAESTRA FAMILY CLINIC INC
 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC






Provider ID: 185267
 165 S 1ST ST
EL CAJON, CA 92019-4795
 Phone: 619-312-0348
 After Hours Phone:
619-312-0348
License Number: G45632
NPI: 1609849074
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LA
MAESTRA FAMILY CLINIC INC
 Website: www.lamaestra.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007
 Phone: 619-515-2498
 After Hours Phone:
619-515-2498
License Number: PT295173
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON
 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340
 525 E MAIN ST
EL CAJON, CA 92020-4007
 Phone: 619-515-2498
 After Hours Phone:
619-515-2498
License Number: RN810863
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON
 Website: www.fhcsd.org

FAMILY HLTH CTR SAN

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

DIEGO-EL CAJON

Provider ID: 418340

525 E MAIN ST
EL CAJON, CA 92020-4007

Phone: 619-515-2498

Fax: 619-269-0191

After Hours Phone:
619-515-2498

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

525 E MAIN ST
EL CAJON, CA 92020-4007

Phone: 619-515-2498

After Hours Phone:
619-515-2498

License Number: PT292482

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

525 E MAIN ST
EL CAJON, CA 92020-4007

Phone: 619-515-2498

After Hours Phone:
619-515-2498

License Number: PA20396

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

525 E MAIN ST
EL CAJON, CA 92020-4007

Phone: 619-515-2498

After Hours Phone:
619-515-2498

License Number: PA23258

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL

CAJON

Website: www.fhcsd.org

CENTRO MEDICO EL CAJON

Provider ID: 478971

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

Phone: 619-401-0404

After Hours Phone:
619-401-0404

License Number: A158569

NPI: 1134144165

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: CENTRO
MEDICO EL CAJON

Website: N/A

CENTRO MEDICO EL CAJON

Provider ID: 478971

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

Phone: 619-401-0404

After Hours Phone:
619-401-0404

License Number: A151547

NPI: 1134144165

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: CENTRO
MEDICO EL CAJON

Website: N/A


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal


FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

Fax: 619-269-0191

 After Hours Phone:
619-515-2498

License Number: 20A19473

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

 Website: www.fhcsd.org


FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

Fax: 619-269-0191

 After Hours Phone:
619-515-2498

License Number: 550003553

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER


*Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON*


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2499

 After Hours Phone:
619-515-2499

License Number: RN428876

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

 Website: www.fhcsd.org

CENTRO MEDICO EL CAJON

Provider ID: 478971

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

 Phone: 619-873-8940

 After Hours Phone:
619-873-8940


License Number: DPM1536

NPI: 1134144165

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: CENTRO
MEDICO EL CAJON

 Website: N/A

CENTRO MEDICO EL CAJON

Provider ID: 478971

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

 Phone: 619-873-8940

 After Hours Phone:
619-873-8940

License Number: PA16673

NPI: 1134144165

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: CENTRO
MEDICO EL CAJON

 Website: N/A


CENTRO MEDICO EL CAJON

Provider ID: 478971

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

 Phone: 619-873-8940

Fax: 619-401-0522


 After Hours Phone:
619-873-8940

NPI: 1134144165

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal


Medical Group/IPA: CENTRO
MEDICO EL CAJON

 Website: N/A

CENTRO MEDICO EL CAJON

Provider ID: 478971

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

 Phone: 619-873-8940

Fax: 619-401-0522

 After Hours Phone:
619-873-8940

License Number: 550000430

NPI: 1134144165

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: Yes

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: CENTRO
MEDICO EL CAJON

 Website: N/A

CENTRO MEDICO EL CAJON

Provider ID: 478971

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

 Phone: 619-401-0404

 After Hours Phone:

619-401-0404

License Number: A98486

NPI: 1134144165

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: CENTRO


MEDICO EL CAJON

 Website: N/A

CENTRO MEDICO EL CAJON

Provider ID: 478971

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

 Phone: 619-401-0404

 After Hours Phone:

619-401-0404

License Number: G52812

NPI: 1134144165

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: CENTRO
MEDICO EL CAJON

 Website: N/A

CENTRO MEDICO EL CAJON

Provider ID: 478971

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

 Phone: 619-401-0404

 After Hours Phone:

619-401-0404

License Number: NP95001710

NPI: 1134144165

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: CENTRO
MEDICO EL CAJON

 Website: N/A

CENTRO MEDICO EL CAJON

Provider ID: 478971

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

 Phone: 619-873-8940

 After Hours Phone:

619-873-8940

License Number: A113241

NPI: 1134144165

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: CENTRO
MEDICO EL CAJON

 Website: N/A

CENTRO MEDICO EL CAJON

Provider ID: 478971

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

 Phone: 619-873-8940

 After Hours Phone:

619-873-8940

License Number: A114674

NPI: 1134144165

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: CENTRO
MEDICO EL CAJON

 Website: N/A


CENTRO MEDICO EL CAJON

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Provider ID: 478971

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

 Phone: 619-873-8940

 After Hours Phone:
619-873-8940

License Number: 20A11733

NPI: 1134144165


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: CENTRO

MEDICO EL CAJON


 Website: N/A


FAMILY HLTH CTR SAN

DIEGO-EL CAJON

Provider ID: 418340

 526 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: A163464

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY

HLTH CTR SAN DIEGO-EL

CAJON


 Website: www.fhcsd.org


FAMILY HLTH CTR SAN

DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: NP95021154

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY

HLTH CTR SAN DIEGO-EL

CAJON


 Website: www.fhcsd.org


FAMILY HLTH CTR SAN

DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: NP95013978

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY

HLTH CTR SAN DIEGO-EL

CAJON


 Website: www.fhcsd.org


FAMILY HLTH CTR SAN

DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: NP95009292

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY

HLTH CTR SAN DIEGO-EL

CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: NP95009180

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY

HLTH CTR SAN DIEGO-EL

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal


CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: NP95007000

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: G78814


NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No


American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY


HLTH CTR SAN DIEGO-EL
CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: DPM5661

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: NM1721

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: NP15444

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: NP95000205

NPI: 1134155377

Accepting New Patients: Yes




Site English Spoken: Yes

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340
 525 E MAIN ST
EL CAJON, CA 92020-4007
 *Phone: 619-515-2498*
 *After Hours Phone: 619-515-2498*
License Number: A83390
NPI: 1134155377

Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340
 525 E MAIN ST
EL CAJON, CA 92020-4007
 *Phone: 619-515-2498*
 *After Hours Phone: 619-515-2498*
License Number: A68463
NPI: 1134155377

Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
 *Website: www.fhcsd.org*




FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340
 525 E MAIN ST
EL CAJON, CA 92020-4007
 *Phone: 619-515-2498*
 *After Hours Phone: 619-515-2498*
License Number: A72005
NPI: 1134155377




Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340
 525 E MAIN ST
EL CAJON, CA 92020-4007
 *Phone: 619-515-2498*
 *After Hours Phone: 619-515-2498*


License Number: C174771
NPI: 1134155377
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340
 525 E MAIN ST
EL CAJON, CA 92020-4007
 *Phone: 619-515-2498*
 *After Hours Phone: 619-515-2498*
License Number: DC33869
NPI: 1134155377






Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-EL CAJON







Provider ID: 418340
 525 E MAIN ST
EL CAJON, CA 92020-4007

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal







D1. Clínicas de salud con calificación federal

 Phone: 619-515-2498
 After Hours Phone:
619-515-2498
License Number: DC33150
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON
 Website: www.fhcsd.org







FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340
 525 E MAIN ST
EL CAJON, CA 92020-4007
 Phone: 619-515-2498
 After Hours Phone:
619-515-2498
License Number: A178499
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON
 Website: www.fhcsd.org







FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340
 525 E MAIN ST
EL CAJON, CA 92020-4007
 Phone: 619-515-2498
 After Hours Phone:
619-515-2498
License Number: A175325
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON
 Website: www.fhcsd.org






FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340
 525 E MAIN ST
EL CAJON, CA 92020-4007
 Phone: 619-515-2498
 After Hours Phone:
619-515-2498
License Number: A164859
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON
 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON


Provider ID: 418340
 525 E MAIN ST
EL CAJON, CA 92020-4007
 Phone: 619-515-2498
 After Hours Phone:
619-515-2498
License Number: A152462
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON
 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340
 525 E MAIN ST
EL CAJON, CA 92020-4007
 Phone: 619-515-2498
 After Hours Phone:
619-515-2498
License Number: A154298
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: A146838

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498


License Number: A148014

NPI: 1134155377

Accepting New Patients: Yes


Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY

HLTH CTR SAN DIEGO-EL
CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: A147976

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: A144974

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: A127798

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: A134303

NPI: 1134155377

Accepting New Patients: Yes


Site English Spoken: Yes
Cultural Competency: No

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal




American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340
 525 E MAIN ST
EL CAJON, CA 92020-4007
 Phone: 619-515-2498
 After Hours Phone: 619-515-2498
License Number: A138815
NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340
 525 E MAIN ST
EL CAJON, CA 92020-4007
 Phone: 619-515-2498
 After Hours Phone: 619-515-2498
License Number: A114181
NPI: 1134155377
Accepting New Patients: Yes



Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
 Website: www.fhcsd.org



FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340
 525 E MAIN ST
EL CAJON, CA 92020-4007
 Phone: 619-515-2498
 After Hours Phone: 619-515-2498
License Number: A118095
NPI: 1134155377






Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON


Provider ID: 418340
 525 E MAIN ST
EL CAJON, CA 92020-4007
 Phone: 619-515-2498
 After Hours Phone: 619-515-2498
License Number: A116680

NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
 Website: www.fhcsd.org

CHASE AVENUE FAMILY HEALTH CTRS INC



Provider ID: 206354
 1111 W CHASE AVE
EL CAJON, CA 92020-5710
 Phone: 619-515-2499
Fax: 619-593-7164
 After Hours Phone: 619-515-2499
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: CHASE AVENUE FAMILY HEALTH CTRS INC
 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340
 525 E MAIN ST

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

EL CAJON, CA 92020-4007
 Phone: 619-515-2498
 After Hours Phone:
619-515-2498
License Number: 20A11535
NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

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

License Number: 20A13060
NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007
 Phone: 619-515-2300
 After Hours Phone:
619-515-2300

License Number: PT293536

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

 Website: www.fhcsd.org

CHASE AVENUE FAMILY HEALTH CTRS INC

Provider ID: 206354

 1111 W CHASE AVE
EL CAJON, CA 92020-5710
 Phone: 619-515-2499
 After Hours Phone:
619-515-2499

License Number: NP95007253

NPI: 1134155377

Accepting New Patients: Yes


Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: CHASE
AVENUE FAMILY HEALTH
CTRS INC

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

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


License Number: A113001

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

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

License Number: A108228

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal


HLTH CTR SAN DIEGO-EL CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: 20A7241

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: A107093

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498


License Number: 20A14919

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 525 E MAIN ST
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:
619-515-2498

License Number: 20A13745

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-EL
CAJON

 Website: www.fhcsd.org

LA MAESTRA CHC EL CAJON BROADWAY

Provider ID: 418501

 1032 BROADWAY
EL CAJON, CA 92021-7416

 Phone: 619-795-5991

 After Hours Phone:
619-795-5991


License Number: 20A14222

NPI: 1609849074

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LA
MAESTRA CHC EL CAJON
BROADWAY


 Website: www.lamaestra.org

LA MAESTRA CHC EL CAJON BROADWAY

Provider ID: 418501

 1032 BROADWAY
EL CAJON, CA 92021-7416

 Phone: 619-795-5991

 After Hours Phone:
619-795-5991

License Number: A123929

NPI: 1609849074

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA

MAESTRA CHC EL CAJON

BROADWAY


 Website: www.lamaestra.org

LA MAESTRA CHC EL CAJON BROADWAY

Provider ID: 418501

 1032 BROADWAY

EL CAJON, CA 92021-7416

 Phone: 619-795-5991

 After Hours Phone: 619-795-5991

License Number: 20A6433

NPI: 1609849074

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA

MAESTRA CHC EL CAJON

BROADWAY


 Website: www.lamaestra.org

CHASE AVENUE FAMILY HEALTH CTRS INC

Provider ID: 206354

 1111 W CHASE AVE

EL CAJON, CA 92020-5710

 Phone: 619-515-2499

 After Hours Phone:

619-515-2499

License Number: A110192

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: CHASE

AVENUE FAMILY HEALTH

CTRS INC


 Website: www.fhcsd.org


CHASE AVENUE FAMILY HEALTH CTRS INC

Provider ID: 206354

 1111 W CHASE AVE

EL CAJON, CA 92020-5710

 Phone: 619-515-2499

 After Hours Phone: 619-515-2499

License Number: 20A13700

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: CHASE

AVENUE FAMILY HEALTH

CTRS INC


 Website: www.fhcsd.org

LA MAESTRA CHC EL CAJON BROADWAY

Provider ID: 418501

 1032 BROADWAY

EL CAJON, CA 92021-7416

 Phone: 619-795-5991

Fax: 619-795-5992

 After Hours Phone: 619-795-5991

License Number: 550003567

NPI: 1609849074


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA

MAESTRA CHC EL CAJON

BROADWAY


 Website: www.lamaestra.org

CHASE AVENUE FAMILY HEALTH CTRS INC

Provider ID: 206354

 1111 W CHASE AVE

EL CAJON, CA 92020-5710

 Phone: 619-515-2499

 After Hours Phone: 619-515-2499

License Number: A170055

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):

N




 Accessibility: CONTACT

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal



D1. Clínicas de salud con calificación federal

PROVIDER
Medical Group/IPA: CHASE
AVENUE FAMILY HEALTH
CTRS INC
 Website: www.fhcsd.org

CHASE AVENUE FAMILY HEALTH CTRS INC

Provider ID: 206354
 1111 W CHASE AVE
EL CAJON, CA 92020-5710
 Phone: 619-515-2499
 After Hours Phone:
619-515-2499
License Number: A138887
NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish




Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: CHASE
AVENUE FAMILY HEALTH
CTRS INC


 Website: www.fhcsd.org

CHASE AVENUE FAMILY HEALTH CTRS INC

Provider ID: 206354
 1111 W CHASE AVE
EL CAJON, CA 92020-5710
 Phone: 619-515-2499
 After Hours Phone:
619-515-2499
License Number: DC33150
NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Spanish




Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: CHASE
AVENUE FAMILY HEALTH
CTRS INC

 Website: www.fhcsd.org

LA MAESTRA CHC EL CAJON BROADWAY

Provider ID: 418501
 1032 BROADWAY
EL CAJON, CA 92021-7416
 Phone: 619-795-5991
 After Hours Phone:
619-795-5991

License Number: A160760
NPI: 1609849074
Accepting New Patients: Yes




 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA
MAESTRA CHC EL CAJON
BROADWAY

 Website: www.lamaestra.org

LA MAESTRA CHC EL CAJON BROADWAY


Provider ID: 418501
 1032 BROADWAY
EL CAJON, CA 92021-7416
 Phone: 619-795-5991
 After Hours Phone:

619-795-5991
License Number: G50634
NPI: 1609849074




Accepting New Patients: Yes
 Site English Spoken: Yes

Cultural Competency: No
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA
MAESTRA CHC EL CAJON
BROADWAY
 Website: www.lamaestra.org

LA MAESTRA CHC EL CAJON BROADWAY

Provider ID: 418501
 1032 BROADWAY
EL CAJON, CA 92021-7416
 Phone: 619-795-5991
 After Hours Phone:
619-795-5991

License Number: PA21625
NPI: 1609849074
Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA
MAESTRA CHC EL CAJON
BROADWAY

 Website: www.lamaestra.org


LA MAESTRA CHC EL CAJON BROADWAY


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Provider ID: 418501

 1032 BROADWAY
EL CAJON, CA 92021-7416

 Phone: 619-795-5991

 After Hours Phone:
619-795-5991

License Number: PA58466

NPI: 1609849074

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA

MAESTRA CHC EL CAJON


BROADWAY

 Website: www.lamaestra.org

LA MAESTRA CHC EL CAJON BROADWAY

Provider ID: 418501

 1032 BROADWAY
EL CAJON, CA 92021-7416

 Phone: 619-795-5991

Fax: 619-795-5992

 After Hours Phone:
619-795-5991

NPI: 1609849074


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA

MAESTRA CHC EL CAJON

BROADWAY


 Website: www.lamaestra.org

g

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN


YSIDRO HEALTH EL CAJON

 Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: 20A10964

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

Medical Group/IPA: SAN


YSIDRO HEALTH EL CAJON


 Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: 550002514

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN


YSIDRO HEALTH EL CAJON

 Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A120584

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes


Site Languages(s) Spoken:
Spanish, Tagalog

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Cultural Competency: No

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*


*Medical Group/IPA: SAN
YSIDRO HEALTH EL CAJON*


 *Website: N/A*

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 *875 EL CAJON BLVD
EL CAJON, CA 92020-5714*

 *Phone: 619-662-4100*

 *After Hours Phone:
619-662-4100*

License Number: A101888

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes

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

Cultural Competency: No

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*


*Medical Group/IPA: SAN
YSIDRO HEALTH EL CAJON*


 *Website: N/A*

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 *875 EL CAJON BLVD
EL CAJON, CA 92020-5714*

 *Phone: 619-662-4100*

 *After Hours Phone:
619-662-4100*

License Number: A131365

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

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

Cultural Competency: No

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*


*Medical Group/IPA: SAN
YSIDRO HEALTH EL CAJON*


 *Website: N/A*

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 *875 EL CAJON BLVD
EL CAJON, CA 92020-5714*

 *Phone: 619-662-4100*

 *After Hours Phone:
619-662-4100*

License Number: A127706

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

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

Cultural Competency: No

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*


*Medical Group/IPA: SAN
YSIDRO HEALTH EL CAJON*

 *Website: N/A*

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 *875 EL CAJON BLVD
EL CAJON, CA 92020-5714*

 *Phone: 619-662-4100*

 *After Hours Phone:
619-662-4100*

License Number: A101773

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

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

Cultural Competency: No

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*


*Medical Group/IPA: SAN
YSIDRO HEALTH EL CAJON*

 *Website: N/A*

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 *875 EL CAJON BLVD
EL CAJON, CA 92020-5714*

 *Phone: 619-662-4100*

 *After Hours Phone:
619-662-4100*

License Number: A47906

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes

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

Cultural Competency: No

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

*Medical Group/IPA: SAN
YSIDRO HEALTH EL CAJON*

 *Website: N/A*


SAN YSIDRO HEALTH EL CAJON


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A79338

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH EL CAJON


 Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A134995

NPI: 1598122871

Accepting New Patients: Yes


Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH EL CAJON

 Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A40473

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH EL CAJON

 Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A96002

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH EL CAJON


 Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A87650

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH EL CAJON

 Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: G43179

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal

Spanish, Tagalog
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH EL CAJON
 Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: C144411

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH EL CAJON

 Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: PT42665

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH EL CAJON

 Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: NP95009329

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH EL CAJON


 Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: NP95012943

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH EL CAJON

 Website: N/A

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD
EL CAJON, CA 92020-5714

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: PT40025

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HEALTH EL CAJON

 Website: N/A

FAMILY HLTH CTR SAN

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

DIEGO-EL CAJON

Provider ID: 418340

525 E MAIN ST
EL CAJON, CA 92020

Phone: (619) 515-2498

Fax: (619) 269-0191

After Hours Phone: (619)
515-2498

License Number: 550003553

NPI: 1932561198

Accepting New Patients: Yes
Min/Max Age: 0\150

Site English Spoken: Y
Cultural Competency: N

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

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: Family
Health Centers of San Diego

Website: www.fhcsd.org

Email: janellek@fhcsd.org

SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

875 EL CAJON BLVD
EL CAJON, CA 92020

Phone: (619) 662-4100

Fax: (619) 785-3356

After Hours Phone: (619)
662-4100

License Number: 550002514

NPI: 1568845741

Accepting New Patients: Yes
Min/Max Age: 0\150

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Arabic, Farsi,

Russian, Latin

Cultural Competency: N

Hours: M-F
8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP of
Southern Cal-PHP

Website: www.syhealth.org

LA MAESTRA CHC-REA AVE

Provider ID: 664824

181 REA AVE
EL CAJON, CA 92020

Phone: (619) 312-0347

Fax: (619) 510-4649

After Hours Phone: (619)
312-0347

License Number: 090000378

NPI: 1609849074

Accepting New Patients: Yes
Min/Max Age: 0\999

Site English Spoken: Y
Cultural Competency: N

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

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: La
Maestra Family Clinic

Website: www.lamaestra.org

LA MAESTRA CHC EL CAJON BROADWAY

Provider ID: 418501

1032 BROADWAY
EL CAJON, CA 92021

Phone: (619) 795-5991

Fax: (619) 795-5992

After Hours Phone: (619)
795-5991

License Number: 550003567
NPI: 1134590086

Accepting New Patients: Yes
Min/Max Age: 0\150

Site English Spoken: Y
Cultural Competency: N

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

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: La
Maestra Family Clinic

Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185267

165 S 1ST ST
EL CAJON, CA 92019

Phone: (619) 312-0347

Fax: (619) 749-5480

After Hours Phone: (619)
312-0347

NPI: 1336353721

Accepting New Patients: Yes
Min/Max Age: 0\150

Site English Spoken: Y
Cultural Competency: N

Hours: M-TU
8:00AM-5:00PM
TH-F 8:00AM-5:00PM

American Sign Language (ASL):
N


Accessibility: CONTACT
PROVIDER

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Medical Group/IPA: La
Maestra Family Clinic
 Website: www.lamaestra.org
Email:
aschmaltz@lamaestra.org



CHASE AVENUE FAMILY HEALTH CTRS INC



Provider ID: 206354
 1111 W CHASE AVE
EL CAJON, CA 92020
 Phone: (619) 515-2499
Fax: (619) 593-7164
 After Hours Phone: (619)
515-2499
NPI: 1104861681
Accepting New Patients: Yes
Min/Max Age: 0\150
 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish
Cultural Competency: N

American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: Family
Health Centers of San Diego
 Website: www.fhcsd.org
Email: jaquelinca@fhcsd.org






ENCINITAS

TRUECARE


Provider ID: 480243
 1130 2ND ST
ENCINITAS, CA
92024-5008
 Phone: 760-753-7842
Fax: 760-736-8740
 After Hours Phone:



760-753-7842
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: TRUECARE
 Website: N/A

TRUECARE






Provider ID: 480243
 1130 2ND ST
ENCINITAS, CA
92024-5008
 Phone: 760-753-7842
Fax: 760-736-8740
 After Hours Phone:
760-753-7842
License Number: 80000638
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: TRUECARE
 Website: N/A

TRUECARE




Provider ID: 480243
 1130 2ND ST
ENCINITAS, CA
92024-5008
 Phone: 760-736-6767
 After Hours Phone:
760-736-6767
License Number: NP21368

NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: TRUECARE
 Website: N/A

TRUECARE

Provider ID: 480243
 1130 2ND ST
ENCINITAS, CA
92024-5008
 Phone: 760-736-6767
 After Hours Phone:
760-736-6767
License Number: PA22667
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: TRUECARE
 Website: N/A

TRUECARE

Provider ID: 480243
 1130 2ND ST
ENCINITAS, CA
92024-5008
 Phone: 760-736-6767
 After Hours Phone:
760-736-6767
License Number: PA19437
NPI: 1598122871
Accepting New Patients: Yes





























D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: TRUECARE Website: N/A	American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: TRUECARE Website: N/A	Accessibility: CONTACT PROVIDER Medical Group/IPA: TRUECARE Website: N/A
TRUECARE Provider ID: 480243 1130 2ND ST ENCINITAS, CA 92024-5008 Phone: 760-753-7842 After Hours Phone: 760-753-7842 License Number: A116562 NPI: 1598122871 Accepting New Patients: Yes Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: TRUECARE Website: N/A	TRUECARE Provider ID: 480243 1130 2ND ST ENCINITAS, CA 92024-5008 Phone: 760-753-7842 After Hours Phone: 760-753-7842 License Number: A103940 NPI: 1598122871 Accepting New Patients: Yes Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: TRUECARE Website: N/A	TRUECARE Provider ID: 480243 1130 2ND ST ENCINITAS, CA 92024-5008 Phone: 760-736-6767 After Hours Phone: 760-736-6767 License Number: DC29074 NPI: 1598122871 Accepting New Patients: Yes Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: TRUECARE Website: N/A
TRUECARE Provider ID: 480243 1130 2ND ST ENCINITAS, CA 92024-5008 Phone: 760-753-7842 After Hours Phone: 760-753-7842 License Number: C54157 NPI: 1598122871 Accepting New Patients: Yes Site English Spoken: Yes Cultural Competency: No	TRUECARE Provider ID: 480243 1130 2ND ST ENCINITAS, CA 92024-5008 Phone: 760-736-6767 After Hours Phone: 760-736-6767 License Number: 20A17306 NPI: 1598122871 Accepting New Patients: Yes Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N	ESCONDIDO
	NEIGHBORHOOD HEALTHCARE ESCONDIDO Provider ID: 206270 460 N ELM ST ESCONDIDO, CA 92025-3002 Phone: 760-520-8100 After Hours Phone: 760-520-8100 License Number: A159727 NPI: 1598122871 Accepting New Patients: Yes Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL):	

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal


<p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: NEIGHBORHOOD HEALTHCARE ESCONDIDO</i></p> <p> <i>Website: www.ihpsocal.org</i></p> <p>NEIGHBORHOOD HEALTHCARE ESCONDIDO</p> <p><i>Provider ID: 206270</i></p> <p> 460 N ELM ST ESCONDIDO, CA 92025-3002</p> <p> <i>Phone: 760-520-8100</i></p> <p> <i>After Hours Phone: 760-520-8100</i></p> <p><i>License Number: A45413</i></p> <p><i>NPI: 1598122871</i></p> <p><i>Accepting New Patients: Yes</i></p> <p> <i>Site English Spoken: Yes</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: NEIGHBORHOOD HEALTHCARE ESCONDIDO</i></p> <p> <i>Website: www.ihpsocal.org</i></p> <p>NEIGHBORHOOD HEALTHCARE ESCONDIDO</p> <p><i>Provider ID: 206270</i></p> <p> 460 N ELM ST ESCONDIDO, CA 92025-3002</p> <p> <i>Phone: 760-520-8100</i></p> <p> <i>After Hours Phone: 760-520-8100</i></p> <p><i>License Number: A152372</i></p> <p><i>NPI: 1598122871</i></p>	<p><i>Accepting New Patients: Yes</i></p> <p> <i>Site English Spoken: Yes</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: NEIGHBORHOOD HEALTHCARE ESCONDIDO</i></p> <p> <i>Website: www.ihpsocal.org</i></p> <p>NEIGHBORHOOD HEALTHCARE ESCONDIDO</p> <p><i>Provider ID: 206270</i></p> <p> 460 N ELM ST ESCONDIDO, CA 92025-3002</p> <p> <i>Phone: 760-520-8100</i></p> <p> <i>After Hours Phone: 760-520-8100</i></p> <p><i>License Number: A139490</i></p> <p><i>NPI: 1598122871</i></p> <p><i>Accepting New Patients: Yes</i></p> <p> <i>Site English Spoken: Yes</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: NEIGHBORHOOD HEALTHCARE ESCONDIDO</i></p> <p> <i>Website: www.ihpsocal.org</i></p> <p>NEIGHBORHOOD HEALTHCARE ESCONDIDO</p> <p><i>Provider ID: 206270</i></p> <p> 460 N ELM ST ESCONDIDO, CA 92025-3002</p> <p> <i>Phone: 760-520-8100</i></p>	<p> <i>After Hours Phone: 760-520-8100</i></p> <p><i>License Number: A120771</i></p> <p><i>NPI: 1598122871</i></p> <p><i>Accepting New Patients: Yes</i></p> <p> <i>Site English Spoken: Yes</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: NEIGHBORHOOD HEALTHCARE ESCONDIDO</i></p> <p> <i>Website: www.ihpsocal.org</i></p> <p>NEIGHBORHOOD HEALTHCARE ESCONDIDO</p> <p><i>Provider ID: 206270</i></p> <p> 460 N ELM ST ESCONDIDO, CA 92025-3002</p> <p> <i>Phone: 760-520-8100</i></p> <p> <i>After Hours Phone: 760-520-8100</i></p> <p><i>License Number: DC28605</i></p> <p><i>NPI: 1598122871</i></p> <p><i>Accepting New Patients: Yes</i></p> <p> <i>Site English Spoken: Yes</i></p> <p><i>Cultural Competency: No</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: NEIGHBORHOOD HEALTHCARE ESCONDIDO</i></p> <p> <i>Website: www.ihpsocal.org</i></p> <p>NEIGHBORHOOD HEALTHCARE ESCONDIDO</p>
--	---	--


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Provider ID: 206270

 460 N ELM ST
ESCONDIDO, CA
92025-3002

 Phone: 760-520-8100

 After Hours Phone:
760-520-8100

License Number: DC12036

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD


HEALTHCARE ESCONDIDO


 Website: www.ihpsocal.org


NEIGHBORHOOD

HEALTHCARE ESCONDIDO

Provider ID: 206270

 460 N ELM ST
ESCONDIDO, CA
92025-3002

 Phone: 760-520-8100

 After Hours Phone:
760-520-8100

License Number: A94128

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE ESCONDIDO

 Website: www.ihpsocal.org


NEIGHBORHOOD

HEALTHCARE ESCONDIDO

Provider ID: 206270

 460 N ELM ST
ESCONDIDO, CA
92025-3002

 Phone: 760-520-8100

 After Hours Phone:
760-520-8100

License Number: A82173

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE ESCONDIDO


 Website: www.ihpsocal.org


NEIGHBORHOOD

HEALTHCARE ESCONDIDO

Provider ID: 206270

 460 N ELM ST
ESCONDIDO, CA
92025-3002

 Phone: 760-520-8100

 After Hours Phone:
760-520-8100

License Number: A61751

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE ESCONDIDO


 Website: www.ihpsocal.org


NEIGHBORHOOD

HEALTHCARE ESCONDIDO

Provider ID: 206270

 460 N ELM ST
ESCONDIDO, CA
92025-3002

 Phone: 760-520-8100

 After Hours Phone:
760-520-8100

License Number: A78116

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE ESCONDIDO


 Website: www.ihpsocal.org


NEIGHBORHOOD

HEALTHCARE ESCONDIDO

Provider ID: 206270

 460 N ELM ST
ESCONDIDO, CA
92025-3002

 Phone: 760-520-8100

 After Hours Phone:
760-520-8100

License Number: A119661

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Cultural Competency: No

American Sign Language (ASL): License Number: 20A14292

N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA:

NEIGHBORHOOD


HEALTHCARE ESCONDIDO


 *Website: www.ihpsocal.org*

NEIGHBORHOOD

HEALTHCARE GRAND AVE

Provider ID: 206269

 1001 E GRAND AVE
ESCONDIDO, CA
92025-4604

 *Phone: 760-520-8200*

Fax: 360-462-2749

 *After Hours Phone:
760-520-8200*

License Number: 80000397

NPI: 1598122871


Accepting New Patients: Yes

 *Site English Spoken: Yes*

Cultural Competency: No

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA:

NEIGHBORHOOD


HEALTHCARE GRAND AVE


 *Website: www.ihpsocal.org*

NEIGHBORHOOD

HEALTHCARE ESCONDIDO

Provider ID: 206270

 460 N ELM ST
ESCONDIDO, CA
92025-3002

 *Phone: 760-520-8100*

 *After Hours Phone:*

760-520-8100

License Number: 20A14292

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*

Cultural Competency: No

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA:

NEIGHBORHOOD


HEALTHCARE ESCONDIDO


 *Website: www.ihpsocal.org*


NEIGHBORHOOD

HEALTHCARE ESCONDIDO

Provider ID: 206270

 460 N ELM ST
ESCONDIDO, CA
92025-3002

 *Phone: 760-520-8100*

 *After Hours Phone:
760-520-8100*

License Number: A107557

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*

Cultural Competency: No

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE ESCONDIDO


 *Website: www.ihpsocal.org*


NEIGHBORHOOD

HEALTHCARE ESCONDIDO

Provider ID: 206270

 460 N ELM ST
ESCONDIDO, CA
92025-3002

 *Phone: 760-520-8100*

 *After Hours Phone:
760-520-8100*

License Number: A109655

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*

Cultural Competency: No

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA:

NEIGHBORHOOD


HEALTHCARE ESCONDIDO


 *Website: www.ihpsocal.org*

NEIGHBORHOOD


HEALTHCARE GRAND AVE

Provider ID: 206269

 1001 E GRAND AVE
ESCONDIDO, CA
92025-4604

 *Phone: 760-520-8200*

Fax: 360-462-2749

 *After Hours Phone:
760-520-8200*

License Number: 550000697

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*

Cultural Competency: No

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE GRAND AVE

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal


 Website: www.ihpsocal.org

NEIGHBORHOOD


HEALTHCARE GRAND AVE

Provider ID: 206269

 1001 E GRAND AVE
ESCONDIDO, CA
92025-4604

 Phone: 760-520-8200

Fax: 360-462-2749

 After Hours Phone:
760-520-8200


License Number: 80000483

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE GRAND AVE


 Website: www.ihpsocal.org


NEIGHBORHOOD

HEALTHCARE GRAND AVE

Provider ID: 206269

 1001 E GRAND AVE
ESCONDIDO, CA
92025-4604

 Phone: 760-520-8200

 After Hours Phone:
760-520-8200

License Number: A94128

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE GRAND AVE


 Website: www.ihpsocal.org


NEIGHBORHOOD

HEALTHCARE GRAND AVE

Provider ID: 206269

 1001 E GRAND AVE
ESCONDIDO, CA
92025-4604

 Phone: 760-520-8200

 After Hours Phone:
760-520-8200


License Number: PA51508

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD


HEALTHCARE GRAND AVE


 Website: www.ihpsocal.org

NEIGHBORHOOD


HEALTHCARE GRAND AVE

Provider ID: 206269

 1001 E GRAND AVE
ESCONDIDO, CA
92025-4604


 Phone: 760-520-8200

Fax: 360-462-2749

 After Hours Phone:
760-520-8200

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD


HEALTHCARE GRAND AVE


 Website: www.ihpsocal.org


NEIGHBORHOOD

HEALTHCARE GRAND AVE

Provider ID: 206269

 1001 E GRAND AVE
ESCONDIDO, CA
92025-4604

 Phone: 760-520-8200

 After Hours Phone:
760-520-8200

License Number: A101773

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD


HEALTHCARE GRAND AVE


 Website: www.ihpsocal.org


NEIGHBORHOOD

HEALTHCARE GRAND AVE

Provider ID: 206269

 1001 E GRAND AVE
ESCONDIDO, CA
92025-4604

 Phone: 760-520-8200






 After Hours Phone:


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal


760-520-8200
License Number: A161074
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE GRAND AVE
 Website: www.ihpsocal.org






NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY




Provider ID: 206271
 728 E VALLEY PKWY
ESCONDIDO, CA
92025-3052
 Phone: 760-737-6900
Fax: 360-462-2748
 After Hours Phone:
760-737-6900
License Number: 80000158
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY
 Website: N/A

**NEIGHBORHOOD
HEALTHCARE ESCONDIDO**
Provider ID: 206270
 460 N ELM ST
ESCONDIDO, CA
92025-3002
 Phone: 760-520-8100
 After Hours Phone:
760-520-8100
License Number: G61829
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE ESCONDIDO
 Website: www.ihpsocal.org

**NEIGHBORHOOD
HEALTHCARE ESCONDIDO**
Provider ID: 206270
 460 N ELM ST
ESCONDIDO, CA
92025-3002
 Phone: 760-520-8100
Fax: 360-466-2745
 After Hours Phone:
760-520-8100
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA:

**NEIGHBORHOOD
HEALTHCARE ESCONDIDO**
 Website: www.ihpsocal.org

**NEIGHBORHOOD
HEALTHCARE ESCONDIDO**
Provider ID: 206270
 460 N ELM ST
ESCONDIDO, CA
92025-3002
 Phone: 760-520-8100
Fax: 360-466-2745
 After Hours Phone:
760-520-8100
License Number: 80000397
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE ESCONDIDO
 Website: www.ihpsocal.org







**NEIGHBORHOOD
HEALTHCARE PIDS AND
PRENATAL**
Provider ID: 206266
 425 N DATE ST
ESCONDIDO, CA
92025-3413
 Phone: 760-520-8340
Fax: 360-462-2752
 After Hours Phone:
760-520-8340
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal



Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA:
NEIGHBORHOOD HEALTHCARE PEDS AND PRENATAL
 *Website: www.ihpsocal.org*

NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY






Provider ID: 206271
 728 E VALLEY PKWY
ESCONDIDO, CA
92025-3052
 *Phone: 760-737-6900*
 *After Hours Phone:*
760-737-6900
License Number: A120348
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA:
NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY
 *Website: N/A*

NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY

Provider ID: 206271
 728 E VALLEY PKWY







ESCONDIDO, CA
92025-3052
 *Phone: 760-737-6900*
 *After Hours Phone:*
760-737-6900
License Number: A140398
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA:
NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY
 *Website: N/A*

NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY





Provider ID: 206271
 728 E VALLEY PKWY
ESCONDIDO, CA
92025-3052
 *Phone: 760-737-6900*
 *After Hours Phone:*
760-737-6900
License Number: A139490
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA:
NEIGHBORHOOD HEALTHCARE VALLEY

PARKWAY
 *Website: N/A*

NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY

Provider ID: 206271
 728 E VALLEY PKWY
ESCONDIDO, CA
92025-3052
 *Phone: 760-737-6900*
 *After Hours Phone:*
760-737-6900
License Number: A161074
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA:
NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY
 *Website: N/A*

NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY







Provider ID: 206271
 728 E VALLEY PKWY
ESCONDIDO, CA
92025-3052
 *Phone: 760-737-6900*
 *After Hours Phone:*
760-737-6900
License Number: A145349
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal




Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA:
NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY
 *Website: N/A*

NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY






Provider ID: 206271
 728 E VALLEY PKWY
ESCONDIDO, CA
92025-3052
 *Phone: 760-737-6900*
 *After Hours Phone:*
760-737-6900
License Number: DPM5260
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA:
NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY
 *Website: N/A*

NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY

Provider ID: 206271
 728 E VALLEY PKWY







ESCONDIDO, CA
92025-3052
 *Phone: 760-737-6900*
 *After Hours Phone:*
760-737-6900
License Number: A94128
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA:
NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY
 *Website: N/A*

NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY





Provider ID: 206271
 728 E VALLEY PKWY
ESCONDIDO, CA
92025-3052
 *Phone: 760-737-6900*
 *After Hours Phone:*
760-737-6900
License Number: G61829
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA:
NEIGHBORHOOD HEALTHCARE VALLEY

PARKWAY
 *Website: N/A*

NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY

Provider ID: 206271
 728 E VALLEY PKWY
ESCONDIDO, CA
92025-3052
 *Phone: 760-737-6900*
 *After Hours Phone:*
760-737-6900
License Number: NP8169
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA:
NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY
 *Website: N/A*

NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY







Provider ID: 206271
 728 E VALLEY PKWY
ESCONDIDO, CA
92025-3052
 *Phone: 760-737-6900*
Fax: 360-462-2748
 *After Hours Phone:*
760-737-6900
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal


Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA:
NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY
 *Website: N/A*

NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL






Provider ID: 424775
 426 N DATE ST
ESCONDIDO, CA
92025-3409
 *Phone: 760-690-5900*
 *After Hours Phone:*
760-690-5900
License Number: A62467
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA:
NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL
 *Website: N/A*

NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL

Provider ID: 424775
 426 N DATE ST







ESCONDIDO, CA
92025-3409
 *Phone: 760-690-5900*
 *After Hours Phone:*
760-690-5900
License Number: A67626
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA:
NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL
 *Website: N/A*

NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL





Provider ID: 424775
 426 N DATE ST
ESCONDIDO, CA
92025-3409
 *Phone: 760-690-5900*
 *After Hours Phone:*
760-690-5900
License Number: A56054
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA:
NEIGHBORHOOD HEALTHCARE PEDIATRICS

AND PRENATAL
 *Website: N/A*

SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE

Provider ID: 588941
 704 E GRAND AVE
ESCONDIDO, CA
92025-4405
 *Phone: 619-662-4100*
 *After Hours Phone:*
619-662-4100
License Number: PA52347
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE
 *Website: N/A*

SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE


Provider ID: 588941
 704 E GRAND AVE
ESCONDIDO, CA
92025-4405
 *Phone: 619-662-4100*
Fax: 619-662-7952
 *After Hours Phone:*
619-662-4100
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

American Sign Language (ASL):  Phone: 760-690-5900

N  After Hours Phone:
760-690-5900


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH ESCONDIDO
FAMILY MEDICINE


 Website: N/A

NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL

Provider ID: 424775

 426 N DATE ST
ESCONDIDO, CA
92025-3409

 Phone: 760-690-5900

 After Hours Phone:
760-690-5900

License Number: NP4799


NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA:


NEIGHBORHOOD
HEALTHCARE PEDIATRICS
AND PRENATAL


 Website: N/A

NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL

Provider ID: 424775

 426 N DATE ST
ESCONDIDO, CA
92025-3409

 Phone: 760-690-5900

 After Hours Phone:
760-690-5900

License Number: G83438

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA:


NEIGHBORHOOD
HEALTHCARE PEDIATRICS
AND PRENATAL

 Website: N/A


NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL

Provider ID: 424775

 426 N DATE ST
ESCONDIDO, CA
92025-3409

 Phone: 760-690-5900

Fax: 360-462-2747

 After Hours Phone:
760-690-5900

License Number: 550000511

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:


NEIGHBORHOOD
HEALTHCARE PEDIATRICS


AND PRENATAL

 Website: N/A


NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL

Provider ID: 424775

 426 N DATE ST
ESCONDIDO, CA
92025-3409

 Phone: 760-690-5900

Fax: 360-462-2747

 After Hours Phone:
760-690-5900


NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA:


NEIGHBORHOOD
HEALTHCARE PEDIATRICS
AND PRENATAL


 Website: N/A

NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL

Provider ID: 206266

 425 N DATE ST
ESCONDIDO, CA
92025-3413

 Phone: 760-520-8340

 After Hours Phone:
760-520-8340

License Number: A56054

NPI: 1598122871

Accepting New Patients: Yes







Site English Spoken: Yes

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal

Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE PEDS AND
PRENATAL
 *Website: www.ihpsocal.org*

NEIGHBORHOOD HEALTHCARE PEDS AND PRENATAL







Provider ID: 206266
 425 N DATE ST
ESCONDIDO, CA
92025-3413
 *Phone: 760-520-8340*
 *After Hours Phone:*
760-520-8340
License Number: A67626
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE PEDS AND
PRENATAL
 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE







Provider ID: 588941
 704 E GRAND AVE

ESCONDIDO, CA
92025-4405
 *Phone: 619-662-4100*
 *After Hours Phone:*
619-662-4100
License Number: G58033
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE
 *Website: N/A*





SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE

Provider ID: 588941
 704 E GRAND AVE
ESCONDIDO, CA
92025-4405
 *Phone: 619-662-4100*
 *After Hours Phone:*
619-662-4100
License Number: C171064
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE
 *Website: N/A*

SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE



Provider ID: 588941
 704 E GRAND AVE
ESCONDIDO, CA
92025-4405
 *Phone: 619-662-4100*
 *After Hours Phone:*
619-662-4100
License Number: NP95005999
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE
 *Website: N/A*

SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE

Provider ID: 588941
 704 E GRAND AVE
ESCONDIDO, CA
92025-4405
 *Phone: 619-662-4100*
 *After Hours Phone:*
619-662-4100
License Number: PA20490
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):
N


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal



D1. Clínicas de salud con calificación federal

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE
 *Website: N/A*



SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE

Provider ID: 588941
 704 E GRAND AVE
ESCONDIDO, CA
92025-4405
 *Phone: 619-662-4100*
 *After Hours Phone: 619-662-4100*
License Number: NP95006360
NPI: 1598122871



Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE
 *Website: N/A*

SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE

Provider ID: 588941
 704 E GRAND AVE
ESCONDIDO, CA 92025
 *Phone: (619) 662-4100*
Fax: (760) 745-7847
 *After Hours Phone: (619) 662-4100*
NPI: 1801438239

Accepting New Patients: Yes
Min/Max Age: 0\120

 *Site English Spoken: Y*
 *Site Languages(s) Spoken: Arabic, Farsi, Spanish, Tagalog*
Cultural Competency: N




American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: IHP of Southern Cal-PHP


 *Website: N/A*

ESCONDIDO FAMILY HEALTH CENTER

Provider ID: 652372
 128 N BROADWAY
ESCONDIDO, CA 92025
 *Phone: (619) 515-2474*
 *After Hours Phone: (619) 515-2474*

License Number: 550002865
NPI: 1417640491

Accepting New Patients: Yes
Min/Max Age: 0\999

 *Site English Spoken: Y*
Cultural Competency: N
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: Family Health Centers of San Diego

 *Website: N/A*

NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL


Provider ID: 424775

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


License Number: 550000511
NPI: 1437335353

Accepting New Patients: Yes
Min/Max Age: 0\21

 *Site English Spoken: Y*
Cultural Competency: N

 *Hours: M-F 8:00AM-5:00PM*

American Sign Language (ASL): N



 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: IHP of Southern Cal-PHP

 *Website: N/A*

NEIGHBORHOOD HEALTHCARE PIDS AND PRENATAL

Provider ID: 206266


 425 N DATE ST
ESCONDIDO, CA 92025
 *Phone: (760) 520-8340*
Fax: (360) 462-2752

 *After Hours Phone: (760) 520-8340*

NPI: 1265618185

Accepting New Patients: Yes
Min/Max Age: 0\21

 *Site English Spoken: Y*
Cultural Competency: N

 *Hours: M-F 8:00AM-5:00PM*

American Sign Language (ASL): N

 *Accessibility: CONTACT*

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

PROVIDER
Medical Group/IPA: IHP of
Southern Cal-PHP
Website: www.ihpsocal.org

NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY

Provider ID: 206271
728 E VALLEY PKWY
ESCONDIDO, CA 92025
Phone: (760) 737-6900
Fax: (360) 462-2748
After Hours Phone: (760)
737-6900
License Number: 080000158
NPI: 1720264641
Accepting New Patients: Yes
Min/Max Age: 0\150

Site English Spoken: Y
Cultural Competency: N
Hours: M-TU
8:00AM-5:00PM
W 9:00AM-5:00PM
TH-F 8:00AM-5:00PM
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP of
Southern Cal-PHP
Website: N/A

NEIGHBORHOOD HEALTHCARE ESCONDIDO

Provider ID: 206270
460 N ELM ST
ESCONDIDO, CA 92025
Phone: (760) 520-8100
Fax: (360) 466-2745
After Hours Phone: (760)
520-8100

License Number: 080000397
NPI: 1598703647
Accepting New Patients: Yes
Min/Max Age: 0\150
Site English Spoken: Y
Cultural Competency: N
Hours: M-F
8:00AM-5:00PM
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP of
Southern Cal-PHP
Website: www.ihpsocal.org

FALLBROOK

VISTA COMMUNITY CLINIC

Provider ID: 624122
321 E ALVARADO ST
FALLBROOK, CA
92028-2912
Phone: 760-723-6200
After Hours Phone:
760-723-6200
License Number: NP95003447
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Medical Group/IPA: VISTA
COMMUNITY CLINIC
Website: www.vistacommunityclinic.org

FALLBROOK FAMILY HLTH CTR



Provider ID: 183910
1328 S MISSION RD
FALLBROOK, CA
92028-4006
Phone: 760-451-4770
After Hours Phone:
760-451-4770
License Number: A169529
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Medical Group/IPA:
FALLBROOK FAMILY HLTH
CTR
Website: N/A

FALLBROOK FAMILY HLTH CTR

Provider ID: 183910
1328 S MISSION RD
FALLBROOK, CA
92028-4006
Phone: 760-451-4720
Fax: 760-451-4700
After Hours Phone:
760-451-4720
License Number: 80000150
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FALLBROOK FAMILY HLTH CTR
 *Website: N/A*

FALLBROOK FAMILY HLTH CTR

Provider ID: 183910

 1328 S MISSION RD
FALLBROOK, CA
92028-4006

 *Phone: 760-451-4720*


Fax: 760-451-4700

 *After Hours Phone: 760-451-4720*

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*

 *Site Languages(s) Spoken: Spanish*

Cultural Competency: No

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA:


FALLBROOK FAMILY HLTH CTR


 *Website: N/A*

VISTA COMMUNITY CLINIC

Provider ID: 624122

 321 E ALVARADO ST
FALLBROOK, CA 92028

 *Phone: (760) 723-6200*

 *After Hours Phone: (760) 723-6200*


License Number: 550004110

NPI: 1851300123

Accepting New Patients: No

Min/Max Age: 0\999

 *Site English Spoken: Y*
Cultural Competency: N

 *Hours: M 8:00AM-4:00PM
TU 8:00AM-0:30PM
W-TH 8:00AM-5:00PM*

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: IHP of Southern Cal-PHP


 *Website: www.vistacommunityclinic.org*

VISTA COMMUNITY CLINIC

Provider ID: 624122

 321 E ALVARADO ST
FALLBROOK, CA 92028

 *Phone: (760) 723-6200*


 *After Hours Phone: (760) 723-6200*


License Number: 550003781

NPI: 1851300123

Accepting New Patients: No

Min/Max Age: 0\999

 *Site English Spoken: Y*
Cultural Competency: N

 *Hours: M 8:00AM-4:00PM
TU 8:00AM-0:30PM
W-TH 8:00AM-5:00PM*

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: IHP of Southern Cal-PHP


 *Website: www.vistacommunityclinic.org*

VISTA COMMUNITY CLINIC

Provider ID: 624122

 321 E ALVARADO ST
FALLBROOK, CA 92028

 *Phone: (760) 723-6200*

 *After Hours Phone: (760) 723-6200*


License Number: 080000002

NPI: 1851300123

Accepting New Patients: No

Min/Max Age: 0\999

 *Site English Spoken: Y*
Cultural Competency: N


 *Hours: M 8:00AM-4:00PM
TU 8:00AM-0:30PM
W-TH 8:00AM-5:00PM*

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: IHP of Southern Cal-PHP


 *Website: www.vistacommunityclinic.org*

VISTA COMMUNITY CLINIC

Provider ID: 624122

 321 E ALVARADO ST
FALLBROOK, CA 92028

 *Phone: (760) 723-6200*


 *After Hours Phone: (760) 723-6200*


License Number: 080000002

NPI: 1316501562

Accepting New Patients: No

Min/Max Age: 0\999

 *Site English Spoken: Y*
Cultural Competency: N

 *Hours: M 8:00AM-4:00PM
TU 8:00AM-0:30PM
W-TH 8:00AM-5:00PM*

American Sign Language (ASL):

N

 *Accessibility: CONTACT*

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

PROVIDER
Medical Group/IPA: IHP of
Southern Cal-PHP
Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 624122
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200

License Number: 550003781
NPI: 1316501562

Accepting New Patients: No
Min/Max Age: 0\999

Site English Spoken: Y
Cultural Competency: N
Hours: M 8:00AM-4:00PM
TU 8:00AM-0:30PM
W-TH 8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP of
Southern Cal-PHP
Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 624122
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200

License Number: 550003781
NPI: 1649662719

Accepting New Patients: No
Min/Max Age: 0\999

Site English Spoken: Y
Cultural Competency: N
Hours: M 8:00AM-4:00PM
TU 8:00AM-0:30PM
W-TH 8:00AM-5:00PM
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP of
Southern Cal-PHP
Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 624122
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200

License Number: 550004110
NPI: 1649662719

Accepting New Patients: No
Min/Max Age: 0\999

Site English Spoken: Y
Cultural Competency: N
Hours: M 8:00AM-4:00PM
TU 8:00AM-0:30PM
W-TH 8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP of
Southern Cal-PHP
Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 624122
321 E ALVARADO ST

FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
License Number: 080000002

NPI: 1649662719
Accepting New Patients: No
Min/Max Age: 0\999

Site English Spoken: Y
Cultural Competency: N
Hours: M 8:00AM-4:00PM
TU 8:00AM-0:30PM
W-TH 8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP of
Southern Cal-PHP
Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 624122
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200

License Number: 550004110
NPI: 1316501562

Accepting New Patients: No
Min/Max Age: 0\999

Site English Spoken: Y
Cultural Competency: N
Hours: M 8:00AM-4:00PM
TU 8:00AM-0:30PM
W-TH 8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal


Medical Group/IPA: IHP of
Southern Cal-PHP


 Website: www.vistacommunityclinic.org


IMPERIAL BEACH

IMPERIAL BEACH HEALTH CENTER

Provider ID: 179678

 949 PALM AVE
IMPERIAL BEACH, CA
91932-1503

 Phone: 619-429-3733

 After Hours Phone:
619-429-3733

License Number: A51447

NPI: 1598122871

Accepting New Patients: Yes


Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IMPERIAL
BEACH HEALTH CENTER


 Website: www.ihpsocal.org

IMPERIAL BEACH HEALTH CENTER

Provider ID: 179678

 949 PALM AVE
IMPERIAL BEACH, CA
91932-1503

 Phone: 619-429-3733

 After Hours Phone:
619-429-3733

License Number: A66830

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

American Sign Language (ASL):

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IMPERIAL
BEACH HEALTH CENTER

 Website: www.ihpsocal.org

IMPERIAL BEACH HEALTH CENTER

Provider ID: 179678

 949 PALM AVE
IMPERIAL BEACH, CA 91932

 Phone: (619) 429-3733

Fax: (619) 628-5550

 After Hours Phone: (619)
429-3733

License Number: 090000119

NPI: 1790718351


Accepting New Patients: Yes

Min/Max Age: 0\150

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: N

 Hours: M-F
8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP of
Southern Cal-PHP

 Website: www.ihpsocal.org


LA MESA

LA MESA PEDIATRICS


Provider ID: 480827

 8881 FLETCHER PKWY STE
200

LA MESA, CA 91942-3135

 Phone: 619-464-6434

Fax: 619-464-5109

 After Hours Phone:
619-464-6434

License Number: C133872

NPI: 1134144165

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA MESA
PEDIATRICS


 Website: N/A

LA MESA PEDIATRICS

Provider ID: 480827

 8881 FLETCHER PKWY STE
200

LA MESA, CA 91942-3135

 Phone: 619-464-6434

Fax: 619-464-5109

 After Hours Phone:
619-464-6434

License Number: A89865

NPI: 1134144165

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA MESA
PEDIATRICS


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal

 Website: N/A


LA MESA PEDIATRICS

Provider ID: 480827

 8881 FLETCHER PKWY STE 200
LA MESA, CA 91942-3135

 Phone: 619-464-6434

Fax: 619-464-5109

 After Hours Phone:
619-464-6434

License Number: A113241

NPI: 1134144165


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LA MESA
PEDIATRICS

 Website: N/A

LA MESA PEDIATRICS

Provider ID: 480827

 8881 FLETCHER PKWY STE 200
LA MESA, CA 91942-3135

 Phone: 619-464-6434

Fax: 619-464-5109

 After Hours Phone:
619-464-6434

License Number: 20A11733

NPI: 1134144165


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LA MESA
PEDIATRICS

 Website: N/A

LA MESA PEDIATRICS

Provider ID: 480827

 8881 FLETCHER PKWY STE 200
LA MESA, CA 91942-3135

 Phone: 619-464-6434

Fax: 619-464-5109

 After Hours Phone:
619-464-6434

License Number: 550000430

NPI: 1134144165

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: Yes

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LA MESA
PEDIATRICS

 Website: N/A


LA MESA PEDIATRICS

Provider ID: 480827

 8881 FLETCHER PKWY STE 200
LA MESA, CA 91942-3135

 Phone: 619-464-6434

Fax: 619-464-5109

 After Hours Phone:
619-464-6434

NPI: 1134144165

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER


Medical Group/IPA: LA MESA
PEDIATRICS


 Website: N/A

LA MESA PEDIATRICS

Provider ID: 480827

 8881 FLETCHER PKWY STE 200
LA MESA, CA 91942-3135

 Phone: 619-464-6434

 After Hours Phone:
619-464-6434

License Number: NP95017921

NPI: 1134144165

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA MESA
PEDIATRICS

 Website: N/A


LAKESIDE


NEIGHBORHOOD

HEALTHCARE LAKESIDE

Provider ID: 353843

 10039 VINE ST
LAKESIDE, CA 92040-3120

 Phone: 858-218-3000

 After Hours Phone:
858-218-3000

License Number: DC33688

NPI: 1598122871

Accepting New Patients: Yes



































Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

<p>N  <i>Accessibility: CONTACT PROVIDER</i> <i>Medical Group/IPA:</i> <i>NEIGHBORHOOD HEALTHCARE LAKESIDE</i>  <i>Website: www.ihpsocal.org</i></p> <p>NEIGHBORHOOD HEALTHCARE LAKESIDE <i>Provider ID: 353843</i>  10039 VINE ST LAKESIDE, CA 92040-3120  <i>Phone: 858-218-3000</i> <i>Fax: 360-462-2744</i>  <i>After Hours Phone: 858-218-3000</i> <i>NPI: 1598122871</i> <i>Accepting New Patients: Yes</i>  <i>Site English Spoken: Yes</i> <i>Cultural Competency: No</i> <i>American Sign Language (ASL):</i> N  <i>Accessibility: CONTACT PROVIDER</i> <i>Medical Group/IPA:</i> <i>NEIGHBORHOOD HEALTHCARE LAKESIDE</i>  <i>Website: www.ihpsocal.org</i></p> <p>NEIGHBORHOOD HEALTHCARE LAKESIDE <i>Provider ID: 353843</i>  10039 VINE ST LAKESIDE, CA 92040-3120  <i>Phone: 858-218-3000</i> <i>Fax: 360-462-2744</i>  <i>After Hours Phone: 858-218-3000</i> <i>License Number: 80000483</i> <i>NPI: 1598122871</i> <i>Accepting New Patients: Yes</i></p>	<p> <i>Site English Spoken: Yes</i> <i>Cultural Competency: No</i> <i>American Sign Language (ASL):</i> N  <i>Accessibility: CONTACT PROVIDER</i> <i>Medical Group/IPA:</i> <i>NEIGHBORHOOD HEALTHCARE LAKESIDE</i>  <i>Website: www.ihpsocal.org</i></p> <p>NEIGHBORHOOD HEALTHCARE LAKESIDE <i>Provider ID: 353843</i>  10039 VINE ST LAKESIDE, CA 92040-3120  <i>Phone: 858-218-3000</i>  <i>After Hours Phone: 858-218-3000</i> <i>License Number: A75411</i> <i>NPI: 1598122871</i> <i>Accepting New Patients: Yes</i>  <i>Site English Spoken: Yes</i> <i>Cultural Competency: No</i> <i>American Sign Language (ASL):</i> N  <i>Accessibility: CONTACT PROVIDER</i> <i>Medical Group/IPA:</i> <i>NEIGHBORHOOD HEALTHCARE LAKESIDE</i>  <i>Website: www.ihpsocal.org</i></p> <p>NEIGHBORHOOD HEALTHCARE LAKESIDE <i>Provider ID: 353843</i>  10039 VINE ST LAKESIDE, CA 92040-3120  <i>Phone: 858-218-3000</i>  <i>After Hours Phone: 858-218-3000</i> <i>License Number: A43914</i></p>	<p><i>NPI: 1598122871</i> <i>Accepting New Patients: Yes</i>  <i>Site English Spoken: Yes</i> <i>Cultural Competency: No</i> <i>American Sign Language (ASL):</i> N  <i>Accessibility: CONTACT PROVIDER</i> <i>Medical Group/IPA:</i> <i>NEIGHBORHOOD HEALTHCARE LAKESIDE</i>  <i>Website: www.ihpsocal.org</i></p> <p>NEIGHBORHOOD HEALTHCARE LAKESIDE <i>Provider ID: 353843</i>  10039 VINE ST LAKESIDE, CA 92040-3120  <i>Phone: 858-218-3000</i>  <i>After Hours Phone: 858-218-3000</i> <i>License Number: A152372</i> <i>NPI: 1598122871</i> <i>Accepting New Patients: Yes</i>  <i>Site English Spoken: Yes</i> <i>Cultural Competency: No</i> <i>American Sign Language (ASL):</i> N  <i>Accessibility: CONTACT PROVIDER</i> <i>Medical Group/IPA:</i> <i>NEIGHBORHOOD HEALTHCARE LAKESIDE</i>  <i>Website: www.ihpsocal.org</i></p> <p>NEIGHBORHOOD HEALTHCARE LAKESIDE <i>Provider ID: 353843</i>  10039 VINE ST LAKESIDE, CA 92040  <i>Phone: (858) 218-3000</i></p>
--	--	--

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Fax: (360) 462-2744

☎ After Hours Phone: (858)
218-3000

License Number: 080000483

NPI: 1932384120

Accepting New Patients: Yes

Min/Max Age: 0\150

🗉 Site English Spoken: Y
Cultural Competency: N

🕒 Hours: M-F
8:00AM-5:00PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP of
Southern Cal-PHP

🌐 Website: www.ihpsocal.org

LEMON GROVE

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

📍 7592 BROADWAY
LEMON GROVE, CA
91945-1604

☎ Phone: 619-515-2550

Fax: 619-825-9577

☎ After Hours Phone:
619-515-2550

License Number: 550001268

NPI: 1134155377

Accepting New Patients: Yes

🗉 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LEMON
GROVE FAMILY HEALTH

CENTER

🌐 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

📍 7592 BROADWAY
LEMON GROVE, CA
91945-1604

☎ Phone: 619-515-2550

☎ After Hours Phone:
619-515-2550

License Number: RN428876

NPI: 1134155377

Accepting New Patients: Yes

🗉 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER

🌐 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

📍 7592 BROADWAY
LEMON GROVE, CA
91945-1604

☎ Phone: 619-515-2550

☎ After Hours Phone:
619-515-2550

License Number: PA56072

NPI: 1134155377

Accepting New Patients: Yes

🗉 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER

🌐 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

📍 7592 BROADWAY
LEMON GROVE, CA
91945-1604

☎ Phone: 619-515-2550

Fax: 619-825-9577

☎ After Hours Phone:
619-515-2550

NPI: 1134155377

Accepting New Patients: Yes

🗉 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER

🌐 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

📍 7592 BROADWAY
LEMON GROVE, CA
91945-1604

☎ Phone: 619-515-2550

☎ After Hours Phone:
619-515-2550

License Number: NP95009933

NPI: 1134155377

Accepting New Patients: Yes

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): NPI: 1134155377

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER


 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 Phone: 619-515-2550

 After Hours Phone:
619-515-2550

License Number: NP95001050


NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): NPI: 1134155377

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER

 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 Phone: 619-515-2550

 After Hours Phone:

619-515-2550

License Number: NP95008782

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER

 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 Phone: 619-515-2550

 After Hours Phone:
619-515-2550

License Number: NP95013978

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER


 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 Phone: 619-515-2550

 After Hours Phone:
619-515-2550

License Number: PA12416

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER


 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 Phone: 619-515-2550

 After Hours Phone:
619-515-2550


License Number: A154298

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER

 Website: N/A

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

7592 BROADWAY
LEMON GROVE, CA
91945-1604

Phone: 619-515-2550

After Hours Phone:
619-515-2550

License Number: A154838

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): NPI: 1134155377

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER

Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

7592 BROADWAY
LEMON GROVE, CA
91945-1604

Phone: 619-515-2550

After Hours Phone:
619-515-2550

License Number: A163464

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): NPI: 1134155377

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER

Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

7592 BROADWAY
LEMON GROVE, CA
91945-1604

Phone: 619-515-2550

After Hours Phone:
619-515-2550

License Number: A178499

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): NPI: 1134155377

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER

Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

7592 BROADWAY
LEMON GROVE, CA
91945-1604

Phone: 619-515-2550

After Hours Phone:
619-515-2550

License Number: A165925

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER

Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

7592 BROADWAY
LEMON GROVE, CA
91945-1604

Phone: 619-515-2550

After Hours Phone:
619-515-2550

License Number: A164859

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): NPI: 1134155377

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER

Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

7592 BROADWAY
LEMON GROVE, CA
91945-1604

Phone: 619-515-2550

After Hours Phone:
619-515-2550

License Number: A68463

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER


 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 Phone: 619-515-2550

 After Hours Phone:
619-515-2550


License Number: A72005

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER


 Website: N/A


LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA

91945-1604

 Phone: 619-515-2550

 After Hours Phone:
619-515-2550

License Number: C172318

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER

 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 Phone: 619-515-2550

 After Hours Phone:
619-515-2550

License Number: NP15444

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER


 Website: N/A


LEMON GROVE FAMILY

HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 Phone: 619-515-2550

 After Hours Phone:
619-515-2550

License Number: C174771

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER

 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 Phone: 619-515-2550

 After Hours Phone:
619-515-2550

License Number: A107323

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LEMON
GROVE FAMILY HEALTH

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal


CENTER


 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 Phone: 619-515-2550

 After Hours Phone:
619-515-2550


License Number: 20A11535

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER


 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 Phone: 619-515-2550

 After Hours Phone:
619-515-2550

License Number: 20A14919

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER


 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 Phone: 619-515-2550

 After Hours Phone:
619-515-2550

License Number: A102060

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER

 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604


 Phone: 619-515-2550

 After Hours Phone:
619-515-2550

License Number: A116680

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER


 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 Phone: 619-515-2550

 After Hours Phone:
619-515-2550


License Number: A118095

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LEMON
GROVE FAMILY HEALTH
CENTER

 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139



 7592 BROADWAY
LEMON GROVE, CA
91945-1604

 Phone: 619-515-2550






 After Hours Phone:

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal






619-515-2550
License Number: A148014
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER
 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER






Provider ID: 419139
 7592 BROADWAY
LEMON GROVE, CA
91945-1604
 Phone: 619-515-2550
 After Hours Phone:
619-515-2550
License Number: A114181
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER
 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER






Provider ID: 419139

 7592 BROADWAY
LEMON GROVE, CA
91945-1604
 Phone: 619-515-2550
 After Hours Phone:
619-515-2550
License Number: A108228
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER
 Website: N/A



LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139
 7592 BROADWAY
LEMON GROVE, CA
91945-1604
 Phone: 619-515-2550
 After Hours Phone:
619-515-2550
License Number: A113001
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER
 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER



Provider ID: 419139
 7592 BROADWAY
LEMON GROVE, CA
91945-1604
 Phone: 619-515-2500
 After Hours Phone:
619-515-2500
License Number: G78814
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER
 Website: N/A

LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139
 7592 BROADWAY
LEMON GROVE, CA 91945
 Phone: (619) 515-2550
Fax: (619) 825-9577
 After Hours Phone: (619)
515-2550
License Number: 550001268
NPI: 1427282466
Accepting New Patients: Yes
Min/Max Age: 0\150
 Site English Spoken: Y
Cultural Competency: N
 Hours: M-F
9:00AM-5:00PM
American Sign Language (ASL):





D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: Family Health Centers of San Diego
 *Website: N/A*
Email: valeriade@fhcsd.org




NATIONAL CITY


LA MAESTRA FAMILY CLINIC INC



Provider ID: 185270
 217 HIGHLAND AVE
NATIONAL CITY, CA
91950-1518
 *Phone: 619-280-4213*
 *After Hours Phone: 619-280-4213*
License Number: A167184
NPI: 1609849074
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC
 *Website: www.lamaestra.org*





LA MAESTRA FAMILY CLINIC INC



Provider ID: 185270
 217 HIGHLAND AVE
NATIONAL CITY, CA
91950-1518
 *Phone: 619-434-7308*
 *After Hours Phone: 619-434-7308*

License Number: 20A6433
NPI: 1609849074
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):


N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC
 *Website: www.lamaestra.org*






LA MAESTRA FAMILY CLINIC INC

Provider ID: 185270
 217 HIGHLAND AVE
NATIONAL CITY, CA
91950-1518
 *Phone: 619-434-7308*
 *After Hours Phone: 619-434-7308*
License Number: A123929
NPI: 1609849074
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):





N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC
 *Website: www.lamaestra.org*

SAN YSIDRO HEALTH NATIONAL CITY

Provider ID: 227412
 1136 D AVE
NATIONAL CITY, CA

91950-3412
 *Phone: 619-662-4100*
Fax: 619-474-3722
 *After Hours Phone: 619-662-4100*
License Number: A55469
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH NATIONAL CITY
 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH NATIONAL CITY

Provider ID: 227412
 1136 D AVE
NATIONAL CITY, CA
91950-3412
 *Phone: 619-662-4100*
Fax: 619-474-3722
 *After Hours Phone: 619-662-4100*
License Number: G46444
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH NATIONAL CITY
 *Website: www.ihpsocal.org*

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

SAN YSIDRO HEALTH NATIONAL CITY

Provider ID: 227412

1136 D AVE
NATIONAL CITY, CA
91950-3412

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: A165184

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH NATIONAL
CITY

Website: www.ihpsocal.org

SAN YSIDRO HEALTH NATIONAL CITY

Provider ID: 227412

1136 D AVE
NATIONAL CITY, CA
91950-3412

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: C55180

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN

YSIDRO HEALTH NATIONAL
CITY

Website: www.ihpsocal.org

SAN YSIDRO HEALTH NATIONAL CITY

Provider ID: 227412

1136 D AVE
NATIONAL CITY, CA
91950-3412

Phone: 619-662-4100

Fax: 619-336-2323

After Hours Phone:
619-662-4100

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH NATIONAL
CITY

Website: www.ihpsocal.org

SAN YSIDRO HEALTH NATIONAL CITY

Provider ID: 227412

1136 D AVE
NATIONAL CITY, CA
91950-3412

Phone: 619-662-4100

Fax: 619-336-2323

After Hours Phone:
619-662-4100

License Number: A112571

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH NATIONAL
CITY

Website: www.ihpsocal.org

SAN YSIDRO HEALTH PARADISE HILLS

Provider ID: 227418

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

Phone: 619-662-4100

Fax: 619-259-2807

After Hours Phone:
619-662-4100

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Tagalog, Spanish

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH PARADISE
HILLS

Website: www.ihpsocal.org

SAN YSIDRO HEALTH PARADISE HILLS

Provider ID: 227418

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

Phone: 619-662-4100

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Fax: 619-259-2806

☎ After Hours Phone:
619-662-4100

License Number: 20A11518

NPI: 1598122871

Accepting New Patients: Yes

☐ Site English Spoken: Yes

☐ Site Languages(s) Spoken:
Tagalog, Spanish

Cultural Competency: No

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH PARADISE
HILLS

🌐 Website: www.ihpsocal.org

SAN YSIDRO HEALTH PARADISE HILLS

Provider ID: 227418

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

☎ Phone: 619-662-4100

☎ After Hours Phone:
619-662-4100

License Number: A157488

NPI: 1598122871

Accepting New Patients: Yes

☐ Site English Spoken: Yes

☐ Site Languages(s) Spoken:
Tagalog, Spanish

Cultural Competency: No

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH PARADISE
HILLS

🌐 Website: www.ihpsocal.org

SAN YSIDRO HEALTH PARADISE HILLS

Provider ID: 227418

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

☎ Phone: 619-662-4100

☎ After Hours Phone:
619-662-4100

License Number: G88347

NPI: 1598122871

Accepting New Patients: Yes

☐ Site English Spoken: Yes

☐ Site Languages(s) Spoken:
Tagalog, Spanish

Cultural Competency: No

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH PARADISE
HILLS

🌐 Website: www.ihpsocal.org

SAN YSIDRO HEALTH PARADISE HILLS

Provider ID: 227418

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

☎ Phone: 619-662-4100

☎ After Hours Phone:
619-662-4100

License Number: A167529

NPI: 1598122871

Accepting New Patients: Yes

☐ Site English Spoken: Yes

☐ Site Languages(s) Spoken:
Tagalog, Spanish

Cultural Competency: No
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH PARADISE
HILLS

🌐 Website: www.ihpsocal.org

SAN YSIDRO HEALTH NATIONAL CITY

Provider ID: 227412

📍 1136 D AVE
NATIONAL CITY, CA
91950-3412

☎ Phone: 619-662-4100

☎ After Hours Phone:
619-662-4100

License Number: A103218

NPI: 1598122871

Accepting New Patients: Yes

☐ Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH NATIONAL
CITY

🌐 Website: www.ihpsocal.org

SAN YSIDRO HEALTH NATIONAL CITY

Provider ID: 227412

📍 1136 D AVE
NATIONAL CITY, CA
91950-3412

☎ Phone: 619-662-4100

☎ After Hours Phone:
619-662-4100

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

License Number: A138919

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH NATIONAL
CITY


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH NATIONAL CITY

Provider ID: 227412

 1136 D AVE
NATIONAL CITY, CA
91950-3412

 Phone: 619-428-4463

 After Hours Phone:
619-428-4463

License Number: G71855

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH NATIONAL
CITY


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH PARADISE HILLS

Provider ID: 227418

 2400 E 8TH ST STE A

NATIONAL CITY, CA
91950-2956

 Phone: 619-662-4100
Fax: 619-259-2807

 After Hours Phone:
619-662-4100

License Number: A113624

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Tagalog, Spanish

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH PARADISE
HILLS

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH PARADISE HILLS

Provider ID: 227418

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

 Phone: 619-662-4100
Fax: 619-259-2807

 After Hours Phone:
619-662-4100

License Number: A71304

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Tagalog, Spanish

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH PARADISE
HILLS

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH NATIONAL CITY

Provider ID: 227412

 1136 D AVE
NATIONAL CITY, CA
91950-3412

 Phone: 619-336-2300

 After Hours Phone:
619-336-2300

License Number: A78373

NPI: 1598122871

Accepting New Patients: Yes


Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH NATIONAL
CITY


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH PARADISE HILLS

Provider ID: 227418

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

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A118227

NPI: 1598122871

Accepting New Patients: Yes








Site English Spoken: Yes

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal







 *Site Languages(s) Spoken:* Tagalog, Spanish
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility:* CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH PARADISE HILLS
 *Website:* www.ihpsocal.org

SAN YSIDRO HEALTH PARADISE HILLS





Provider ID: 227418
 2400 E 8TH ST STE A
NATIONAL CITY, CA
91950-2956
 *Phone:* 619-662-4100
 *After Hours Phone:* 619-662-4100
License Number: A146819
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken:* Yes
 *Site Languages(s) Spoken:* Tagalog, Spanish
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility:* CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH PARADISE HILLS
 *Website:* www.ihpsocal.org

SAN YSIDRO HEALTH PARADISE HILLS



Provider ID: 227418
 2400 E 8TH ST STE A
NATIONAL CITY, CA

91950-2956
 *Phone:* 619-662-4100
 *After Hours Phone:* 619-662-4100
License Number: A138534
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken:* Yes
 *Site Languages(s) Spoken:* Tagalog, Spanish
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility:* CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH PARADISE HILLS
 *Website:* www.ihpsocal.org






SAN YSIDRO HEALTH SOUTH BAY

Provider ID: 361428
 330 E 8TH ST
NATIONAL CITY, CA
91950-2312
 *Phone:* 619-662-4100
 *After Hours Phone:* 619-662-4100
License Number: G71855
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken:* Yes
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility:* CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH SOUTH BAY
 *Website:* www.ihpsocal.org

SAN YSIDRO HEALTH SOUTH BAY


























Provider ID: 361428
 330 E 8TH ST
NATIONAL CITY, CA
91950-2312
 *Phone:* 619-662-4100
Fax: 619-259-2807
 *After Hours Phone:* 619-662-4100
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken:* Yes
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility:* CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH SOUTH BAY
 *Website:* www.ihpsocal.org

SAN YSIDRO HEALTH SOUTH BAY

Provider ID: 361428
 330 E 8TH ST
NATIONAL CITY, CA
91950-2312
 *Phone:* 619-662-4100
 *After Hours Phone:* 619-662-4100
License Number: 20A12653
NPI: 1598122871
Accepting New Patients: Yes
 *Site English Spoken:* Yes
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility:* CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH SOUTH BAY

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

 Website: www.ihpsocal.org	Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC	American Sign Language (ASL): N
SAN YSIDRO HEALTH SOUTH BAY Provider ID: 361428  330 E 8TH ST NATIONAL CITY, CA 91950-2312  Phone: 619-662-4100  After Hours Phone: 619-662-4100 License Number: A133539 NPI: 1598122871 Accepting New Patients: Yes  Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: SAN YSIDRO HEALTH SOUTH BAY  Website: www.ihpsocal.org	 Website: www.lamaestra.org g LA MAESTRA FAMILY CLINIC INC Provider ID: 185270  217 HIGHLAND AVE NATIONAL CITY, CA 91950-1518  Phone: 619-564-8765  After Hours Phone: 619-564-8765 License Number: NP95009891 NPI: 1609849074 Accepting New Patients: Yes  Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC  Website: www.lamaestra.org g	 Accessibility: CONTACT PROVIDER Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC  Website: www.lamaestra.org g LA MAESTRA FAMILY CLINIC INC Provider ID: 185270  217 HIGHLAND AVE NATIONAL CITY, CA 91950-1518  Phone: 619-434-7308  After Hours Phone: 619-434-7308 License Number: G45632 NPI: 1609849074 Accepting New Patients: Yes  Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC  Website: www.lamaestra.org g
LA MAESTRA FAMILY CLINIC INC Provider ID: 185270  217 HIGHLAND AVE NATIONAL CITY, CA 91950-1518  Phone: 619-798-3977  After Hours Phone: 619-798-3977 License Number: A41375 NPI: 1609849074 Accepting New Patients: Yes  Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER	LA MAESTRA FAMILY CLINIC INC Provider ID: 185270  217 HIGHLAND AVE NATIONAL CITY, CA 91950-1518  Phone: 619-434-7308  After Hours Phone: 619-434-7308 License Number: C55979 NPI: 1609849074 Accepting New Patients: Yes  Site English Spoken: Yes Cultural Competency: No	LA MAESTRA FAMILY CLINIC INC Provider ID: 185270  217 HIGHLAND AVE NATIONAL CITY, CA 91950-1518  Phone: 619-434-7308 Fax: 619-434-7310  After Hours Phone: 619-434-7308

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

License Number: NP95013257

NPI: 1609849074

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA

MAESTRA FAMILY CLINIC INC

Website: www.lamaestra.org

OPERATION SAMAHAN - NATIONAL C

Provider ID: 417102

2743 HIGHLAND AVE
NATIONAL CITY, CA
91950-7410

Phone: 844-200-2426

Fax: 619-474-3919

After Hours Phone:
844-200-2426

License Number: 90000183

NPI: 1801907449

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Tagalog, Lao, Spanish

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN - NATIONAL C

Website: www.operationsamahan.org

OPERATION SAMAHAN -

NATIONAL C

Provider ID: 417102

2743 HIGHLAND AVE
NATIONAL CITY, CA
91950-7410

Phone: 844-200-2426

Fax: 619-474-3919

After Hours Phone:
844-200-2426

NPI: 1801907449

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Tagalog, Lao, Spanish

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN - NATIONAL C

Website: www.operationsamahan.org

FAMILY HEALTH CTR SD NATIONAL CITY

Provider ID: 418930

1000 EUCLID AVE
NATIONAL CITY, CA
91950-3856

Phone: 619-515-2399

After Hours Phone:
619-515-2399

License Number: 20A18460

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Medical Group/IPA: FAMILY HEALTH CTR SD NATIONAL CITY

Website: www.fhcsd.org

FAMILY HEALTH CTR SD NATIONAL CITY

Provider ID: 418930

1000 EUCLID AVE
NATIONAL CITY, CA
91950-3856

Phone: 619-515-2399

After Hours Phone:
619-515-2399

License Number: A163862

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CTR SD NATIONAL CITY

Website: www.fhcsd.org

FAMILY HEALTH CTR SD NATIONAL CITY

Provider ID: 418930

1000 EUCLID AVE
NATIONAL CITY, CA
91950-3856

Phone: 619-515-2399

After Hours Phone:
619-515-2399

License Number: A176878

NPI: 1134155377

Accepting New Patients: Yes


Site English Spoken: Yes

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Cultural Competency: No

American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HEALTH CTR SD NATIONAL CITY

 *Website: www.fhcsd.org*


FAMILY HEALTH CTR SD NATIONAL CITY

Provider ID: 418930

 1000 EUCLID AVE
NATIONAL CITY, CA
91950-3856

 *Phone: 619-515-2399*

Fax: 619-269-0053

 *After Hours Phone:
619-515-2399*

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*

Cultural Competency: No

American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HEALTH CTR SD NATIONAL CITY


 *Website: www.fhcsd.org*

FAMILY HEALTH CTR SD NATIONAL CITY

Provider ID: 418930

 1000 EUCLID AVE
NATIONAL CITY, CA
91950-3856

 *Phone: 619-515-2399*

 *After Hours Phone:
619-515-2399*

License Number: PA55660

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*

Cultural Competency: No

American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HEALTH CTR SD NATIONAL CITY

 *Website: www.fhcsd.org*

FAMILY HEALTH CTR SD NATIONAL CITY

Provider ID: 418930

 1000 EUCLID AVE
NATIONAL CITY, CA
91950-3856

 *Phone: 619-515-2399*

 *After Hours Phone:
619-515-2399*

License Number: NP95010663

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: FAMILY HEALTH CTR SD NATIONAL CITY


 *Website: www.fhcsd.org*


OPERATION SAMAHAN - NATIONAL C

Provider ID: 417102

 2743 HIGHLAND AVE

NATIONAL CITY, CA
91950-7410

 *Phone: 844-200-2426*


 *After Hours Phone:
844-200-2426*

License Number: A74777

NPI: 1801907449

Accepting New Patients: Yes

 *Site English Spoken: Yes*

 *Site Languages(s) Spoken:
Tagalog, Lao, Spanish*


Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA:


OPERATION SAMAHAN - NATIONAL C


 *Website: www.operationsamahan.org*

OPERATION SAMAHAN - NATIONAL C

Provider ID: 417102

 2743 HIGHLAND AVE
NATIONAL CITY, CA
91950-7410

 *Phone: 844-200-2426*


 *After Hours Phone:
844-200-2426*

License Number: NP95000203

NPI: 1801907449


Accepting New Patients: Yes

 *Site English Spoken: Yes*

 *Site Languages(s) Spoken:
Tagalog, Lao, Spanish*

Cultural Competency: No

American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal


Medical Group/IPA:


OPERATION SAMAHAN -
NATIONAL C


 Website: www.operationsamahan.org

**OPERATION SAMAHAN -
NATIONAL C**

Provider ID: 417102

 2743 HIGHLAND AVE
NATIONAL CITY, CA
91950-7410

 Phone: 844-200-2426


 After Hours Phone:
844-200-2426

License Number: NP22974

NPI: 1801907449

Accepting New Patients: Yes


 Site English Spoken: Yes

 Site Languages(s) Spoken:
Tagalog, Lao, Spanish

Cultural Competency: No


American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:


OPERATION SAMAHAN -
NATIONAL C

 Website: www.operationsamahan.org


**OPERATION SAMAHAN
GRANGER SCHOOL BASED**

Provider ID: 418302

 2101 GRANGER AVE
NATIONAL CITY, CA
91950-6208

 Phone: 844-200-2426

Fax: 619-434-8999

 After Hours Phone:
844-200-2426

NPI: 1801907449

Accepting New Patients: Yes

 Site English Spoken: Yes


Cultural Competency: No

American Sign Language (ASL):

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:


OPERATION SAMAHAN
GRANGER SCHOOL BASED

 Website: www.operationsamahan.org


**OPERATION SAMAHAN
GRANGER SCHOOL BASED**

Provider ID: 418302

 2101 GRANGER AVE
NATIONAL CITY, CA
91950-6208

 Phone: 844-200-2426

Fax: 619-434-8999

 After Hours Phone:
844-200-2426

License Number: 550002622


NPI: 1801907449

Accepting New Patients: Yes

 Site English Spoken: Yes


Cultural Competency: No

American Sign Language (ASL):

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:


OPERATION SAMAHAN
GRANGER SCHOOL BASED

 Website: www.operationsamahan.org

**OPERATION SAMAHAN
GRANGER SCHOOL BASED**

Provider ID: 418302

 2101 GRANGER AVE
NATIONAL CITY, CA
91950-6208

 Phone: 844-200-2426

 After Hours Phone:
844-200-2426

License Number: NP95000203

NPI: 1801907449

Accepting New Patients: Yes

 Site English Spoken: Yes


Cultural Competency: No

American Sign Language (ASL):

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA:


OPERATION SAMAHAN
GRANGER SCHOOL BASED

 Website: www.operationsamahan.org


**FAMILY HEALTH CTR SD
NATIONAL CITY**

Provider ID: 418930

 1000 EUCLID AVE
NATIONAL CITY, CA
91950-3856

 Phone: 619-515-2399

Fax: 619-269-0053

 After Hours Phone:
619-515-2399

License Number: 550000465

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal


HEALTH CTR SD NATIONAL CITY

 Website: www.fhcsd.org


OPERATION SAMAHAN GRANGER SCHOOL BASED

Provider ID: 418302

 2101 GRANGER AVE
NATIONAL CITY, CA 91950

 Phone: (844) 200-2426

Fax: (619) 434-8999

 After Hours Phone: (844) 200-2426

License Number: 550002622

NPI: 1205134517

Accepting New Patients: Yes

Min/Max Age: 0\150

 Site English Spoken: Y

Cultural Competency: N

 Hours: M-F


8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: Operation Samahan

 Website: www.operationsamahan.org

OPERATION SAMAHAN - NATIONAL C

Provider ID: 417102

 2743 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (844) 200-2426

Fax: (619) 474-3919

 After Hours Phone: (844) 200-2426


License Number: 090000183

NPI: 1801907449

Accepting New Patients: Yes

Min/Max Age: 0\150

 Site English Spoken: Y

 Site Languages(s) Spoken: Tagalog, Lao, Spanish

Cultural Competency: N

 Hours: M-TH

8:00AM-6:00PM


F 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: Operation Samahan

 Website: www.operationsamahan.org


SAN YSIDRO HEALTH PARADISE HILLS

Provider ID: 227418

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

 Phone: (619) 662-4100

Fax: (619) 259-2807


 After Hours Phone: (619) 662-4100

NPI: 1598907487

Accepting New Patients: Yes

Min/Max Age: 0\150

 Site English Spoken: Y

 Site Languages(s) Spoken: Tagalog, Spanish

Cultural Competency: N

 Hours: M-F

8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP of Southern Cal-PHP


 Website: syhealth.org/clinic

s/paradise-hills-family-clinic

SAN YSIDRO HEALTH SOUTH BAY

Provider ID: 361428

 330 E 8TH ST
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

Fax: (619) 434-3514


 After Hours Phone: (619) 662-4100

NPI: 1851757215

Accepting New Patients: Yes

Min/Max Age: 0\150

 Site English Spoken: Y

 Site Languages(s) Spoken: Spanish, Tagalog


Cultural Competency: N

 Hours: M-F

8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP of Southern Cal-PHP

 Website: www.syhealth.org


Email:

dinah.pierce@syhealth.org

SAN YSIDRO HEALTH NATIONAL CITY

Provider ID: 227412

 1136 D AVE
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

Fax: (619) 474-3722

 After Hours Phone: (619) 662-4100

NPI: 1003869363


Accepting New Patients: Yes

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal

Min/Max Age: 0\150

 Site English Spoken: Y

 Site Languages(s) Spoken: Spanish


Cultural Competency: N

 Hours: M-F
8:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP of Southern Cal-PHP

 Website: syhealth.org/clinics/national-city-family-clinic-1

FAMILY HEALTH CTR SD NATIONAL CITY

Provider ID: 418930

 1000 EUCLID AVE
NATIONAL CITY, CA 91950

 Phone: (619) 515-2399

Fax: (619) 269-0053

 After Hours Phone: (619)
515-2399


License Number: 550000465

NPI: 1417409228


Accepting New Patients: Yes

Min/Max Age: 0\150

 Site English Spoken: Y
Cultural Competency: N

 Hours: M 8:30AM-3:30PM
TU 10:30AM-5:30PM
W 8:30AM-3:30PM
TH 10:30AM-5:30PM
F 8:30AM-3:30PM

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: Family

Health Centers of San Diego


 Website: www.fhcsd.org

Email: lucinaj@fhcsd.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185270

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (619) 434-7308

Fax: (619) 434-7310


 After Hours Phone: (619)
434-7308

NPI: 1336353721

Accepting New Patients: Yes

Min/Max Age: 0\150

 Site English Spoken: Y
Cultural Competency: N

 Hours: TH 8:00AM-2:00PM
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: La Maestra Family Clinic


 Website: www.lamaestra.org


Email: aschmaltz@lamaestra.org


OCEANSIDE

VISTA COMMUNITY CLINIC

Provider ID: 206341

 4700 N RIVER RD
OCEANSIDE, CA
92057-6043

 Phone: 760-631-5000

 After Hours Phone:
760-631-5000

License Number: NP95016368

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: VISTA COMMUNITY CLINIC


 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206341

 4700 N RIVER RD
OCEANSIDE, CA 2057-6043

 Phone: 760-631-5000

 After Hours Phone:
760-631-5000


License Number: A149340

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: VISTA COMMUNITY CLINIC


 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206341

 4700 N RIVER RD
OCEANSIDE, CA 2057-6043

 Phone: 760-631-5000

 After Hours Phone:
760-631-5000

License Number: NP95003571

NPI: 1598122871

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: VISTA


COMMUNITY CLINIC


 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206341

 4700 N RIVER RD
OCEANSIDE, CA 2057-6043

 Phone: 760-631-5000

 After Hours Phone:
760-631-5000

License Number: NP95009284

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: VISTA


COMMUNITY CLINIC

 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206341

 4700 N RIVER RD
OCEANSIDE, CA 2057-6043

 Phone: 760-631-5000

Fax: 760-414-3731

 After Hours Phone:
760-631-5000

License Number: A130883

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: VISTA


COMMUNITY CLINIC


 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

HORNE STREET

Provider ID: 402436

 517 N HORNE ST
OCEANSIDE, CA
92054-2518

 Phone: 760-631-5000

Fax: 760-414-3892

 After Hours Phone:
760-631-5000

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: VISTA

COMMUNITY CLINIC HORNE
STREET


 Website: N/A

VISTA COMMUNITY CLINIC


PIER VIEW WAY

Provider ID: 402434

 818 PIER VIEW WAY
OCEANSIDE, CA
92054-2803

 Phone: 760-631-5000

Fax: 760-414-3892

 After Hours Phone:
760-631-5000

License Number: 80000510

NPI: 1598122871

Accepting New Patients: No

Site English Spoken: Yes

Cultural Competency: Yes

American Sign Language (ASL):


N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: VISTA

COMMUNITY CLINIC PIER


VIEW WAY


 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC


HORNE STREET

Provider ID: 402436

 517 N HORNE ST
OCEANSIDE, CA
92054-2518

 Phone: 760-631-5000

Fax: 760-414-3892

 After Hours Phone:
760-631-5000

License Number: 80000745

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: Yes

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: VISTA

COMMUNITY CLINIC HORNE

STREET

 Website: N/A

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

VISTA COMMUNITY CLINIC PIER VIEW WAY

Provider ID: 402434

818 PIER VIEW WAY
OCEANSIDE, CA
92054-2803

Phone: 760-631-5000

Fax: 760-414-3892

After Hours Phone:
760-631-5000

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: VISTA
COMMUNITY CLINIC PIER
VIEW WAY

Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206341

4700 N RIVER RD
OCEANSIDE, CA 2057-6043

Phone: 760-631-5000

After Hours Phone:
760-631-5000

License Number: 20A18374

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: VISTA

COMMUNITY CLINIC

Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206341

4700 N RIVER RD
OCEANSIDE, CA 2057-6043

Phone: 760-631-5000

After Hours Phone:
760-631-5000

License Number: 20A8949

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: VISTA
COMMUNITY CLINIC

Website: www.vistacommunityclinic.org

TRUECARE

Provider ID: 480315

3220 MISSION AVE STE 1
OCEANSIDE, CA
92058-1354

Phone: 760-891-4667

After Hours Phone:
760-891-4667

License Number: A131678

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: TRUECARE

Website: N/A

TRUECARE

Provider ID: 480315

3220 MISSION AVE STE 1
OCEANSIDE, CA
92058-1354

Phone: 760-736-6767

After Hours Phone:
760-736-6767

License Number: NP21368

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: TRUECARE

Website: N/A

TRUECARE

Provider ID: 480315

3220 MISSION AVE STE 1
OCEANSIDE, CA
92058-1354

Phone: 760-433-3155

Fax: 760-736-8740

After Hours Phone:
760-433-3155

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: TRUECARE

Website: N/A

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

TRUECARE

Provider ID: 480315

3220 MISSION AVE STE 1
OCEANSIDE, CA
92058-1354

Phone: 760-433-3155

Fax: 760-736-8740

After Hours Phone:
760-433-3155

License Number: 80000240

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: TRUECARE

Website: N/A

VISTA COMMUNITY CLINIC HORNE STREET

Provider ID: 402436

517 N HORNE ST
OCEANSIDE, CA
92054-2518

Phone: 760-631-5000

After Hours Phone:
760-631-5000

License Number: 20A17371

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: VISTA
COMMUNITY CLINIC HORNE

STREET

Website: N/A

VISTA COMMUNITY CLINIC HORNE STREET

Provider ID: 402436

517 N HORNE ST
OCEANSIDE, CA
92054-2518

Phone: 760-631-5000

After Hours Phone:
760-631-5000

License Number: NP95006826

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: VISTA
COMMUNITY CLINIC HORNE
STREET

Website: N/A

VISTA COMMUNITY CLINIC HORNE STREET

Provider ID: 402436

517 N HORNE ST
OCEANSIDE, CA
92054-2518

Phone: 760-631-5000

After Hours Phone:
760-631-5000

License Number: NP95007885

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: VISTA
COMMUNITY CLINIC HORNE
STREET

Website: N/A

TRUECARE

Provider ID: 480315

3220 MISSION AVE STE 1
OCEANSIDE, CA
92058-1354

Phone: 760-433-3155

After Hours Phone:
760-433-3155

License Number: PA53036
NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: TRUECARE

Website: N/A

TRUECARE

Provider ID: 480315

3220 MISSION AVE STE 1
OCEANSIDE, CA
92058-1354

Phone: 760-433-3155

After Hours Phone:
760-433-3155

License Number: PA19825
NPI: 1598122871



Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal


 Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
 Website: N/A

TRUECARE

Provider ID: 296476

 605 CROUCH ST BLDG C
OCEANSIDE, CA
92054-4415

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767

License Number: 20A7241

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: TRUECARE

 Website: www.ihpsocal.org

TRUECARE

Provider ID: 296476

 605 CROUCH ST BLDG C
OCEANSIDE, CA
92054-4415

 Phone: 760-757-4566

 After Hours Phone:
760-757-4566

License Number: 20A15689

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No


American Sign Language (ASL):


N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE


 Website: www.ihpsocal.org

TRUECARE

Provider ID: 296476

 605 CROUCH ST BLDG C
OCEANSIDE, CA
92054-4415

 Phone: 760-757-4566

 After Hours Phone:
760-757-4566

License Number: C152937

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes


Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: TRUECARE


 Website: www.ihpsocal.org

TRUECARE

Provider ID: 296476

 605 CROUCH ST BLDG C
OCEANSIDE, CA
92054-4415

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767

License Number: A131678

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: TRUECARE


 Website: www.ihpsocal.org

TRUECARE

Provider ID: 296476

 605 CROUCH ST BLDG C
OCEANSIDE, CA
92054-4415

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767

License Number: NP95012681

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes


Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: TRUECARE


 Website: www.ihpsocal.org

TRUECARE

Provider ID: 296476

 605 CROUCH ST BLDG C
OCEANSIDE, CA
92054-4415

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767

License Number: NP95013879

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: TRUECARE N
 Website: www.ihpsocal.org

TRUECARE

Provider ID: 296477
 605 CROUCH ST BLDG C
OCEANSIDE, CA
92054-4415
 Phone: 760-757-4566
Fax: 760-757-3004
 After Hours Phone:
760-757-4566
License Number: A116562
NPI: 1598122871

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org

TRUECARE

Provider ID: 296478
 605 CROUCH ST BLDG C
OCEANSIDE, CA
92054-4415
 Phone: 760-757-4566
 After Hours Phone:
760-757-4566
License Number: NP21368
NPI: 1598122871

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: TRUECARE N
 Website: www.ihpsocal.org

TRUECARE

Provider ID: 296479
 605 CROUCH ST BLDG C
OCEANSIDE, CA
92054-4415
 Phone: 760-757-4566
 After Hours Phone:
760-757-4566
License Number: A64435
NPI: 1598122871

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org

TRUECARE

Provider ID: 296476
 605 CROUCH ST BLDG C
OCEANSIDE, CA
92054-4415
 Phone: 760-757-4566
Fax: 760-757-3004
 After Hours Phone:

760-757-4566
License Number: A66289
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org

TRUECARE





Provider ID: 296476
 605 CROUCH ST BLDG C
OCEANSIDE, CA
92054-4415
 Phone: 760-757-4566
Fax: 760-736-8740
 After Hours Phone:
760-757-4566
License Number: 80000240
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org

TRUECARE






Provider ID: 296476
 605 CROUCH ST BLDG C
OCEANSIDE, CA

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal






92054-4415
 Phone: 760-757-4566
 After Hours Phone:
760-757-4566
License Number: PA53036
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org

TRUECARE

Provider ID: 296476
 605 CROUCH ST BLDG C
OCEANSIDE, CA
92054-4415
 Phone: 760-757-4566
 After Hours Phone:
760-757-4566
License Number: PA22667
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org

TRUECARE

Provider ID: 296476







 605 CROUCH ST BLDG C
OCEANSIDE, CA
92054-4415
 Phone: 760-757-4566
Fax: 760-736-8740
 After Hours Phone:
760-757-4566
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org

VISTA COMMUNITY CLINIC




Provider ID: 206341
 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000
License Number: 080000002
NPI: 1316501562
Accepting New Patients: Yes
Min/Max Age: 0\999
 Site English Spoken: Y
Cultural Competency: N
 Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP of

Southern Cal-PHP
 Website: [www.vistacommu
nityclinic.org](http://www.vistacommu
nityclinic.org)

VISTA COMMUNITY CLINIC

Provider ID: 206341
 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000
License Number: 550003781
NPI: 1316501562
Accepting New Patients: Yes
Min/Max Age: 0\999
 Site English Spoken: Y
Cultural Competency: N
 Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP of
Southern Cal-PHP
 Website: [www.vistacommu
nityclinic.org](http://www.vistacommu
nityclinic.org)


VISTA COMMUNITY CLINIC

Provider ID: 206341
 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000
License Number: 550004110
NPI: 1316501562
Accepting New Patients: Yes
Min/Max Age: 0\999

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal

 Site English Spoken: Y
Cultural Competency: N

 Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP of Southern Cal-PHP

 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206341

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000


License Number: 080000002

NPI: 1649662719

Accepting New Patients: Yes

Min/Max Age: 0\999

 Site English Spoken: Y
Cultural Competency: N

 Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP of Southern Cal-PHP

 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206341

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000


License Number: 550004110

NPI: 1851300123

Accepting New Patients: Yes

Min/Max Age: 0\999

 Site English Spoken: Y
Cultural Competency: N

 Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP of Southern Cal-PHP

 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206341

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

Fax: (760) 414-3892


 After Hours Phone: (760) 631-5000


License Number: 550003781

NPI: 1851300123

Accepting New Patients: Yes

Min/Max Age: 0\999

 Site English Spoken: Y
Cultural Competency: N

 Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP of Southern Cal-PHP

 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206341

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000


License Number: 550003781

NPI: 1649662719

Accepting New Patients: Yes

Min/Max Age: 0\999

 Site English Spoken: Y
Cultural Competency: N

 Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP of Southern Cal-PHP

 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206341

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

License Number: 550004110

NPI: 1649662719

Accepting New Patients: Yes

Min/Max Age: 0\999

 Site English Spoken: Y

Cultural Competency: N


 Hours: M-F

8:00AM-5:00PM

SA 9:00AM-4:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP of Southern Cal-PHP


 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206341

 4700 N RIVER RD

OCEANSIDE, CA 92057

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000

License Number: 080000002

NPI: 1851300123

Accepting New Patients: Yes

Min/Max Age: 0\999

 Site English Spoken: Y

Cultural Competency: N

 Hours: M-F

8:00AM-5:00PM

SA 9:00AM-4:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP of Southern Cal-PHP

 Website: www.vistacommunityclinic.org


nityclinic.org

TRUECARE

Provider ID: 480247

 2210 MESA DR STE 300

OCEANSIDE, CA 92054

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760) 736-6767

License Number: 080000531

NPI: 1245246917

Accepting New Patients: Yes

Min/Max Age: 0\150

 Site English Spoken: Y

Cultural Competency: N

 Hours: M-F

8:00AM-5:00PM

SA 8:00AM-4:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP of Southern Cal-PHP

 Website: N/A


VISTA COMMUNITY CLINIC

HORNE STREET

Provider ID: 402436

 517 N HORNE ST

OCEANSIDE, CA 92054

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000

License Number: 080000745

NPI: 1609094036

Accepting New Patients: Yes

Min/Max Age: 0\999

 Site English Spoken: Y

Cultural Competency: N

 Hours: M-F

8:00AM-5:00PM

SA 9:00AM-4:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP of Southern Cal-PHP

 Website: www.vistacommunityclinic.org


VISTA COMMUNITY CLINIC

HORNE STREET

Provider ID: 402436

 517 N HORNE ST

OCEANSIDE, CA 92054

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000

License Number: 080000745

NPI: 1609094036

Accepting New Patients: Yes

Min/Max Age: 0\999

 Site English Spoken: Y

Cultural Competency: N

 Hours: M-F

8:00AM-5:00PM

SA 9:00AM-4:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP of Southern Cal-PHP

 Website: www.vistacommunityclinic.org

TRUECARE

Provider ID: 480247

 2210 MESA DR STE 300

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

OCEANSIDE, CA 92054
☎ Phone: (760) 736-6767
Fax: (760) 736-6744
🕒 After Hours Phone: (760) 736-6767
License Number: 080000637
NPI: 1245246917
Accepting New Patients: Yes
Min/Max Age: 0\150
🗣 Site English Spoken: Y
Cultural Competency: N
🕒 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-4:30PM
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal-PHP
🌐 Website: N/A

VISTA COMMUNITY CLINIC PIER VIEW WAY

Provider ID: 402434
📍 818 PIER VIEW WAY
OCEANSIDE, CA 92054
☎ Phone: (760) 631-5000
Fax: (760) 414-3892
🕒 After Hours Phone: (760) 631-5000
License Number: 080000510
NPI: 1629357355
Accepting New Patients: Yes
Min/Max Age: 0\999
🗣 Site English Spoken: Y
Cultural Competency: N
🕒 Hours: M-TU
8:00AM-5:00PM
W 8:00AM-7:00PM
TH-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal-PHP
🌐 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC PIER VIEW WAY

Provider ID: 402434
📍 818 PIER VIEW WAY
OCEANSIDE, CA 92054
☎ Phone: (760) 631-5000
Fax: (760) 414-3892
🕒 After Hours Phone: (760) 631-5000
License Number: 080000510
NPI: 1629357355
Accepting New Patients: Yes
Min/Max Age: 0\999

🗣 Site English Spoken: Y
Cultural Competency: N

🕒 Hours: M-TU
8:00AM-5:00PM
W 8:00AM-7:00PM
TH-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal-PHP
🌐 Website: www.vistacommunityclinic.org

PAUMA VALLEY

NEIGHBORHOOD HEALTHCARE PAUMA VALLEY

📍 16650 HIGHWAY 76
PAUMA VALLEY, CA 92061-9524
☎ Phone: 760-742-9919
Fax: 858-633-4696
🕒 After Hours Phone: 760-742-9919
License Number: 80000611
NPI: 1598122871
Accepting New Patients: Yes
🗣 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
Medical Group/IPA: NEIGHBORHOOD HEALTHCARE PAUMA VALLEY
🌐 Website: www.ihpsocal.org

NEIGHBORHOOD HEALTHCARE PAUMA VALLEY

Provider ID: 206267
📍 16650 HIGHWAY 76
PAUMA VALLEY, CA 92061-9524
☎ Phone: 760-742-9919
Fax: 858-633-4696
🕒 After Hours Phone: 760-742-9919
NPI: 1598122871
Accepting New Patients: Yes
🗣 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
Medical Group/IPA: NEIGHBORHOOD

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

HEALTHCARE PAUMA VALLEY
Website: www.ihpsocal.org

NEIGHBORHOOD

HEALTHCARE PAUMA VALLEY
Provider ID: 206267

16650 HIGHWAY 76
PAUMA VALLEY, CA
92061-9524

Phone: 760-742-9919

After Hours Phone:
760-742-9919

License Number: A114419

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE PAUMA VALLEY

Website: www.ihpsocal.org

NEIGHBORHOOD

HEALTHCARE PAUMA VALLEY

Provider ID: 206267

16650 HIGHWAY 76
PAUMA VALLEY, CA
92061-9524

Phone: 760-742-9919

After Hours Phone:
760-742-9919

License Number: G61829

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE PAUMA VALLEY

Website: www.ihpsocal.org

POWAY

NEIGHBORHOOD

HEALTHCARE GOLD FAMILY

HEALTH CENTER

Provider ID: 481187

13010 POWAY RD
POWAY, CA 92064-4520

Phone: 858-218-3000

Fax: 360-462-2742

After Hours Phone:
858-218-3000

License Number: 550004321

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE GOLD FAMILY

HEALTH CENTER

Website: N/A

NEIGHBORHOOD

HEALTHCARE GOLD FAMILY

HEALTH CENTER

Provider ID: 481187

13010 POWAY RD
POWAY, CA 92064-4520

Phone: 858-218-3000

Fax: 360-462-2742

After Hours Phone:
858-218-3000

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE GOLD FAMILY

HEALTH CENTER

Website: N/A

NEIGHBORHOOD

HEALTHCARE GOLD FAMILY
HEALTH CENTER

Provider ID: 481187

13010 POWAY RD
POWAY, CA 92064-4520

Phone: 858-218-3000

After Hours Phone:
858-218-3000

License Number: A120771

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE GOLD FAMILY

HEALTH CENTER

Website: N/A

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

NEIGHBORHOOD

HEALTHCARE GOLD FAMILY HEALTH CENTER

Provider ID: 481187

13010 POWAY RD
POWAY, CA 92064-4520

Phone: 858-218-3000

After Hours Phone:
858-218-3000

License Number: PA23310

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE GOLD FAMILY HEALTH CENTER

Website: N/A

NEIGHBORHOOD

HEALTHCARE GOLD FAMILY HEALTH CENTER

Provider ID: 481187

13010 POWAY RD
POWAY, CA 92064-4520

Phone: 858-218-3000

After Hours Phone:
858-218-3000

License Number: A119661

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

Medical Group/IPA:

NEIGHBORHOOD

HEALTHCARE GOLD FAMILY HEALTH CENTER

Website: N/A

NEIGHBORHOOD

HEALTHCARE GOLD FAMILY HEALTH CENTER

Provider ID: 481187

13010 POWAY RD
POWAY, CA 92064

Phone: (858) 218-3000

Fax: (360) 462-2742

After Hours Phone: (858)
218-3000

License Number: 550004321

NPI: 1023518768

Accepting New Patients: Yes

Min/Max Age: 0\150

Site English Spoken: Y
Cultural Competency: N

Hours: M-F
8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP of
Southern Cal-PHP

Website: N/A

RAMONA

TRUECARE

Provider ID: 449438

220 ROTANZI ST
RAMONA, CA 92065

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)

736-6767

License Number: 080000149

NPI: 1245246917

Accepting New Patients: Yes

Min/Max Age: 0\150

Site English Spoken: Y
Cultural Competency: N

Hours: M-F
8:00AM-5:00PM

SA 8:00AM-0:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP of
Southern Cal-PHP

Website: www.ihpsocal.org

SAN DIEGO

NESTOR COMMUNITY HEALTH CENTER

Provider ID: 214492

1016 OUTER RD
SAN DIEGO, CA 92154-1351

Phone: 619-429-3733

After Hours Phone:
619-429-3733

License Number: A112781

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Site Language(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: NESTOR
COMMUNITY HEALTH CENTER

Website: www.ibclinic.org












D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal






NESTOR COMMUNITY HEALTH CENTER Provider ID: 214492  1016 OUTER RD SAN DIEGO, CA 92154-1351  Phone: 619-429-3733  After Hours Phone: 619-429-3733 License Number: A165398 NPI: 1598122871 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: Yes <input type="checkbox"/> Site Languages(s) Spoken: Spanish Cultural Competency: No American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: NESTOR COMMUNITY HEALTH CENTER  Website: www.ibclinic.org	PROVIDER Medical Group/IPA: SAN DIEGO AMERICAN INDIAN HEALTH CENTER  Website: www.sdaihc.org	Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: Yes <input type="checkbox"/> Site Languages(s) Spoken: Spanish Cultural Competency: No American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: NESTOR COMMUNITY HEALTH CENTER  Website: www.ibclinic.org
SAN DIEGO AMERICAN INDIAN HEALTH CENTER Provider ID: 207382  2630 1ST AVE SAN DIEGO, CA 92103-6599  Phone: 619-234-2158 Fax: 619-234-0206  After Hours Phone: 619-234-2158 NPI: 1598122871 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: yes <input type="checkbox"/> Site Languages(s) Spoken: Korean, Spanish, Hindi Cultural Competency: No American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: NESTOR COMMUNITY HEALTH CENTER  Website: www.ibclinic.org	SAN DIEGO AMERICAN INDIAN HEALTH CENTER Provider ID: 207382  2630 1ST AVE SAN DIEGO, CA 92103-6599  Phone: 619-234-2158 Fax: 619-234-0206  After Hours Phone: 619-234-2158 License Number: 90000168 NPI: 1598122871 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: yes <input type="checkbox"/> Site Languages(s) Spoken: Korean, Spanish, Hindi Cultural Competency: No American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: SAN DIEGO AMERICAN INDIAN HEALTH CENTER  Website: www.sdaihc.org	NESTOR COMMUNITY HEALTH CENTER Provider ID: 214492  1016 OUTER RD SAN DIEGO, CA 92154-1351  Phone: 619-429-3733 Fax: 619-628-5550  After Hours Phone: 619-429-3733 NPI: 1598122871 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: Yes <input type="checkbox"/> Site Languages(s) Spoken: Spanish Cultural Competency: No American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: NESTOR COMMUNITY HEALTH CENTER  Website: www.ibclinic.org
NESTOR COMMUNITY HEALTH CENTER Provider ID: 214492  1016 OUTER RD SAN DIEGO, CA 92154-1351  Phone: 619-429-3733 Fax: 619-628-5550  After Hours Phone: 619-429-3733 License Number: 550001474 NPI: 1598122871 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: yes <input type="checkbox"/> Site Languages(s) Spoken: Korean, Spanish, Hindi Cultural Competency: No American Sign Language (ASL): N  Accessibility: CONTACT	NESTOR COMMUNITY HEALTH CENTER Provider ID: 214492  1016 OUTER RD SAN DIEGO, CA 92154-1351  Phone: 619-429-3733 Fax: 619-628-5550  After Hours Phone: 619-429-3733 License Number: 550001474 NPI: 1598122871	NESTOR COMMUNITY HEALTH CENTER Provider ID: 214492  1016 OUTER RD SAN DIEGO, CA 92154-1351  Phone: 619-429-3733

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal






D1. Clínicas de salud con calificación federal

 <i>After Hours Phone:</i> 619-429-3733 <i>License Number:</i> NP22031 <i>NPI:</i> 1598122871 <i>Accepting New Patients:</i> Yes <input type="checkbox"/> <i>Site English Spoken:</i> Yes <input type="checkbox"/> <i>Site Languages(s) Spoken:</i> Spanish <i>Cultural Competency:</i> No <i>American Sign Language (ASL):</i> N  <i>Accessibility:</i> CONTACT PROVIDER <i>Medical Group/IPA:</i> NESTOR COMMUNITY HEALTH CENTER  <i>Website:</i> www.ibclinic.org	<i>SAN DIEGO, CA 92114-6201</i>  <i>Phone:</i> 619-662-4100 <i>Fax:</i> 619-662-4158  <i>After Hours Phone:</i> 619-662-4100 <i>NPI:</i> 1598122871 <i>Accepting New Patients:</i> Yes <input type="checkbox"/> <i>Site English Spoken:</i> Yes <i>Cultural Competency:</i> No <i>American Sign Language (ASL):</i> N  <i>Accessibility:</i> CONTACT PROVIDER <i>Medical Group/IPA:</i> KING CHAVEZ HEALTH CENTER  <i>Website:</i> www.ihpsocal.org	<i>SAN DIEGO, CA 92114-6201</i>  <i>Phone:</i> 619-662-4100  <i>After Hours Phone:</i> 619-662-4100 <i>License Number:</i> A96919 <i>NPI:</i> 1598122871 <i>Accepting New Patients:</i> Yes <input type="checkbox"/> <i>Site English Spoken:</i> Yes <i>Cultural Competency:</i> No <i>American Sign Language (ASL):</i> N  <i>Accessibility:</i> CONTACT PROVIDER <i>Medical Group/IPA:</i> KING CHAVEZ HEALTH CENTER  <i>Website:</i> www.ihpsocal.org
--	--	---






KING CHAVEZ HEALTH CENTER

Provider ID: 451167
 950 S EUCLID AVE
SAN DIEGO, CA 92114-6201
 *Phone:* 619-662-4100
 *After Hours Phone:*
619-662-4100
License Number: NP8563
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility:* CONTACT
PROVIDER
Medical Group/IPA: KING
CHAVEZ HEALTH CENTER
 *Website:* www.ihpsocal.org


KING CHAVEZ HEALTH CENTER

Provider ID: 451167
 950 S EUCLID AVE
SAN DIEGO, CA 92114-6201
 *Phone:* 619-662-4100
 *After Hours Phone:*
619-662-4100
License Number: A79383
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility:* CONTACT
PROVIDER
Medical Group/IPA: KING
CHAVEZ HEALTH CENTER
 *Website:* www.ihpsocal.org


KING CHAVEZ HEALTH CENTER

Provider ID: 451167
 950 S EUCLID AVE
SAN DIEGO, CA 92114-6201
 *Phone:* 619-662-4100
 *After Hours Phone:*
619-662-4100
License Number: NP15657
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility:* CONTACT
PROVIDER
Medical Group/IPA: KING
CHAVEZ HEALTH CENTER
 *Website:* www.ihpsocal.org


KING CHAVEZ HEALTH CENTER

Provider ID: 451167
 950 S EUCLID AVE

KING CHAVEZ HEALTH CENTER





Provider ID: 451167
 950 S EUCLID AVE

KING CHAVEZ HEALTH CENTER






Provider ID: 451167
 950 S EUCLID AVE

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

SAN DIEGO, CA 92114-6201
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: DC27523
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: KING
CHAVEZ HEALTH CENTER
 Website: www.ihpsocal.org

KING CHAVEZ HEALTH CENTER






Provider ID: 451167
 950 S EUCLID AVE
SAN DIEGO, CA 92114-6201
 Phone: 619-428-4463
 After Hours Phone:
619-428-4463
License Number: G71855
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: KING
CHAVEZ HEALTH CENTER
 Website: www.ihpsocal.org

KING CHAVEZ HEALTH CENTER

Provider ID: 451167
 950 S EUCLID AVE

SAN DIEGO, CA 92114-6201
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: 20A7435
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: KING
CHAVEZ HEALTH CENTER
 Website: www.ihpsocal.org

KING CHAVEZ HEALTH CENTER






Provider ID: 451167
 950 S EUCLID AVE
SAN DIEGO, CA 92114-6201
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: 20A8204
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: KING
CHAVEZ HEALTH CENTER
 Website: www.ihpsocal.org

KING CHAVEZ HEALTH CENTER

Provider ID: 451167
 950 S EUCLID AVE

SAN DIEGO, CA 92114-6201
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A125329
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: KING
CHAVEZ HEALTH CENTER
 Website: www.ihpsocal.org

KING CHAVEZ HEALTH CENTER

Provider ID: 451167
 950 S EUCLID AVE
SAN DIEGO, CA 92114-6201
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A101017
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: KING
CHAVEZ HEALTH CENTER
 Website: www.ihpsocal.org


KING CHAVEZ HEALTH CENTER

Provider ID: 451167
 950 S EUCLID AVE

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

SAN DIEGO, CA 92114-6201

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A134995

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: KING
CHAVEZ HEALTH CENTER

 Website: www.ihpsocal.org

KING CHAVEZ HEALTH CENTER

Provider ID: 451167

 950 S EUCLID AVE
SAN DIEGO, CA 92114-6201

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100


License Number: A45942

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: KING
CHAVEZ HEALTH CENTER


 Website: www.ihpsocal.org


KING CHAVEZ HEALTH CENTER

Provider ID: 451167

 950 S EUCLID AVE

SAN DIEGO, CA 92114-6201

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A165432

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: KING
CHAVEZ HEALTH CENTER


 Website: www.ihpsocal.org

KING CHAVEZ HEALTH CENTER

Provider ID: 451167

 950 S EUCLID AVE
SAN DIEGO, CA 92114-6201

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A153223

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: KING
CHAVEZ HEALTH CENTER


 Website: www.ihpsocal.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC


Provider ID: 206363

 4725 MARKET ST

SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

Fax: 619-263-2499

 After Hours Phone:
619-515-2560

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

 Website: www.fhcsd.org


DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

Fax: 619-263-2499

 After Hours Phone:
619-515-2560


License Number: A100391

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

FAMILY HLTH CTRS INC

Provider ID: 206363

4725 MARKET ST
SAN DIEGO, CA 92102-4715

Phone: 619-515-2560

After Hours Phone:
619-515-2560

License Number: RN810863

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

4725 MARKET ST
SAN DIEGO, CA 92102-4715

Phone: 619-515-2560

After Hours Phone:
619-515-2560

License Number: PA60864

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

4725 MARKET ST
SAN DIEGO, CA 92102-4715

Phone: 619-515-2560

After Hours Phone:
619-515-2560

License Number: NP95001492

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

4725 MARKET ST
SAN DIEGO, CA 92102-4715

Phone: 619-515-2560

After Hours Phone:
619-515-2560

License Number: NP95000205

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY

HLTH CTRS INC

Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

4725 MARKET ST
SAN DIEGO, CA 92102-4715

Phone: 619-515-2560

After Hours Phone:
619-515-2560

License Number: NP19911

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

4725 MARKET ST
SAN DIEGO, CA 92102-4715

Phone: 619-515-2560

After Hours Phone:
619-515-2560

License Number: NP17362

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):


N

Accessibility: CONTACT
PROVIDER

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal


Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: NP95005321


NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: NP95007000

NPI: 1134155377

Accepting New Patients: Yes


Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: NP95021154

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: NP95009292

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: PA20378

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: PA58081

NPI: 1134155377

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

4725 MARKET ST
SAN DIEGO, CA 92102-4715

Phone: 619-515-2560

After Hours Phone:
619-515-2560

License Number: PA58505

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

4725 MARKET ST
SAN DIEGO, CA 92102-4715

Phone: 619-515-2560

After Hours Phone:
619-515-2560

License Number: A142743

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

4725 MARKET ST
SAN DIEGO, CA 92102-4715

Phone: 619-515-2560

After Hours Phone:
619-515-2560

License Number: A148014

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

4725 MARKET ST
SAN DIEGO, CA 92102-4715

Phone: 619-515-2560

After Hours Phone:
619-515-2560

License Number: A161373

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

4725 MARKET ST
SAN DIEGO, CA 92102-4715

Phone: 619-515-2560

After Hours Phone:
619-515-2560

License Number: A163464

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

Website: www.fhcsd.org


DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: A119689


NPI: 1134155377

Accepting New Patients: Yes


Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: A126187

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: A137260

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: A141057

NPI: 1134155377

Accepting New Patients: Yes


Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: A140912


NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: MT2061555


NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal


NEIGHBORHOODS FAMILY
HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: G78814

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: NP10146

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

 Website: www.fhcsd.org

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560


License Number: DC33150

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560


License Number: G61394

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

 Website: www.fhcsd.org

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560


License Number: A178499

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560


License Number: A164859


NPI: 1134155377

Accepting New Patients: Yes

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715


 Phone: 619-515-2560


 After Hours Phone:
619-515-2560

License Number: A164879

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363


 4725 MARKET ST
SAN DIEGO, CA 92102-4715


 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: C174771

NPI: 1134155377
Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715


 Phone: 619-515-2560


 After Hours Phone:
619-515-2560


License Number: A72005

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715


 Phone: 619-515-2560


 After Hours Phone:
619-515-2560

License Number: C174538

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715


 Phone: 619-515-2560


 After Hours Phone:
619-515-2560

License Number: A118095

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

 4725 MARKET ST
SAN DIEGO, CA 92102-4715
 Phone: 619-515-2560
 After Hours Phone:
619-515-2560

License Number: A116680

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715
 Phone: 619-515-2560
 After Hours Phone:
619-515-2560

License Number: A115598

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715
 Phone: 619-515-2560
 After Hours Phone:
619-515-2560

License Number: A113448

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes


Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715
 Phone: 619-515-2560
 After Hours Phone:
619-515-2560

License Number: A114181

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715
 Phone: 619-515-2560
 After Hours Phone:
619-515-2560

License Number: A108228

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715
 Phone: 619-515-2560
 After Hours Phone:
619-515-2560

License Number: 20A15471

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal


HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: 20A14919

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes


Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: 20A14772

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND


NEIGHBORHOODS FAMILY


HLTH CTRS INC


 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:
619-515-2560

License Number: 20A13745

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

 Website: www.fhcsd.org

SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432

 Phone: 619-662-4100

Fax: 619-858-1003

 After Hours Phone:
619-662-4100

License Number: A88893

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN


YSIDRO HEALTH CHC - OCEAN
VIEW

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432

 Phone: 619-662-4100

Fax: 619-595-0258

 After Hours Phone:
619-662-4100

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN


YSIDRO HEALTH CHC - OCEAN
VIEW

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100




License Number: C55180

NPI: 1598122871

Accepting New Patients: Yes

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal

 *Site English Spoken: yes*
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHC - OCEAN
VIEW
 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432

 *Phone: 619-662-4100*

 *After Hours Phone:*
619-662-4100


License Number: DC33300

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: yes*
Cultural Competency: No

American Sign Language (ASL):
N


 *Accessibility: CONTACT*
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHC - OCEAN
VIEW


 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432

 *Phone: 619-662-4100*

 *After Hours Phone:*
619-662-4100

License Number: C54198

NPI: 1598122871
Accepting New Patients: Yes

 *Site English Spoken: yes*
Cultural Competency: No

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH CHC - OCEAN
VIEW

 *Website: www.ihpsocal.org*

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 *Phone: 619-263-2499*

 *After Hours Phone:*
619-263-2499

License Number: 20A7241

NPI: 1134155377


Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER


Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC


 *Website: www.fhcsd.org*

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 *Phone: 619-515-2420*

 *After Hours Phone:*
619-515-2420

License Number: A113001

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER


Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

 *Website: www.fhcsd.org*

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715

 *Phone: 619-515-2420*

 *After Hours Phone:*
619-515-2420

License Number: A154298

NPI: 1134155377


Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

 *Website: www.fhcsd.org*

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

 4725 MARKET ST
SAN DIEGO, CA 92102-4715
 Phone: 619-515-2420
 After Hours Phone:
619-515-2420

License Number: A68463

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC

 Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST
SAN DIEGO, CA 92102-4715
 Phone: 619-515-2420
 After Hours Phone:
619-515-2420

License Number: 20A11535

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: DIAMOND
NEIGHBORHOODS FAMILY
HLTH CTRS INC


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY

HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
Fax: 619-515-2510

 After Hours Phone:
619-515-2300

License Number: A178494

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N




 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone:
619-515-2300

License Number: RN810863

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N




 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone:
619-515-2300

License Number: SP27677

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N




 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone:
619-515-2300


License Number: RN486421

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LOGAN

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal


HEIGHTS FAMILY HEALTH CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: PT33914

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: PT30272

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Site English Spoken: Yes
Cultural Competency: No

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300


License Number: PA54661

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: PT295463

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300


License Number: PA61677

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300


License Number: PA17864


NPI: 1134155377

Accepting New Patients: Yes

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113


 Phone: 619-515-2300


 After Hours Phone:
619-515-2300

License Number: PA21591

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113


 Phone: 619-515-2300


 After Hours Phone:
619-515-2300

License Number: PA20396

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113


 Phone: 619-515-2300


 After Hours Phone:
619-515-2300


License Number: PA23258

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113


 Phone: 619-515-2300


 After Hours Phone:
619-515-2300

License Number: PA53788

NPI: 1134155377

Accepting New Patients: Yes


 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113


 Phone: 619-515-2300


 After Hours Phone:
619-515-2300

License Number: PA16245

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER




 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone:
619-515-2300

License Number: PA15227

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N




 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone:
619-515-2300

License Number: PA13752

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER




Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY

HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone:
619-515-2300

License Number: NP95022452

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes


Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

 Website: www.fhcsd.org

SHERMAN HEIGHTS FAMILY HLTH CTRS INC

Provider ID: 356145

 2391 ISLAND AVE
SAN DIEGO, CA 92102-2941
 Phone: 619-515-2435
 After Hours Phone:
619-515-2435

License Number: NP95011254

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SHERMAN
HEIGHTS FAMILY HLTH CTRS
INC

 Website: N/A

SHERMAN HEIGHTS FAMILY HLTH CTRS INC

Provider ID: 356145

 2391 ISLAND AVE
SAN DIEGO, CA 92102-2941
 Phone: 619-515-2435
 After Hours Phone:
619-515-2435

License Number: A97036

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SHERMAN
HEIGHTS FAMILY HLTH CTRS
INC

 Website: N/A

SHERMAN HEIGHTS FAMILY HLTH CTRS INC

Provider ID: 356145

 2391 ISLAND AVE
SAN DIEGO, CA 92102-2941
 Phone: 619-515-2435
 After Hours Phone:
619-515-2435

License Number: A80504

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SHERMAN
HEIGHTS FAMILY HLTH CTRS

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

INC


 Website: N/A

FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL


Provider ID: 419529

 2325 COMMERCIAL ST STE 1400

SAN DIEGO, CA 92113-1195

 Phone: 619-515-2422

Fax: 619-269-0053

 After Hours Phone:
619-515-2422

License Number: 550003113

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL


 Website: www.fhcsd.org

FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL


Provider ID: 419529

 2325 COMMERCIAL ST STE 1400

SAN DIEGO, CA 92113-1195

 Phone: 619-515-2422

Fax: 619-269-0053

 After Hours Phone:
619-515-2422

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes


Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL


 Website: www.fhcsd.org


FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL

Provider ID: 419529

 2325 COMMERCIAL ST STE 1400

SAN DIEGO, CA 92113-1195

 Phone: 619-515-2422

 After Hours Phone:
619-515-2422

License Number: PA53788

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes


Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL

 Website: www.fhcsd.org


FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL

Provider ID: 419529

 2325 COMMERCIAL ST STE 1400

SAN DIEGO, CA 92113-1195

 Phone: 619-515-2422

 After Hours Phone:
619-515-2422

License Number: NP95011254

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL


 Website: www.fhcsd.org


FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL

Provider ID: 419529

 2325 COMMERCIAL ST STE 1400

SAN DIEGO, CA 92113-1195

 Phone: 619-515-2422

 After Hours Phone:
619-515-2422

License Number: PA20888

NPI: 1134155377


Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL


 Website: www.fhcsd.org

FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL

Provider ID: 419529





 2325 COMMERCIAL ST STE 1400

SAN DIEGO, CA 92113-1195







 Phone: 619-515-2422

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal







D1. Clínicas de salud con calificación federal

 After Hours Phone:
619-515-2422
License Number: A122238
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: FAMILY
HLTH CTR OF SD SAN DIEGO
COMMERCIAL
 Website: www.fhcsd.org







FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL







Provider ID: 419529
 2325 COMMERCIAL ST STE
1400
SAN DIEGO, CA 92113-1195
 Phone: 619-515-2422
 After Hours Phone:
619-515-2422
License Number: A121451
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: FAMILY
HLTH CTR OF SD SAN DIEGO
COMMERCIAL
 Website: www.fhcsd.org






SHERMAN HEIGHTS FAMILY HLTH CTRS INC

Provider ID: 356145
 2391 ISLAND AVE
SAN DIEGO, CA 92102-2941
 Phone: 619-515-2435
 After Hours Phone:
619-515-2435
License Number: PA16245
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SHERMAN
HEIGHTS FAMILY HLTH CTRS
INC
 Website: N/A

SHERMAN HEIGHTS FAMILY HLTH CTRS INC

Provider ID: 356145
 2391 ISLAND AVE
SAN DIEGO, CA 92102-2941
 Phone: 619-515-2435
 After Hours Phone:
619-515-2435
License Number: PA53788
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SHERMAN
HEIGHTS FAMILY HLTH CTRS
INC
 Website: N/A

**SAN YSIDRO HEALTH 25TH ST
FAMILY MEDICINE**
Provider ID: 517403
 316 25TH ST
SAN DIEGO, CA 92102-3016
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A156607
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH 25TH ST
FAMILY MEDICINE
 Website: N/A

**SHERMAN HEIGHTS FAMILY
HLTH CTRS INC**
Provider ID: 356145
 2391 ISLAND AVE
SAN DIEGO, CA 92102-2941
 Phone: 619-515-2435
Fax: 619-515-2435
 After Hours Phone:
619-515-2435
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SHERMAN
HEIGHTS FAMILY HLTH CTRS
INC

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal


 Website: N/A

SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE

Provider ID: 517403

 316 25TH ST
SAN DIEGO, CA 92102-3016

 Phone: 619-238-5551

 After Hours Phone:
619-238-5551

License Number: A97270

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH 25TH ST
FAMILY MEDICINE

 Website: N/A

FAMILY HEALTH CTR SAN DIEGO-OAK PARK

Provider ID: 418142

 5160 FEDERAL BLVD
SAN DIEGO, CA 92105-5429

 Phone: 619-515-2454

 After Hours Phone:
619-515-2454


License Number: 20A12796

NPI: 1134155377

Accepting New Patients: Yes


Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY


HEALTH CTR SAN DIEGO-OAK
PARK


 Website: www.fhcsd.org

FAMILY HEALTH CTR SAN DIEGO-OAK PARK

Provider ID: 418142

 5160 FEDERAL BLVD
SAN DIEGO, CA 92105-5429

 Phone: 619-515-2454

 After Hours Phone:
619-515-2454

License Number: 20A14772

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HEALTH CTR SAN DIEGO-OAK
PARK


 Website: www.fhcsd.org

FAMILY HEALTH CTR SAN DIEGO-OAK PARK

Provider ID: 418142

 5160 FEDERAL BLVD
SAN DIEGO, CA 92105-5429

 Phone: 619-515-2454

 After Hours Phone:
619-515-2454

License Number: C174538

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HEALTH CTR SAN DIEGO-OAK
PARK


 Website: www.fhcsd.org

SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE

Provider ID: 517403

 316 25TH ST
SAN DIEGO, CA 92102-3016

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: NP20849

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH 25TH ST
FAMILY MEDICINE

 Website: N/A


SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE

Provider ID: 517403

 316 25TH ST
SAN DIEGO, CA 92102-3016

 Phone: 619-662-4100

Fax: 619-238-3807

 After Hours Phone:
619-662-4100

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes
Cultural Competency: No






D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal







<p>American Sign Language (ASL): Site English Spoken: yes N Accessibility: CONTACT PROVIDER Medical Group/IPA: SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE Website: N/A</p>	<p> Site English Spoken: yes Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: SAN YSIDRO HEALTH CHC - OCEAN VIEW Website: www.ihpsocal.org</p>	<p>License Number: 550003556 NPI: 1134155377 Accepting New Patients: Yes Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: FAMILY HEALTH CTR SAN DIEGO-OAK PARK Website: www.fhcsd.org</p>
<p>SAN YSIDRO HEALTH CHC - OCEAN VIEW Provider ID: 227409 3177 OCEAN VIEW BLVD SAN DIEGO, CA 92113-1432 Phone: 619-662-4100 After Hours Phone: 619-662-4100 License Number: A120447 NPI: 1598122871 Accepting New Patients: Yes Site English Spoken: yes Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: SAN YSIDRO HEALTH CHC - OCEAN VIEW Website: www.ihpsocal.org</p>	<p>FAMILY HEALTH CTR SAN DIEGO-OAK PARK Provider ID: 418142 5160 FEDERAL BLVD SAN DIEGO, CA 92105-5429 Phone: 619-515-2454 After Hours Phone: 619-515-2454 License Number: PA58505 NPI: 1134155377 Accepting New Patients: Yes Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: FAMILY HEALTH CTR SAN DIEGO-OAK PARK Website: www.fhcsd.org</p>	<p>FAMILY HEALTH CTR SAN DIEGO-OAK PARK Provider ID: 418142 5160 FEDERAL BLVD SAN DIEGO, CA 92105-5429 Phone: 619-515-2454 Fax: 619-794-2696 After Hours Phone: 619-515-2454 NPI: 1134155377 Accepting New Patients: Yes Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: FAMILY HEALTH CTR SAN DIEGO-OAK PARK Website: www.fhcsd.org</p>
<p>SAN YSIDRO HEALTH CHC - OCEAN VIEW Provider ID: 227409 3177 OCEAN VIEW BLVD SAN DIEGO, CA 92113-1432 Phone: 619-662-4100 After Hours Phone: 619-662-4100 License Number: A112379 NPI: 1598122871 Accepting New Patients: Yes</p>	<p>FAMILY HEALTH CTR SAN DIEGO-OAK PARK Provider ID: 418142 5160 FEDERAL BLVD SAN DIEGO, CA 92105-5429 Phone: 619-515-2454 Fax: 619-794-2696 After Hours Phone: 619-515-2454</p>	<p>SAN YSIDRO HEALTH CHC - OCEAN VIEW Provider ID: 227409 3177 OCEAN VIEW BLVD SAN DIEGO, CA 92113-1432</p>

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal







D1. Clínicas de salud con calificación federal

 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A153414
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHC - OCEAN
VIEW
 Website: www.ihpsocal.org







SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409
 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A120576
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHC - OCEAN
VIEW
 Website: www.ihpsocal.org







SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409
 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A157505
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHC - OCEAN
VIEW
 Website: www.ihpsocal.org






SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409
 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A78373
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHC - OCEAN
VIEW
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHC - OCEAN VIEW


Provider ID: 227409
 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A162332
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH CHC - OCEAN
VIEW
 Website: www.ihpsocal.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone:
619-515-2300
License Number: 20A11535
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: 20A12732

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300


License Number: 20A12653

NPI: 1134155377

Accepting New Patients: Yes


Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LOGAN


HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: 20A14919

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: 20A15743

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: A103099

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: 20A17072

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

American Sign Language (ASL): Site English Spoken: Yes
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone: 619-515-2300
License Number: 20A17478
NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone: 619-515-2300
License Number: A108228
NPI: 1134155377
Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone: 619-515-2300
License Number: A113001
NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone: 619-515-2300
License Number: A114181

NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300
 After Hours Phone: 619-515-2300
License Number: A116680
NPI: 1134155377





Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER







Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 Phone: 619-515-2300

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal



 *After Hours Phone:*
619-515-2300
License Number: A118095
NPI: 1134155377
Accepting New Patients: Yes
 *Site English Spoken:* Yes
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility:* CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 *Website:* www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER







Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 *Phone:* 619-515-2300
 *After Hours Phone:*
619-515-2300
License Number: A121451
NPI: 1134155377
Accepting New Patients: Yes
 *Site English Spoken:* Yes
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility:* CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 *Website:* www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360







 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 *Phone:* 619-515-2300
 *After Hours Phone:*
619-515-2300
License Number: A120043
NPI: 1134155377
Accepting New Patients: Yes
 *Site English Spoken:* Yes
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility:* CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 *Website:* www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER







Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 *Phone:* 619-515-2300
 *After Hours Phone:*
619-515-2300
License Number: A142703
NPI: 1134155377
Accepting New Patients: Yes
 *Site English Spoken:* Yes
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility:* CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 *Website:* www.fhcsd.org

LOGAN HEIGHTS FAMILY

HEALTH CENTER

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 *Phone:* 619-515-2300
 *After Hours Phone:*
619-515-2300
License Number: A122238
NPI: 1134155377
Accepting New Patients: Yes
 *Site English Spoken:* Yes
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility:* CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 *Website:* www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
 *Phone:* 619-515-2300
 *After Hours Phone:*
619-515-2300
License Number: A136616
NPI: 1134155377
Accepting New Patients: Yes
 *Site English Spoken:* Yes
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility:* CONTACT
PROVIDER
Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER
 *Website:* www.fhcsd.org

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:
619-515-2300

License Number: A151631

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:
619-515-2300

License Number: A148014

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH

CENTER

Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:
619-515-2300

License Number: A154298

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:
619-515-2300

License Number: A147939

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:
619-515-2300

License Number: A146838

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:
619-515-2300

License Number: A146111

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

<p>N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER</p> <p> Website: www.fhcsd.org</p> <p>LOGAN HEIGHTS FAMILY HEALTH CENTER</p> <p>Provider ID: 206360</p> <p> 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113</p> <p> Phone: 619-515-2300</p> <p> After Hours Phone: 619-515-2300</p> <p>License Number: A72005</p> <p>NPI: 1134155377</p> <p>Accepting New Patients: Yes</p> <p><input type="checkbox"/> Site English Spoken: Yes</p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER</p> <p> Website: www.fhcsd.org</p> <p>LOGAN HEIGHTS FAMILY HEALTH CENTER</p> <p>Provider ID: 206360</p> <p> 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113</p> <p> Phone: 619-515-2300</p> <p> After Hours Phone: 619-515-2300</p> <p>License Number: A76785</p> <p>NPI: 1134155377</p> <p>Accepting New Patients: Yes</p> <p><input type="checkbox"/> Site English Spoken: Yes</p>	<p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER</p> <p> Website: www.fhcsd.org</p> <p>LOGAN HEIGHTS FAMILY HEALTH CENTER</p> <p>Provider ID: 206360</p> <p> 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113</p> <p> Phone: 619-515-2300</p> <p> After Hours Phone: 619-515-2300</p> <p>License Number: A71671</p> <p>NPI: 1134155377</p> <p>Accepting New Patients: Yes</p> <p><input type="checkbox"/> Site English Spoken: Yes</p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER</p> <p> Website: www.fhcsd.org</p> <p>LOGAN HEIGHTS FAMILY HEALTH CENTER</p> <p>Provider ID: 206360</p> <p> 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113</p> <p> Phone: 619-515-2300</p> <p> After Hours Phone: 619-515-2300</p> <p>License Number: A77126</p> <p>NPI: 1134155377</p>	<p>Accepting New Patients: Yes</p> <p><input type="checkbox"/> Site English Spoken: Yes</p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER</p> <p> Website: www.fhcsd.org</p> <p>LOGAN HEIGHTS FAMILY HEALTH CENTER</p> <p>Provider ID: 206360</p> <p> 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113</p> <p> Phone: 619-515-2300</p> <p> After Hours Phone: 619-515-2300</p> <p>License Number: A80504</p> <p>NPI: 1134155377</p> <p>Accepting New Patients: Yes</p> <p><input type="checkbox"/> Site English Spoken: Yes</p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER</p> <p> Website: www.fhcsd.org</p> <p>LOGAN HEIGHTS FAMILY HEALTH CENTER</p> <p>Provider ID: 206360</p> <p> 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113</p> <p> Phone: 619-515-2300</p> <p> After Hours Phone: 619-515-2300</p>
--	---	---

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal

License Number: A68463
NPI: 1134155377


Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300


License Number: A61687

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300


License Number: A68124

NPI: 1134155377


Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300


License Number: A181809

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: A46161

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: A160489

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

 Website: www.fhcsd.org


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: A163183

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER

 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: A163464

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: A164859

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: A163978

NPI: 1134155377

Accepting New Patients: Yes


Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN


HEIGHTS FAMILY HEALTH CENTER

 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300


License Number: A178499

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: A177462

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No





American Sign Language (ASL):
N



D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal





 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
 *Website: www.fhcsd.org*

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
 *1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113*
 *Phone: 619-515-2300*
 *After Hours Phone:
619-515-2300*
License Number: A177373
NPI: 1134155377
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
 *Website: www.fhcsd.org*





LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
 *1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113*
 *Phone: 619-515-2300*
 *After Hours Phone:
619-515-2300*
License Number: A164889
NPI: 1134155377
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL): N




 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
 *Website: www.fhcsd.org*


LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
 *1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113*
 *Phone: 619-515-2300*
 *After Hours Phone:
619-515-2300*
License Number: A169752
NPI: 1134155377
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
 *Website: www.fhcsd.org*





LOGAN HEIGHTS FAMILY HEALTH CENTER



Provider ID: 206360
 *1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113*
 *Phone: 619-515-2300*
 *After Hours Phone:
619-515-2300*
License Number: A97036
NPI: 1134155377
Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N




 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
 *Website: www.fhcsd.org*

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
 *1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113*
 *Phone: 619-515-2300*
 *After Hours Phone:
619-515-2300*
License Number: A95577
NPI: 1134155377
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
 *Website: www.fhcsd.org*

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360
 *1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113*
 *Phone: 619-515-2300*
 *After Hours Phone:
619-515-2300*
License Number: A93385

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes


Cultural Competency: No

American Sign Language (ASL): Accepting New Patients: Yes

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: DPM4819

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): Accepting New Patients: Yes

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: C174771

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes


Cultural Competency: No

American Sign Language (ASL): Accepting New Patients: Yes

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: NM792

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes


Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: NP10906

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: G81658

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER

 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal

HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: G78814

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: DPM5661

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: NP95011254

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: NP95011313

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH


CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: NP95015780

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: NP95007253

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):


N

 Accessibility: CONTACT
PROVIDER

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: NP95003689

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: NP95000205

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: NP95000602

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300


License Number: NP95001705

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: NP17852

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LOGAN
HEIGHTS FAMILY HEALTH
CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: NP2286

NPI: 1134155377

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Accepting New Patients: Yes

Site English Spoken: Yes


Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER


 Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: NP11778

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER

 Website: www.fhcsd.org

OPERATION SAMAHAN - MIRA MESA

Provider ID: 432308

 9855 ERMA RD STE 105
SAN DIEGO, CA 92131-1007

 Phone: 844-200-2426

Fax: 858-536-8034

 After Hours Phone:

844-200-2426

License Number: 80000146

NPI: 1801907449

Accepting New Patients: Yes

Site English Spoken: yes


Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA:
OPERATION SAMAHAN - MIRA MESA


 Website: www.operationsamahan.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2300

 After Hours Phone:
619-515-2300

License Number: A162946

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:
619-515-2444

License Number: 20A13060

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:
619-515-2444

License Number: 20A11535

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA

 Website: www.fhcsd.org


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:
619-515-2444

License Number: A113001

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-BEACH
AREA


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:
619-515-2444

License Number: 20A14919

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-BEACH
AREA





Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:
619-515-2444

License Number: A108228

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes


Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-BEACH
AREA


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:
619-515-2444

License Number: A116680

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY

HLTH CTR SAN DIEGO-BEACH
AREA




Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:
619-515-2444

License Number: A114181

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-BEACH
AREA





Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:
619-515-2444

License Number: A118095

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):




N


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA
 *Website: www.fhcsd.org*




FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851
 *3705 MISSION BLVD
SAN DIEGO, CA 92109-7104*
 *Phone: 619-515-2444*
 *After Hours Phone:
619-515-2444*
License Number: A163464
NPI: 1134155377

Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851
 *3705 MISSION BLVD
SAN DIEGO, CA 92109-7104*
 *Phone: 619-515-2444*
 *After Hours Phone:
619-515-2444*
License Number: A164859
NPI: 1134155377


Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No


American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851
 *3705 MISSION BLVD
SAN DIEGO, CA 92109-7104*
 *Phone: 619-515-2444*
 *After Hours Phone:
619-515-2444*
License Number: A178499
NPI: 1134155377


Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851
 *3705 MISSION BLVD
SAN DIEGO, CA 92109-7104*
 *Phone: 619-515-2444*
 *After Hours Phone:
619-515-2444*
License Number: A154298
NPI: 1134155377

Accepting New Patients: Yes


 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA

 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-BEACH AREA




Provider ID: 402851
 *3705 MISSION BLVD
SAN DIEGO, CA 92109-7104*
 *Phone: 619-515-2444*
 *After Hours Phone:
619-515-2444*
License Number: A148014
NPI: 1134155377

Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA

 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851
 *3705 MISSION BLVD
SAN DIEGO, CA 92109-7104*
 *Phone: 619-515-2444*
 *After Hours Phone:
619-515-2444*
License Number: A154399

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): Accepting New Patients: Yes

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY


HLTH CTR SAN DIEGO-BEACH AREA


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:
619-515-2444

License Number: A76785

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): Accepting New Patients: Yes

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY


HLTH CTR SAN DIEGO-BEACH AREA

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:
619-515-2444

License Number: C174771

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): Accepting New Patients: Yes

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY


HLTH CTR SAN DIEGO-BEACH AREA


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:
619-515-2444

License Number: C53623

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY


HLTH CTR SAN DIEGO-BEACH AREA


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:
619-515-2444

License Number: A72005

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY


HLTH CTR SAN DIEGO-BEACH AREA

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:
619-515-2444

License Number: A68463

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HLTH CTR SAN DIEGO-BEACH AREA

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal

DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:
619-515-2444

License Number: DPM4819

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-BEACH
AREA


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:
619-515-2444

License Number: DC20729

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-BEACH
AREA

 Website: www.fhcsd.org


FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

Fax: 858-488-1394

 After Hours Phone:
619-515-2444

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-BEACH
AREA


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:
619-515-2444

License Number: NP95013978

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-BEACH


AREA


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:
619-515-2444

License Number: G78814

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-BEACH
AREA

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:
619-515-2444

License Number: NM1662

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):


N

 Accessibility: CONTACT
PROVIDER

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-BEACH
AREA

 Website: www.fhcsd.org


FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

Fax: 858-488-1394

 After Hours Phone:
619-515-2444


License Number: 80000115

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGO-BEACH
AREA

 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2400

 After Hours Phone:
619-515-2400

License Number: 20A17836

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST


 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545

License Number: 20A11612

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST


 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545

License Number: DC33688

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST


 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545

License Number: G16236

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST


 Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:
619-515-2545

License Number: G80316

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal

American Sign Language (ASL): American Sign Language (ASL): American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST


 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 *Phone: 619-515-2545*

 *After Hours Phone: 619-515-2545*

License Number: DC33150


NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): American Sign Language (ASL): American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST

 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 *Phone: 619-515-2545*

 *After Hours Phone: 619-515-2545*

License Number: DC31024

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST


 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 *Phone: 619-515-2545*

 *After Hours Phone: 619-515-2545*

License Number: NP18098

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): American Sign Language (ASL): American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST

 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 *Phone: 619-515-2545*

 *After Hours Phone: 619-515-2545*

License Number: NP95001899

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST


 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 *Phone: 619-515-2545*

 *After Hours Phone: 619-515-2545*

License Number: NP7374

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): American Sign Language (ASL): American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST

 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 *Phone: 619-515-2545*

 *After Hours Phone: 619-515-2545*

License Number: NP95005103

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal




American Sign Language (ASL): American Sign Language (ASL): American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 *Website: www.fhcsd.org*

N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 *Website: www.fhcsd.org*

N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST



Provider ID: 417937
 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 *Phone: 619-515-2545*
 *After Hours Phone: 619-515-2545*
License Number: PT292351
NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): American Sign Language (ASL): American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST




Provider ID: 417937
 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 *Phone: 619-515-2545*
 *After Hours Phone: 619-515-2545*
License Number: PT28061
NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): American Sign Language (ASL): American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST




Provider ID: 417937
 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 *Phone: 619-515-2545*
 *After Hours Phone: 619-515-2545*
License Number: PT295173
NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): American Sign Language (ASL): American Sign Language (ASL):



N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 *Phone: 619-515-2545*
 *After Hours Phone: 619-515-2545*
License Number: PT292613
NPI: 1134155377




Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 *Phone: 619-515-2545*
 *After Hours Phone: 619-515-2545*
License Number: PT296559
NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 *Phone: 619-515-2545*
 *After Hours Phone: 619-515-2545*
License Number: PT293536
NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

American Sign Language (ASL): American Sign Language (ASL): American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST

 *Website: www.fhcsd.org*

N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST

 *Website: www.fhcsd.org*

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST


 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 *Phone: 619-515-2545*

 *After Hours Phone: 619-515-2545*

License Number: PA23231

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): American Sign Language (ASL): American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST


 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 *Phone: 619-515-2545*

 *After Hours Phone: 619-515-2545*

License Number: PT25155

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): American Sign Language (ASL): American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST


 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 *Phone: 619-515-2545*

 *After Hours Phone: 619-515-2545*

License Number: PA21385

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): American Sign Language (ASL): American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST


 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 *Phone: 619-515-2545*

 *After Hours Phone: 619-515-2545*

License Number: PT12930

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 *Phone: 619-515-2545*

 *After Hours Phone: 619-515-2545*

License Number: NP95005293

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 *Phone: 619-515-2545*

 *After Hours Phone: 619-515-2545*

License Number: A80461

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal

American Sign Language (ASL): American Sign Language (ASL): American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST

 *Website: www.fhcsd.org*

N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST

 *Website: www.fhcsd.org*

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST


 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 *Phone: 619-515-2545*

 *After Hours Phone: 619-515-2545*

License Number: C52451

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): American Sign Language (ASL): American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST


 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 *Phone: 619-515-2545*

 *After Hours Phone: 619-515-2545*

License Number: A180044

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): American Sign Language (ASL): American Sign Language (ASL):

N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST


 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 *Phone: 619-515-2545*

 *After Hours Phone: 619-515-2545*

License Number: A154708

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): American Sign Language (ASL): American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST

 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 *Phone: 619-515-2545*

 *After Hours Phone: 619-515-2545*

License Number: A80153


NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 *Phone: 619-515-2545*

 *After Hours Phone: 619-515-2545*

License Number: A70175

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 *Phone: 619-515-2545*

 *After Hours Phone: 619-515-2545*

License Number: A140324

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal

American Sign Language (ASL): American Sign Language (ASL): American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST


 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 *Phone: 619-515-2545*

 *After Hours Phone: 619-515-2545*

License Number: A171135

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): American Sign Language (ASL): American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST

 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 *Phone: 619-515-2545*

 *After Hours Phone: 619-515-2545*

License Number: A169207

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST


 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 *Phone: 619-515-2545*

 *After Hours Phone: 619-515-2545*

License Number: A177462

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): American Sign Language (ASL): American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST

 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 *Phone: 619-515-2545*

 *After Hours Phone: 619-515-2545*

License Number: 20A12504

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST


 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 *Phone: 619-515-2545*

 *After Hours Phone: 619-515-2545*

License Number: 20A14794

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): American Sign Language (ASL): American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST

 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 *Phone: 619-515-2545*

 *After Hours Phone: 619-515-2545*

License Number: 20A15413

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal

American Sign Language (ASL): American Sign Language (ASL): American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST

 *Website: www.fhcsd.org*

N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST

 *Website: www.fhcsd.org*

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST


 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 *Phone: 619-515-2545*

 *After Hours Phone: 619-515-2545*

License Number: 20A17926

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): American Sign Language (ASL): American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST


 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 *Phone: 619-515-2545*

 *After Hours Phone: 619-515-2545*

License Number: 20A17702

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): American Sign Language (ASL): American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST


 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 *Phone: 619-515-2545*

 *After Hours Phone: 619-515-2545*

License Number: A136616

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): American Sign Language (ASL): American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST

 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 *Phone: 619-515-2545*

 *After Hours Phone: 619-515-2545*

License Number: 20A15459

NPI: 1134155377


Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 *Phone: 619-515-2545*

 *After Hours Phone: 619-515-2545*

License Number: 20A17657

NPI: 1134155377


Accepting New Patients: Yes


Site English Spoken: Yes
Cultural Competency: No

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103-2143

 *Phone: 619-515-2545*

 *After Hours Phone: 619-515-2545*

License Number: A109633

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

American Sign Language (ASL): American Sign Language (ASL): American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 *Phone: 619-515-2545*
 *After Hours Phone: 619-515-2545*
License Number: A119631
NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 *Website: www.fhcsd.org*



FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937
 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 *Phone: 619-515-2545*
 *After Hours Phone: 619-515-2545*
License Number: 20A19399
NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No

N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 *Website: www.fhcsd.org*

FAMILY HLTH CTR SD HILLCREST


Provider ID: 417937
 4094 4TH AVE
SAN DIEGO, CA 92103-2143
 *Phone: 619-515-2545*
 *After Hours Phone: 619-515-2545*
License Number: A100333
NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No



American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
 *Website: www.fhcsd.org*


NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362
 3544 30TH ST
SAN DIEGO, CA 92104-4120
 *Phone: 619-515-2424*
 *After Hours Phone: 619-515-2424*
License Number: A72005
NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No

N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
 *Website: www.fhcsd.org*

NORTH PARK FAMILY HEALTH CENTERS




Provider ID: 206362
 3544 30TH ST
SAN DIEGO, CA 92104-4120
 *Phone: 619-515-2424*
 *After Hours Phone: 619-515-2424*
License Number: A68463
NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):


N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
 *Website: www.fhcsd.org*


NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362
 3544 30TH ST
SAN DIEGO, CA 92104-4120
 *Phone: 619-515-2424*
 *After Hours Phone: 619-515-2424*
License Number: NP95006792
NPI: 1134155377
Accepting New Patients: Yes

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424


License Number: G78814

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: NP95002226

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS

 Website: www.fhcsd.org


NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

Fax: 619-501-0627

 After Hours Phone:
619-515-2424

NPI: 1134155377


Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: PA18746

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: PA17220

NPI: 1134155377


Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS


 Website: www.fhcsd.org

LINDA VISTA HEALTH CARE CTR

Provider ID: 206046

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342
 Phone: 858-279-0925
 After Hours Phone:
858-279-0925

License Number: A144372

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
 Site Languages(s) Spoken:
Vietnamese, Spanish,
Chinese, Lithuanian

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LINDA
VISTA HEALTH CARE CTR

 Website: www.sdfamilycare.org

LINDA VISTA HEALTH CARE CTR

Provider ID: 206046

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342
 Phone: 858-279-0925
 After Hours Phone:
858-279-0925

License Number: A119010

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
 Site Languages(s) Spoken:
Vietnamese, Spanish,
Chinese, Lithuanian

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LINDA

VISTA HEALTH CARE CTR

 Website: www.sdfamilycare.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120
 Phone: 619-515-2424
 After Hours Phone:
619-515-2424

License Number: A148014

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120
 Phone: 619-515-2424
 After Hours Phone:
619-515-2424


License Number: A154298

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120
 Phone: 619-515-2424
 After Hours Phone:
619-515-2424

License Number: A173486

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120
 Phone: 619-515-2424
 After Hours Phone:
619-515-2424

License Number: A180044































NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

<p>N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS</p> <p> Website: www.fhcsd.org</p> <p>NORTH PARK FAMILY HEALTH CENTERS</p> <p>Provider ID: 206362</p> <p> 3544 30TH ST SAN DIEGO, CA 92104-4120</p> <p> Phone: 619-515-2424</p> <p> After Hours Phone: 619-515-2424</p> <p>License Number: A114181</p> <p>NPI: 1134155377</p> <p>Accepting New Patients: Yes</p> <p><input type="checkbox"/> Site English Spoken: Yes</p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS</p> <p> Website: www.fhcsd.org</p> <p>NORTH PARK FAMILY HEALTH CENTERS</p> <p>Provider ID: 206362</p> <p> 3544 30TH ST SAN DIEGO, CA 92104-4120</p> <p> Phone: 619-515-2424</p> <p> After Hours Phone: 619-515-2424</p> <p>License Number: A116680</p> <p>NPI: 1134155377</p> <p>Accepting New Patients: Yes</p> <p><input type="checkbox"/> Site English Spoken: Yes</p>	<p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS</p> <p> Website: www.fhcsd.org</p> <p>NORTH PARK FAMILY HEALTH CENTERS</p> <p>Provider ID: 206362</p> <p> 3544 30TH ST SAN DIEGO, CA 92104-4120</p> <p> Phone: 619-515-2424</p> <p> After Hours Phone: 619-515-2424</p> <p>License Number: A118095</p> <p>NPI: 1134155377</p> <p>Accepting New Patients: Yes</p> <p><input type="checkbox"/> Site English Spoken: Yes</p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS</p> <p> Website: www.fhcsd.org</p> <p>NORTH PARK FAMILY HEALTH CENTERS</p> <p>Provider ID: 206362</p> <p> 3544 30TH ST SAN DIEGO, CA 92104-4120</p> <p> Phone: 619-515-2424</p> <p> After Hours Phone: 619-515-2424</p> <p>License Number: A140646</p> <p>NPI: 1134155377</p>	<p>Accepting New Patients: Yes</p> <p><input type="checkbox"/> Site English Spoken: Yes</p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS</p> <p> Website: www.fhcsd.org</p> <p>NORTH PARK FAMILY HEALTH CENTERS</p> <p>Provider ID: 206362</p> <p> 3544 30TH ST SAN DIEGO, CA 92104-4120</p> <p> Phone: 619-515-2424</p> <p> After Hours Phone: 619-515-2424</p> <p>License Number: A147758</p> <p>NPI: 1134155377</p> <p>Accepting New Patients: Yes</p> <p><input type="checkbox"/> Site English Spoken: Yes</p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS</p> <p> Website: www.fhcsd.org</p> <p>SAN DIEGO FAMILY CARE</p> <p>Provider ID: 482070</p> <p> 7011 LINDA VISTA RD SAN DIEGO, CA 92111-6307</p> <p> Phone: 858-810-8700</p> <p> After Hours Phone: 858-810-8700</p> <p>License Number: NP16433</p>
--	---	--

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: yes

Site Languages(s) Spoken: Lithuanian, Vietnamese, Spanish, Chinese

Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN


DIEGO FAMILY CARE

 Website: www.sdfamilycare.org

MID-CITY COMMUNITY CLINIC

Provider ID: 233597

 4290 POLK AVE
SAN DIEGO, CA 92105-1524

 Phone: 619-563-0250

 After Hours Phone: 619-563-0250

License Number: 20A7662


NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: MID-CITY COMMUNITY CLINIC


 Website: www.sdfamilycare.org

SAN DIEGO FAMILY CARE

Provider ID: 482070

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307

 Phone: 858-810-8700

 After Hours Phone: 858-810-8700

License Number: NP23847

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Site Languages(s) Spoken: Lithuanian, Vietnamese, Spanish, Chinese

Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN


DIEGO FAMILY CARE


 Website: www.sdfamilycare.org

SAN DIEGO FAMILY CARE

Provider ID: 482070

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307

 Phone: 858-810-8700

 After Hours Phone: 858-810-8700

License Number: G41532

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Site Languages(s) Spoken: Lithuanian, Vietnamese, Spanish, Chinese

Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN


DIEGO FAMILY CARE


 Website: www.sdfamilycare.org

SAN DIEGO FAMILY CARE

Provider ID: 482070

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307

 Phone: 858-810-8700

 After Hours Phone: 858-810-8700

License Number: G70886

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Site Languages(s) Spoken: Lithuanian, Vietnamese, Spanish, Chinese

Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN


DIEGO FAMILY CARE


 Website: www.sdfamilycare.org

SAN DIEGO FAMILY CARE

Provider ID: 482070

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307

 Phone: 858-810-8700

 After Hours Phone: 858-810-8700

License Number: A61238

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Site Languages(s) Spoken: Lithuanian, Vietnamese, Spanish, Chinese

Cultural Competency: No


American Sign Language (ASL): N

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: SAN DIEGO FAMILY CARE


 *Website: www.sdfamilycare.org*

SAN DIEGO FAMILY CARE

Provider ID: 482070

 *7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307*

 *Phone: 858-810-8700*


 *After Hours Phone:
858-810-8700*

License Number: A72833

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: yes*

 *Site Languages(s) Spoken:
Lithuanian, Vietnamese,
Spanish, Chinese*

Cultural Competency: No

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: SAN


DIEGO FAMILY CARE


 *Website: www.sdfamilycare.org*

SAN DIEGO FAMILY CARE

Provider ID: 482070

 *7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307*

 *Phone: 858-810-8700*


 *After Hours Phone:
858-810-8700*

License Number: A92173

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: yes*

 *Site Languages(s) Spoken:
Lithuanian, Vietnamese,
Spanish, Chinese*

Cultural Competency: No

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: SAN


DIEGO FAMILY CARE


 *Website: www.sdfamilycare.org*

SAN DIEGO FAMILY CARE

Provider ID: 482070

 *7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307*

 *Phone: 858-810-8700*


 *After Hours Phone:
858-810-8700*

License Number: A94449

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: yes*

 *Site Languages(s) Spoken:
Lithuanian, Vietnamese,
Spanish, Chinese*

Cultural Competency: No

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: SAN


DIEGO FAMILY CARE


 *Website: www.sdfamilycare.org*

SAN DIEGO FAMILY CARE

Provider ID: 482070

 *7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307*

 *Phone: 858-810-8700*


 *After Hours Phone:
858-810-8700*

License Number: C174985

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: yes*

 *Site Languages(s) Spoken:
Lithuanian, Vietnamese,
Spanish, Chinese*


Cultural Competency: No

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: SAN


DIEGO FAMILY CARE


 *Website: www.sdfamilycare.org*

LINDA VISTA HEALTH CARE CTR

Provider ID: 206046

 *6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342*

 *Phone: 858-279-0925*


 *After Hours Phone:
858-279-0925*

License Number: G41532

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*

 *Site Languages(s) Spoken:
Vietnamese, Spanish,
Chinese, Lithuanian*

Cultural Competency: No

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: LINDA






VISTA HEALTH CARE CTR




 *Website: www.sdfamilycare.org*

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal




D1. Clínicas de salud con calificación federal



.org



LINDA VISTA HEALTH CARE CTR
Provider ID: 206046
 6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342
 Phone: 858-279-0925
 After Hours Phone:
858-279-0925
License Number: DPM4434
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Vietnamese, Spanish,
Chinese, Lithuanian
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LINDA
VISTA HEALTH CARE CTR
 Website: www.sdfamilycare
.org




LINDA VISTA HEALTH CARE CTR
Provider ID: 206046
 6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342
 Phone: 858-279-0925
 After Hours Phone:
858-279-0925
License Number: C174985
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Vietnamese, Spanish,
Chinese, Lithuanian





Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LINDA
VISTA HEALTH CARE CTR
 Website: www.sdfamilycare
.org

LINDA VISTA HEALTH CARE CTR
Provider ID: 206046
 6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342
 Phone: 858-279-0925
Fax: 858-279-0377
 After Hours Phone:
858-279-0925
License Number: A93812
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Vietnamese, Spanish,
Chinese, Lithuanian
Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LINDA
VISTA HEALTH CARE CTR
 Website: www.sdfamilycare
.org

LINDA VISTA HEALTH CARE CTR
Provider ID: 206046
 6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342
 Phone: 858-279-0925

Fax: 858-279-0377
 After Hours Phone:
858-279-0925
License Number: G70886
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Vietnamese, Spanish,
Chinese, Lithuanian
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LINDA
VISTA HEALTH CARE CTR
 Website: www.sdfamilycare
.org

LINDA VISTA HEALTH CARE CTR
Provider ID: 206046
 6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342
 Phone: 858-279-0925
 After Hours Phone:
858-279-0925
License Number: G44807
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Vietnamese, Spanish,
Chinese, Lithuanian
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: LINDA
VISTA HEALTH CARE CTR

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal


 Website: www.sdfamilycare.org N

SAN DIEGO FAMILY CARE

Provider ID: 482070

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307

 Phone: 858-810-8700

 After Hours Phone:
858-810-8700

License Number: 20A12402

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Site Languages(s) Spoken:
Lithuanian, Vietnamese,
Spanish, Chinese

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
DIEGO FAMILY CARE


 Website: www.sdfamilycare.org N

SAN DIEGO FAMILY CARE

Provider ID: 482070

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307

 Phone: 858-810-8700

 After Hours Phone:
858-810-8700

License Number: A119010

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Site Languages(s) Spoken:
Lithuanian, Vietnamese,
Spanish, Chinese

Cultural Competency: No

American Sign Language (ASL):

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
DIEGO FAMILY CARE


 Website: www.sdfamilycare.org

SAN DIEGO FAMILY CARE

Provider ID: 482070

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307

 Phone: 858-810-8700

 After Hours Phone:
858-810-8700

License Number: A137415

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Site Languages(s) Spoken:
Lithuanian, Vietnamese,
Spanish, Chinese

Cultural Competency: No

American Sign Language (ASL):

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
DIEGO FAMILY CARE

 Website: www.sdfamilycare.org


LINDA VISTA HEALTH CARE CTR

Provider ID: 206046

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342

 Phone: 858-279-0925

Fax: 858-633-4680

 After Hours Phone:
858-279-0925

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes


Site Languages(s) Spoken:
Vietnamese, Spanish,
Chinese, Lithuanian

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LINDA
VISTA HEALTH CARE CTR


 Website: www.sdfamilycare.org

LINDA VISTA HEALTH CARE CTR

Provider ID: 206046

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342

 Phone: 858-810-8700

 After Hours Phone:
858-810-8700

License Number: 20A12402

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Vietnamese, Spanish,
Chinese, Lithuanian

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LINDA
VISTA HEALTH CARE CTR

 Website: www.sdfamilycare.org


NORTH PARK FAMILY HEALTH CENTERS


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: A108228


NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: A103099

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS Website: www.fhcsd.org

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: A113001

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS Website: www.fhcsd.org

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: A116680

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: A114181

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: A132576

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: NORTH

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal


PARK FAMILY HEALTH
CENTERS


 Website: www.fhcsd.org

**NORTH PARK FAMILY HEALTH
CENTERS**

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: A118095

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS


 Website: www.fhcsd.org

**NORTH PARK FAMILY HEALTH
CENTERS**

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: A126181

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: NORTH
PARK FAMILY HEALTH

CENTERS


 Website: www.fhcsd.org


SAN YSIDRO HEALTH

**COMMUNITY HEIGHTS FAMILY
MED**

Provider ID: 517998

 4690 EL CAJON BLVD
SAN DIEGO, CA 92115-4403

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: NP95005999

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH COMMUNITY
HEIGHTS FAMILY MED

 Website: N/A

**NORTH PARK FAMILY HEALTH
CENTERS**

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: 20A11535

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS


 Website: www.fhcsd.org

**NORTH PARK FAMILY HEALTH
CENTERS**

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: 20A14919

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS

 Website: www.fhcsd.org

**SAN YSIDRO HEALTH
COMMUNITY HEIGHTS FAMILY
MED**

Provider ID: 517998

 4690 EL CAJON BLVD
SAN DIEGO, CA 92115-4403

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: 20A7502

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH COMMUNITY
HEIGHTS FAMILY MED

Website: N/A

SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED

Provider ID: 517998

4690 EL CAJON BLVD
SAN DIEGO, CA 92115-4403

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: 550003882

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH COMMUNITY
HEIGHTS FAMILY MED

Website: N/A

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

4094 4TH AVE
SAN DIEGO, CA 92103-2143

Phone: 619-515-2545

Fax: 619-501-9645

After Hours Phone:
619-515-2545

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST

Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

4094 4TH AVE
SAN DIEGO, CA 92103-2143

Phone: 619-515-2545

After Hours Phone:
619-515-2545

License Number: PT40975

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST

Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

4094 4TH AVE
SAN DIEGO, CA 92103-2143

Phone: 619-515-2545

Fax: 619-501-9645

After Hours Phone:
619-515-2545

License Number: 550003099

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST

Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

4094 4TH AVE
SAN DIEGO, CA 92103-2143

Phone: 619-515-2545

Fax: 619-501-9645

After Hours Phone:
619-515-2545

License Number: A95356

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SD HILLCREST

Website: www.fhcsd.org

SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

MED

Provider ID: 517998

4690 EL CAJON BLVD
SAN DIEGO, CA 92115-4403

Phone: 619-662-4100

After Hours Phone:
619-662-4100

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH COMMUNITY
HEIGHTS FAMILY MED

Website: N/A

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

3514 30TH ST
SAN DIEGO, CA 92104-4120

Phone: 619-515-2424

After Hours Phone:
619-515-2424

License Number: A68463

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS

Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

3514 30TH ST
SAN DIEGO, CA 92104-4120

Phone: 619-515-2424

After Hours Phone:
619-515-2424

License Number: A72005

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS

Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

3514 30TH ST
SAN DIEGO, CA 92104-4120

Phone: 619-515-2424

After Hours Phone:
619-515-2424

License Number: A95577

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS

Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

3514 30TH ST
SAN DIEGO, CA 92104-4120

Phone: 619-515-2424

After Hours Phone:
619-515-2424

License Number: C174771

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS

Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

3514 30TH ST
SAN DIEGO, CA 92104-4120

Phone: 619-515-2424

After Hours Phone:
619-515-2424

License Number: A163464

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N


Accessibility: CONTACT
PROVIDER

Medical Group/IPA: NORTH

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal


PARK FAMILY HEALTH
CENTERS


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: A164859

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: A154298

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424


License Number: A148014

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: A51318

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: A178499

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424


License Number: 20A15068


NPI: 1134155377

Accepting New Patients: Yes

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: 20A14919

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: 20A14794

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: A113001

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: 20A15413

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS


 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424


License Number: 20A20252

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

 3544 30TH ST
SAN DIEGO, CA 92104-4120
 Phone: 619-515-2424
 After Hours Phone:
619-515-2424

License Number: 20A11535

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

Fax: 619-683-7586

 After Hours Phone:
619-515-2424

License Number: 90000469


NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS


 Website: www.fhcsd.org


NORTH PARK FAMILY HEALTH  Website: www.fhcsd.org

CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: NP95013978

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: G78814

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:
619-515-2424

License Number: PA21042


NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: NORTH
PARK FAMILY HEALTH
CENTERS

 Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

Fax: 619-683-7586

 After Hours Phone:
619-515-2424

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER




Medical Group/IPA: NORTH

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal




PARK FAMILY HEALTH CENTERS
 Website: www.fhcsd.org



FAMILY HLTH CTR SAN DIEGOCITY COLLEGE

Provider ID: 417429
 1550 BROADWAY STE 2
 SAN DIEGO, CA 92101-5713
 Phone: 619-515-2525
 After Hours Phone:
 619-515-2525
 License Number: PA22762
 NPI: 1134155377
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N




 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: FAMILY HLTH CTR SAN DIEGOCITY COLLEGE
 Website: www.fhcsd.org

FAMILY HEALTH CTR OF SDELM ST



Provider ID: 419167
 140 ELM ST
 SAN DIEGO, CA 92101-2602
 Phone: 619-515-2520
 Fax: 619-231-0431
 After Hours Phone:
 619-515-2520
 License Number: 550002061
 NPI: 1134155377
 Accepting New Patients: Yes
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: FAMILY HEALTH CTR OF SDELM ST
 Website: www.fhcsd.org




FAMILY HEALTH CTR OF SDELM ST



Provider ID: 419167
 140 ELM ST
 SAN DIEGO, CA 92101-2602
 Phone: 619-515-2520
 Fax: 619-231-0431
 After Hours Phone:
 619-515-2520
 NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N




 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: FAMILY HEALTH CTR OF SDELM ST
 Website: www.fhcsd.org

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER



Provider ID: 403583
 1501 IMPERIAL AVE
 SAN DIEGO, CA 92101-7638
 Phone: 619-233-8500
 After Hours Phone:
 619-233-8500
 License Number: NP10769
 NPI: 1598122871
 Accepting New Patients: Yes
 Site English Spoken: yes
 Cultural Competency: No
 American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER
 Website: N/A




DOWNTOWN FAMILY CTR AT CONNECTIONS

Provider ID: 417782
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101-4368
 Phone: 619-515-2430
 After Hours Phone:
 619-515-2430
 License Number: 20A7147
 NPI: 1134155377

Accepting New Patients: Yes
 Site English Spoken: Yes
 Cultural Competency: No
 American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER
 Medical Group/IPA: DOWNTOWN FAMILY CTR AT CONNECTIONS
 Website: www.fhcsd.org

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER


Provider ID: 403583
 1501 IMPERIAL AVE
 SAN DIEGO, CA 92101-7638
 Phone: 619-233-8500
 After Hours Phone:
 619-233-8500
 License Number: PA54617
 NPI: 1598122871
 Accepting New Patients: Yes
 Site English Spoken: yes

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER


 *Website: N/A*

DOWNTOWN FAMILY CTR AT CONNECTIONS

Provider ID: 417782

 1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368

 *Phone: 619-515-2430*

 *After Hours Phone: 619-515-2430*

License Number: PA58826


NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA:


DOWNTOWN FAMILY CTR AT CONNECTIONS

 *Website: www.fhcsd.org*


DOWNTOWN FAMILY CTR AT CONNECTIONS

Provider ID: 417782

 1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368

 *Phone: 619-515-2430*

Fax: 619-578-2410

 *After Hours Phone: 619-515-2430*

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*


Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA:


DOWNTOWN FAMILY CTR AT CONNECTIONS

 *Website: www.fhcsd.org*

DOWNTOWN FAMILY CTR AT CONNECTIONS

Provider ID: 417782

 1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368

 *Phone: 619-515-2430*

Fax: 619-578-2410

 *After Hours Phone: 619-515-2430*

License Number: 550002251

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA:


DOWNTOWN FAMILY CTR AT CONNECTIONS


 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGOCITY COLLEGE

Provider ID: 417429

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713

 *Phone: 619-515-2525*

 *After Hours Phone: 619-515-2525*

License Number: A128091

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: FAMILY HLTH CTR SAN DIEGOCITY COLLEGE


 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGOCITY COLLEGE

Provider ID: 417429

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713

 *Phone: 619-515-2525*

 *After Hours Phone: 619-515-2525*

License Number: A76785

NPI: 1134155377

Accepting New Patients: Yes

 *Site English Spoken: Yes*

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: FAMILY HLTH CTR SAN DIEGOCITY COLLEGE

 *Website: www.fhcsd.org*

FAMILY HLTH CTR SAN DIEGOCITY COLLEGE

Provider ID: 417429

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713
 Phone: 619-515-2525
 After Hours Phone:
619-515-2525

License Number: A163977

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N



 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGOCITY
COLLEGE

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGOCITY COLLEGE

Provider ID: 417429

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713
 Phone: 619-515-2525
Fax: 619-501-5814

 After Hours Phone:
619-515-2525

NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER



Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGOCITY
COLLEGE


 Website: www.fhcsd.org

FAMILY HLTH CTR SAN

DIEGOCITY COLLEGE

Provider ID: 417429

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713
 Phone: 619-515-2525
Fax: 619-501-5814

 After Hours Phone:
619-515-2525

License Number: 550002865
NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N




 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGOCITY
COLLEGE

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGOCITY COLLEGE

Provider ID: 417429

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713
 Phone: 619-515-2525
 After Hours Phone:
619-515-2525

License Number: DPM4819
NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N




 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGOCITY
COLLEGE

 Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGOCITY COLLEGE

Provider ID: 417429

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713
 Phone: 619-515-2525
 After Hours Phone:
619-515-2525

License Number: NP95010814
NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N




 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HLTH CTR SAN DIEGOCITY
COLLEGE

 Website: www.fhcsd.org

FAMILY HEALTH CTR IBARRA

Provider ID: 417987

 4874 POLK AVE
SAN DIEGO, CA 92105-2026
 Phone: 619-515-2426
 After Hours Phone:
619-515-2426

License Number: 20A17577
NPI: 1134155377

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No


American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: FAMILY
HEALTH CTR IBARRA

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal

 Website: www.fhcsd.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608

 Phone: 619-564-8765

 After Hours Phone:
619-564-8765

License Number: NP95009891

NPI: 1609849074

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA


MAESTRA FAMILY CLINIC INC

 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608

 Phone: 619-798-3947

 After Hours Phone:
619-798-3947

License Number: DC32800

NPI: 1609849074

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA


MAESTRA FAMILY CLINIC INC

 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608

 Phone: 619-255-9155

Fax: 619-749-5480

 After Hours Phone:
619-255-9155

License Number: A81682

NPI: 1609849074

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA


MAESTRA FAMILY CLINIC INC


 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608

 Phone: 619-280-7072

 After Hours Phone:
619-280-7072

License Number: 20A14222

NPI: 1609849074

Accepting New Patients: Yes

Site English Spoken: Yes


Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: LA


MAESTRA FAMILY CLINIC INC


 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608

 Phone: 619-255-9155

 After Hours Phone:
619-255-9155

License Number: G87837


NPI: 1609849074

Accepting New Patients: Yes

Site English Spoken: Yes


Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: LA


MAESTRA FAMILY CLINIC INC


 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608

 Phone: 619-255-9155

 After Hours Phone:
619-255-9155

License Number: NP95013257

NPI: 1609849074

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

<p>American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC Website: www.lamaestra.org</p>	<p>Accepting New Patients: Yes Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC Website: www.lamaestra.org</p>	<p>NPI: 1134155377 Accepting New Patients: Yes Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: FAMILY HEALTH CTR IBARRA Website: www.fhcsd.org</p>
<p>LA MAESTRA FAMILY CLINIC INC Provider ID: 185268 4060 FAIRMOUNT AVE SAN DIEGO, CA 92105-1608 Phone: 619-255-9155 After Hours Phone: 619-255-9155 License Number: PA13694 NPI: 1609849074 Accepting New Patients: Yes Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC Website: www.lamaestra.org</p>	<p>LA MAESTRA FAMILY CLINIC INC Provider ID: 185268 4060 FAIRMOUNT AVE SAN DIEGO, CA 92105-1608 Phone: 619-255-9155 After Hours Phone: 619-255-9155 License Number: PA21625 NPI: 1609849074 Accepting New Patients: Yes Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC Website: www.lamaestra.org</p>	<p>FAMILY HEALTH CTR IBARRA Provider ID: 417987 4874 POLK AVE SAN DIEGO, CA 92105-2026 Phone: 619-515-2426 After Hours Phone: 619-515-2426 License Number: PA59481 NPI: 1134155377 Accepting New Patients: Yes Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: FAMILY HEALTH CTR IBARRA Website: www.fhcsd.org</p>
<p>LA MAESTRA FAMILY CLINIC INC Provider ID: 185268 4060 FAIRMOUNT AVE SAN DIEGO, CA 92105-1608 Phone: 619-255-9155 Fax: 619-284-4731 After Hours Phone: 619-255-9155 License Number: 20A6433 NPI: 1609849074</p>	<p>FAMILY HEALTH CTR IBARRA Provider ID: 417987 4874 POLK AVE SAN DIEGO, CA 92105-2026 Phone: 619-515-2426 After Hours Phone: 619-515-2426 License Number: PA58905</p>	<p>FAMILY HEALTH CTR IBARRA Provider ID: 417987 4874 POLK AVE SAN DIEGO, CA 92105-2026 Phone: 619-515-2426 After Hours Phone: 619-515-2426 License Number: PA21385 NPI: 1134155377 Accepting New Patients: Yes</p>

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal

Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: FAMILY HEALTH CTR IBARRA Website: www.fhcsd.org	American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: FAMILY HEALTH CTR IBARRA Website: www.fhcsd.org	Accessibility: CONTACT PROVIDER Medical Group/IPA: FAMILY HEALTH CTR IBARRA Website: www.fhcsd.org
FAMILY HEALTH CTR IBARRA Provider ID: 417987 4874 POLK AVE SAN DIEGO, CA 92105-2026 Phone: 619-515-2426 After Hours Phone: 619-515-2426 License Number: PA58098 NPI: 1134155377 Accepting New Patients: Yes Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: FAMILY HEALTH CTR IBARRA Website: www.fhcsd.org	FAMILY HEALTH CTR IBARRA Provider ID: 417987 4874 POLK AVE SAN DIEGO, CA 92105-2026 Phone: 619-515-2426 After Hours Phone: 619-515-2426 License Number: A173486 NPI: 1134155377 Accepting New Patients: Yes Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: FAMILY HEALTH CTR IBARRA Website: www.fhcsd.org	FAMILY HEALTH CTR IBARRA Provider ID: 417987 4874 POLK AVE SAN DIEGO, CA 92105-2026 Phone: 619-515-2426 After Hours Phone: 619-515-2426 License Number: G149974 NPI: 1134155377 Accepting New Patients: Yes Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: FAMILY HEALTH CTR IBARRA Website: www.fhcsd.org
FAMILY HEALTH CTR IBARRA Provider ID: 417987 4874 POLK AVE SAN DIEGO, CA 92105-2026 Phone: 619-515-2426 After Hours Phone: 619-515-2426 License Number: NP95004443 NPI: 1134155377 Accepting New Patients: Yes Site English Spoken: Yes Cultural Competency: No	FAMILY HEALTH CTR IBARRA Provider ID: 417987 4874 POLK AVE SAN DIEGO, CA 92105-2026 Phone: 619-515-2426 After Hours Phone: 619-515-2426 License Number: NP17838 NPI: 1134155377 Accepting New Patients: Yes Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N	FAMILY HEALTH CTR IBARRA Provider ID: 417987 4874 POLK AVE SAN DIEGO, CA 92105-2026 Phone: 619-515-2426 After Hours Phone: 619-515-2426 License Number: 20A19345 NPI: 1134155377 Accepting New Patients: Yes Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal


Medical Group/IPA: FAMILY HEALTH CTR IBARRA


 Website: www.fhcsd.org

FAMILY HEALTH CTR IBARRA

Provider ID: 417987

 4874 POLK AVE
SAN DIEGO, CA 92105-2026

 Phone: 619-515-2426

 After Hours Phone:
619-515-2426

License Number: A145023

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CTR IBARRA


 Website: www.fhcsd.org

 Website: www.sdfamilycare.org

MID-CITY COMMUNITY CLINIC

Provider ID: 233597

 4290 POLK AVE
SAN DIEGO, CA 92105-1524

 Phone: 619-563-0250

 After Hours Phone:
619-563-0250

License Number: A163512

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No


American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: MID-CITY COMMUNITY CLINIC


 Website: www.sdfamilycare.org

 Website: www.sdfamilycare.org

MID-CITY COMMUNITY CLINIC

Provider ID: 233597

 4290 POLK AVE
SAN DIEGO, CA 92105-1524

 Phone: 619-563-0250

 After Hours Phone:
619-563-0250

License Number: A175116

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: MID-CITY COMMUNITY CLINIC

 Website: www.sdfamilycare.org

MID-CITY COMMUNITY CLINIC

Provider ID: 233597

 4290 POLK AVE
SAN DIEGO, CA 92105-1524

 Phone: 619-563-0250

 After Hours Phone:
619-563-0250

License Number: A112176


NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER

Medical Group/IPA: MID-CITY COMMUNITY CLINIC

MID-CITY COMMUNITY CLINIC

Provider ID: 233597

 4290 POLK AVE
SAN DIEGO, CA 92105-1524

 Phone: 619-563-0250

 After Hours Phone:
619-563-0250

License Number: DPM4434

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: MID-CITY COMMUNITY CLINIC

MID-CITY COMMUNITY CLINIC

Provider ID: 233532

 4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105-1690

 Phone: 619-280-2058

 After Hours Phone:
619-280-2058

License Number: A163512


NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER

Medical Group/IPA: MID-CITY COMMUNITY CLINIC

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

COMMUNITY CLINIC


 Website: www.sdfamilycare.org


MID-CITY COMMUNITY CLINIC

Provider ID: 233532

 4305 UNIVERSITY AVE STE 150

SAN DIEGO, CA 92105-1690

 Phone: 619-280-2058

 After Hours Phone:
619-280-2058

License Number: A61238

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: MID-CITY COMMUNITY CLINIC


 Website: www.sdfamilycare.org


MID-CITY COMMUNITY CLINIC

Provider ID: 233532

 4305 UNIVERSITY AVE STE 150

SAN DIEGO, CA 92105-1690

 Phone: 619-280-2058

 After Hours Phone:
619-280-2058

License Number: A152267

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

Medical Group/IPA: MID-CITY COMMUNITY CLINIC


 Website: www.sdfamilycare.org


MID-CITY COMMUNITY CLINIC

Provider ID: 233532

 4305 UNIVERSITY AVE STE 150

SAN DIEGO, CA 92105-1690

 Phone: 619-280-2058

 After Hours Phone:
619-280-2058

License Number: A112176

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: MID-CITY COMMUNITY CLINIC

 Website: www.sdfamilycare.org


MID-CITY COMMUNITY CLINIC

Provider ID: 233597

 4290 POLK AVE

SAN DIEGO, CA 92105-1524

 Phone: 619-563-0250

 After Hours Phone:
619-563-0250

License Number: G60630

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: MID-CITY COMMUNITY CLINIC

 Website: www.sdfamilycare.org


LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

 4060 FAIRMOUNT AVE

SAN DIEGO, CA 92105-1608

 Phone: 619-255-9155

 After Hours Phone:
619-255-9155

License Number: A82639


NPI: 1609849074

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC

 Website: www.lamaestra.org


LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

 4060 FAIRMOUNT AVE

SAN DIEGO, CA 92105-1608

 Phone: 619-255-9155

 After Hours Phone:
619-255-9155

License Number: A75533

NPI: 1609849074

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LA
MAESTRA FAMILY CLINIC INC

 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608

 Phone: 619-255-9155

 After Hours Phone:
619-255-9155

License Number: A111170

NPI: 1609849074

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LA
MAESTRA FAMILY CLINIC INC

 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608

 Phone: 619-255-9155

 After Hours Phone:
619-255-9155

License Number: DC28966

NPI: 1609849074

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LA
MAESTRA FAMILY CLINIC INC

 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608

 Phone: 619-255-9155

 After Hours Phone:
619-255-9155


License Number: C55979

NPI: 1609849074

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LA
MAESTRA FAMILY CLINIC INC

 Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608

 Phone: 619-255-9155

 After Hours Phone:
619-255-9155

License Number: G45632

NPI: 1609849074

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: LA
MAESTRA FAMILY CLINIC INC


 Website: www.lamaestra.org


MID-CITY COMMUNITY CLINIC

Provider ID: 233532

 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105-1690

 Phone: 619-280-2058

 After Hours Phone:
619-280-2058

License Number: A94449

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: MID-CITY
COMMUNITY CLINIC


 Website: www.sdfamilycare.org

MID-CITY COMMUNITY CLINIC

Provider ID: 233532

 4305 UNIVERSITY AVE STE
150



SAN DIEGO, CA 92105-1690

 Phone: 619-280-2058






 After Hours Phone:

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal





619-280-2058
License Number: A72833
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: MID-CITY COMMUNITY CLINIC
 Website: www.sdfamilycare.org

LA MAESTRA FAMILY CLINIC INC






Provider ID: 185268
 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608
 Phone: 619-255-9154
 After Hours Phone:
619-255-9154
License Number: A123929
NPI: 1609849074
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC
 Website: www.lamaestra.org

MID-CITY COMMUNITY CLINIC

Provider ID: 233532
 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105-1690






 Phone: 619-280-2058
 After Hours Phone:
619-280-2058
License Number: NP95019446
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: MID-CITY COMMUNITY CLINIC
 Website: www.sdfamilycare.org

LA MAESTRA FAMILY CLINIC INC






Provider ID: 185268
 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105-1608
 Phone: 619-255-9154
 After Hours Phone:
619-255-9154
License Number: A163693
NPI: 1609849074
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC
 Website: www.lamaestra.org

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638
 Phone: 619-233-8500
 After Hours Phone:
619-233-8500
License Number: A104052
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER
 Website: N/A

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583
 1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638
 Phone: 619-233-8500
 After Hours Phone:
619-233-8500
License Number: A42127
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER
 Website: N/A

ST VINCENT DE PAUL VILLAGE

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

FAMILY HEALTH CENTER

Provider ID: 403583

1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638

Phone: 619-233-8500

After Hours Phone:
619-233-8500

License Number: A54702

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: ST

VINCENT DE PAUL VILLAGE

FAMILY HEALTH CENTER

Website: N/A

ST VINCENT DE PAUL VILLAGE

FAMILY HEALTH CENTER

Provider ID: 403583

1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638

Phone: 619-233-8500

After Hours Phone:
619-233-8500

License Number: A109828

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: ST

VINCENT DE PAUL VILLAGE

FAMILY HEALTH CENTER

Website: N/A

ST VINCENT DE PAUL VILLAGE

FAMILY HEALTH CENTER

Provider ID: 403583

1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638

Phone: 619-233-8500

After Hours Phone:
619-233-8500

License Number: A115598

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: ST

VINCENT DE PAUL VILLAGE

FAMILY HEALTH CENTER

Website: N/A

ST VINCENT DE PAUL VILLAGE

FAMILY HEALTH CENTER

Provider ID: 403583

1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638

Phone: 619-233-8500

After Hours Phone:
619-233-8500

License Number: A136275

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: ST

VINCENT DE PAUL VILLAGE

FAMILY HEALTH CENTER

Website: N/A

ST VINCENT DE PAUL VILLAGE

FAMILY HEALTH CENTER

Provider ID: 403583

1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638

Phone: 619-233-8500

After Hours Phone:
619-233-8500

License Number: G29879

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: ST

VINCENT DE PAUL VILLAGE

FAMILY HEALTH CENTER

Website: N/A

ST VINCENT DE PAUL VILLAGE

FAMILY HEALTH CENTER

Provider ID: 403583

1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638

Phone: 619-233-8500

After Hours Phone:
619-233-8500

License Number: G71080

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No


American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER



D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal




Medical Group/IPA: ST
VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER
 Website: N/A



ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583
 1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638
 Phone: 619-233-8500
 After Hours Phone:
619-233-8500
License Number: G72486
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: yes
Cultural Competency: No

American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: ST
VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER
 Website: N/A


ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583
 1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638
 Phone: 619-233-8500
 After Hours Phone:
619-233-8500
License Number: A60801
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: yes
Cultural Competency: No
American Sign Language (ASL):




N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: ST
VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER
 Website: N/A

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583
 1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638
 Phone: 619-233-8500
 After Hours Phone:
619-233-8500
License Number: A67762
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: yes
Cultural Competency: No
American Sign Language (ASL):





N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: ST
VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER
 Website: N/A


ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583
 1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638
 Phone: 619-233-8500
 After Hours Phone:
619-233-8500
License Number: A82123
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: yes




Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: ST
VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER
 Website: N/A

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583
 1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638
 Phone: 619-233-8500
 After Hours Phone:
619-233-8500
License Number: C53121
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: ST
VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER
 Website: N/A

OPERATION SAMAHAN RANCHO PENASQUITOS

Provider ID: 418535
 9995 CARMEL MOUNTAIN
RD STE B10 AND B11
SAN DIEGO, CA 92129-2889
 Phone: 844-200-2426
 After Hours Phone:
844-200-2426
License Number: DC15775

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

NPI: 1801907449

Accepting New Patients: Yes

Site English Spoken: yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN

RANCHO PENASQUITOS

Website: www.operationsamahan.org

OPERATION SAMAHAN RANCHO PENASQUITOS

Provider ID: 418535

9995 CARMEL MOUNTAIN RD STE B10 AND B11
SAN DIEGO, CA 92129-2889

Phone: 844-200-2426

After Hours Phone: 844-200-2426

License Number: DC29074

NPI: 1801907449

Accepting New Patients: Yes

Site English Spoken: yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN

RANCHO PENASQUITOS

Website: www.operationsamahan.org

OPERATION SAMAHAN

RANCHO PENASQUITOS

Provider ID: 418535

9995 CARMEL MOUNTAIN RD STE B10 AND B11
SAN DIEGO, CA 92129-2889

Phone: 844-200-2426

After Hours Phone: 844-200-2426

License Number: NP95003211

NPI: 1801907449

Accepting New Patients: Yes

Site English Spoken: yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN

RANCHO PENASQUITOS

Website: www.operationsamahan.org

OPERATION SAMAHAN

RANCHO PENASQUITOS

Provider ID: 418535

9995 CARMEL MOUNTAIN RD STE B10 AND B11
SAN DIEGO, CA 92129-2889

Phone: 844-200-2426

After Hours Phone: 844-200-2426

License Number: NP22974

NPI: 1801907449

Accepting New Patients: Yes

Site English Spoken: yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN

RANCHO PENASQUITOS

Website: www.operationsamahan.org

OPERATION SAMAHAN

RANCHO PENASQUITOS

Provider ID: 418535

9995 CARMEL MOUNTAIN RD STE B10 AND B11
SAN DIEGO, CA 92129-2889

Phone: 844-200-2426

Fax: 858-695-9074

After Hours Phone: 844-200-2426

License Number: 550002478

NPI: 1801907449

Accepting New Patients: Yes

Site English Spoken: yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN

RANCHO PENASQUITOS

Website: www.operationsamahan.org

OPERATION SAMAHAN

RANCHO PENASQUITOS

Provider ID: 418535

9995 CARMEL MOUNTAIN RD STE B10 AND B11

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

SAN DIEGO, CA 92129-2889
 Phone: 844-200-2426
Fax: 858-695-9074
 After Hours Phone:
844-200-2426
NPI: 1801907449

Accepting New Patients: Yes

- Site English Spoken: yes
- Site Languages(s) Spoken: Spanish


Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA:



OPERATION SAMAHAN
RANCHO PENASQUITOS

 Website: www.operationsamahan.org

OPERATION SAMAHAN RANCHO PENASQUITOS

Provider ID: 418535

 9995 CARMEL MOUNTAIN
RD STE B10 AND B11
SAN DIEGO, CA 92129-2889

 Phone: 844-200-2426
 After Hours Phone:
844-200-2426

License Number: PA19664

NPI: 1801907449

Accepting New Patients: Yes


- Site English Spoken: yes
- Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA:

OPERATION SAMAHAN
RANCHO PENASQUITOS
 Website: www.operationsamahan.org

OPERATION SAMAHAN RANCHO PENASQUITOS

Provider ID: 418535

 9995 CARMEL MOUNTAIN
RD STE B10 AND B11
SAN DIEGO, CA 92129-2889

 Phone: 844-200-2426
Fax: 858-695-9074

 After Hours Phone:
844-200-2426

License Number: 550003857

NPI: 1801907449

Accepting New Patients: Yes

- Site English Spoken: yes
- Site Languages(s) Spoken: Spanish


Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA:


OPERATION SAMAHAN
RANCHO PENASQUITOS

 Website: www.operationsamahan.org

OPERATION SAMAHAN - MIRA MESA

Provider ID: 417101

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

 Phone: 844-200-2426

 After Hours Phone:
844-200-2426

License Number: A161105

NPI: 1801907449

Accepting New Patients: Yes

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


Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA:


OPERATION SAMAHAN - MIRA
MESA


 Website: www.operationsamahan.org

OPERATION SAMAHAN - MIRA MESA

Provider ID: 417101

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

 Phone: 844-200-2426

 After Hours Phone:
844-200-2426

License Number: C54941


NPI: 1801907449

Accepting New Patients: Yes

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


Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN - MIRA
MESA

 Website: www.operationsamahan.org

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

OPERATION SAMAHAN - MIRA MESA

Provider ID: 417101

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

Phone: 844-200-2426

After Hours Phone:
844-200-2426

License Number: NP95003211

NPI: 1801907449

Accepting New Patients: Yes

Site English Spoken: yes

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN - MIRA
MESA

Website: www.operationsamahan.org

OPERATION SAMAHAN - MIRA MESA

Provider ID: 417101

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

Phone: 844-200-2426

Fax: 858-578-4417

After Hours Phone:
844-200-2426

NPI: 1801907449

Accepting New Patients: Yes

Site English Spoken: yes

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN - MIRA
MESA

Website: www.operationsamahan.org

OPERATION SAMAHAN - MIRA MESA

Provider ID: 417101

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

Phone: 844-200-2426

After Hours Phone:
844-200-2426

License Number: DC15775

NPI: 1801907449

Accepting New Patients: Yes

Site English Spoken: yes

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN - MIRA
MESA

Website: www.operationsamahan.org

OPERATION SAMAHAN - MIRA MESA

Provider ID: 417101

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

Phone: 844-200-2426
Fax: 858-578-4417

After Hours Phone:
844-200-2426

License Number: 80000146

NPI: 1801907449

Accepting New Patients: Yes

Site English Spoken: yes

Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN - MIRA
MESA

Website: www.operationsamahan.org

OPERATION SAMAHAN - MIRA MESA

Provider ID: 432308

9855 ERMA RD STE 105
SAN DIEGO, CA 92131-1007

Phone: 844-200-2426

After Hours Phone:
844-200-2426

License Number: A71544

NPI: 1801907449

Accepting New Patients: Yes

Site English Spoken: yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN - MIRA
MESA

Website: www.operationsamahan.org












D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

<p><i>mahan.org</i></p> <p>OPERATION SAMAHAN - MIRA MESA</p> <p>Provider ID: 432308</p> <p>9855 ERMA RD STE 105 SAN DIEGO, CA 92131-1007</p> <p>Phone: 844-200-2426 Fax: 858-536-8034</p> <p>After Hours Phone: 844-200-2426</p> <p>NPI: 1801907449</p> <p>Accepting New Patients: Yes</p> <p>Site English Spoken: yes</p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p> <p>Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: OPERATION SAMAHAN - MIRA MESA</p> <p>Website: <i>www.operationsamahan.org</i></p> <p>OPERATION SAMAHAN - MIRA MESA</p> <p>Provider ID: 432308</p> <p>9855 ERMA RD STE 105 SAN DIEGO, CA 92131-1007</p> <p>Phone: 844-200-2426</p> <p>After Hours Phone: 844-200-2426</p> <p>License Number: NP22974</p> <p>NPI: 1801907449</p> <p>Accepting New Patients: Yes</p> <p>Site English Spoken: yes</p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p> <p>Accessibility: CONTACT PROVIDER</p>	<p>Medical Group/IPA: OPERATION SAMAHAN - MIRA MESA</p> <p>Website: <i>www.operationsamahan.org</i></p> <p>OPERATION SAMAHAN - MIRA MESA</p> <p>Provider ID: 432308</p> <p>9855 ERMA RD STE 105 SAN DIEGO, CA 92131-1007</p> <p>Phone: 844-200-2426</p> <p>After Hours Phone: 844-200-2426</p> <p>License Number: NP95010585</p> <p>NPI: 1801907449</p> <p>Accepting New Patients: Yes</p> <p>Site English Spoken: yes</p> <p>Site Languages(s) Spoken: Spanish, Tagalog</p> <p>Cultural Competency: No</p> <p>American Sign Language (ASL): N</p> <p>Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: OPERATION SAMAHAN - MIRA MESA</p> <p>Website: <i>www.operationsamahan.org</i></p> <p>OPERATION SAMAHAN RANCHO PENASQUITOS</p> <p>Provider ID: 418535</p> <p>9995 CARMEL MOUNTAIN RD STE B10 AND B11 SAN DIEGO, CA 92129</p> <p>Phone: (844) 200-2426 Fax: (858) 695-9074</p> <p>After Hours Phone: (844) 200-2426</p> <p>License Number: 550003857</p> <p>NPI: 1699216622</p> <p>Accepting New Patients: Yes</p> <p>Min/Max Age: 0\150</p> <p>Site English Spoken: Y</p> <p>Site Languages(s) Spoken: Spanish</p> <p>Cultural Competency: N</p> <p>Hours: M-TU 8:30AM-5:30PM W 10:00AM-7:00PM TH-F 8:30AM-5:30PM</p> <p>American Sign Language (ASL):</p>	<p>NPI: 1699216622</p> <p>Accepting New Patients: Yes</p> <p>Min/Max Age: 0\150</p> <p>Site English Spoken: Y</p> <p>Site Languages(s) Spoken: Spanish</p> <p>Cultural Competency: N</p> <p>Hours: M-TU 8:30AM-5:30PM W 10:00AM-7:00PM TH-F 8:30AM-5:30PM</p> <p>American Sign Language (ASL): N</p> <p>Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: Operation Samahan</p> <p>Website: <i>www.operationsamahan.org</i></p> <p>OPERATION SAMAHAN RANCHO PENASQUITOS</p> <p>Provider ID: 418535</p> <p>9995 CARMEL MOUNTAIN RD STE B10 AND B11 SAN DIEGO, CA 92129</p> <p>Phone: (844) 200-2426 Fax: (858) 695-9074</p> <p>After Hours Phone: (844) 200-2426</p> <p>License Number: 550003857</p> <p>NPI: 1699216622</p> <p>Accepting New Patients: Yes</p> <p>Min/Max Age: 0\150</p> <p>Site English Spoken: Y</p> <p>Site Languages(s) Spoken: Spanish</p> <p>Cultural Competency: N</p> <p>Hours: M-TU 8:30AM-5:30PM W 10:00AM-7:00PM TH-F 8:30AM-5:30PM</p> <p>American Sign Language (ASL):</p>
--	---	--

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

<p>N  <i>Accessibility: CONTACT PROVIDER</i> <i>Medical Group/IPA: Operation Samahan</i>  <i>Website: www.operationsamahan.org</i></p>	<p><i>License Number: 550002478</i> <i>NPI: 1699216622</i> <i>Accepting New Patients: Yes</i> <i>Min/Max Age: 0\150</i>  <i>Site English Spoken: Y</i>  <i>Site Language(s) Spoken: Spanish</i> <i>Cultural Competency: N</i>  <i>Hours: M-TU 8:30AM-5:30PM W 10:00AM-7:00PM TH-F 8:30AM-5:30PM</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i> <i>Medical Group/IPA: Operation Samahan</i>  <i>Website: www.operationsamahan.org</i></p>	<p> <i>Accessibility: CONTACT PROVIDER</i> <i>Medical Group/IPA: IHP of Southern Cal-PHP</i>  <i>Website: www.sdfamilycare.org</i></p>
<p>OPERATION SAMAHAN - MIRA MESA <i>Provider ID: 432308</i>  9855 ERMA RD STE 105 SAN DIEGO, CA 92131  <i>Phone: (844) 200-2426</i> <i>Fax: (858) 536-8034</i>  <i>After Hours Phone: (844) 200-2426</i> <i>License Number: 080000146</i> <i>NPI: 1861933897</i> <i>Accepting New Patients: Yes</i> <i>Min/Max Age: 0\999</i>  <i>Site English Spoken: Y</i> <i>Cultural Competency: N</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i> <i>Medical Group/IPA: Operation Samahan</i>  <i>Website: www.operationsamahan.org</i></p>	<p>LINDA VISTA HEALTH CARE CTR <i>Provider ID: 206046</i>  6973 LINDA VISTA RD SAN DIEGO, CA 92111  <i>Phone: (858) 279-0925</i> <i>Fax: (858) 633-4680</i>  <i>After Hours Phone: (858) 279-0925</i> <i>NPI: 1609905215</i> <i>Accepting New Patients: Yes</i> <i>Min/Max Age: 0\150</i>  <i>Site English Spoken: Y</i>  <i>Site Language(s) Spoken: Vietnamese, Spanish, Chinese, Lithuanian</i> <i>Cultural Competency: N</i>  <i>Hours: M-F 8:30AM-5:30PM</i> <i>American Sign Language (ASL): N</i></p>	<p>SAN DIEGO FAMILY CARE <i>Provider ID: 482070</i>  7011 LINDA VISTA RD SAN DIEGO, CA 92111  <i>Phone: (858) 810-8700</i> <i>Fax: (858) 633-4680</i>  <i>After Hours Phone: (858) 810-8700</i> <i>NPI: 1457724858</i> <i>Accepting New Patients: Yes</i> <i>Min/Max Age: 0\150</i>  <i>Site English Spoken: Y</i>  <i>Site Language(s) Spoken: Lithuanian, Vietnamese, Spanish, Chinese</i> <i>Cultural Competency: N</i>  <i>Hours: M 8:30AM-5:30PM TU 8:30AM-8:30PM W-F 8:30AM-5:30PM SA 9:00AM-4:00PM</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i> <i>Medical Group/IPA: IHP of Southern Cal-PHP</i>  <i>Website: www.sdfamilycare.org</i></p>
<p>OPERATION SAMAHAN RANCHO PENASQUITOS <i>Provider ID: 418535</i>  9995 CARMEL MOUNTAIN RD STE B10 AND B11 SAN DIEGO, CA 92129  <i>Phone: (844) 200-2426</i> <i>Fax: (858) 695-9074</i>  <i>After Hours Phone: (844) 200-2426</i></p>		<p>OPERATION SAMAHAN - MIRA MESA <i>Provider ID: 417101</i>  10737 CAMINO RUIZ STE 235 SAN DIEGO, CA 92126  <i>Phone: (844) 200-2426</i></p>

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Fax: (858) 578-4417

☎ After Hours Phone: (844) 200-2426

License Number: 080000146

NPI: 1871680397

Accepting New Patients: Yes

Min/Max Age: 0\150

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Spanish, Tagalog

Cultural Competency: N

🕒 Hours: M-F
8:00AM-4:30PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: Operation Samahan

🌐 Website: www.operationsamahan.org

LINDA VISTA HEALTH CARE CTR

Provider ID: 206046

📍 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

☎ Phone: (858) 279-0925

Fax: (858) 633-4680

☎ After Hours Phone: (858) 279-0925

NPI: 1780665877

Accepting New Patients: Yes

Min/Max Age: 0\150

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Vietnamese, Spanish, Chinese, Lithuanian

Cultural Competency: N

🕒 Hours: M-F
8:30AM-5:30PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP of Southern Cal-PHP

🌐 Website: www.sdfamilycare.org

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

📍 3544 30TH ST
SAN DIEGO, CA 92104

☎ Phone: (619) 515-2424

Fax: (619) 501-0627

☎ After Hours Phone: (619) 515-2424

NPI: 1700821303

Accepting New Patients: Yes

Min/Max Age: 0\150

☐ Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: Family Health Centers of San Diego

🌐 Website: www.fhcsd.org

SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED

Provider ID: 517998

📍 4690 EL CAJON BLVD
SAN DIEGO, CA 92115

☎ Phone: (619) 662-4100

Fax: (619) 824-9076

☎ After Hours Phone: (619) 662-4100

License Number: 550003882

NPI: 1205477841

Accepting New Patients: Yes

Min/Max Age: 0\120

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Chinese, Spanish, Tagalog, Vietnamese

Cultural Competency: N

🕒 Hours: M-F
8:00AM-5:00PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP of Southern Cal-PHP

🌐 Website: N/A

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

📍 3514 30TH ST
SAN DIEGO, CA 92104

☎ Phone: (619) 515-2424

Fax: (619) 683-7586

☎ After Hours Phone: (619) 515-2424

License Number: 090000469

NPI: 1700821303

Accepting New Patients: Yes

Min/Max Age: 0\18

☐ Site English Spoken: Y
Cultural Competency: N

🕒 Hours: M-TH
8:00AM-5:00PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: Family Health Centers of San Diego

🌐 Website: www.fhcsd.org
Email: jenanm@fhcsd.org

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

3544 30TH ST
SAN DIEGO, CA 92104

Phone: (619) 515-2424

Fax: (619) 501-0627

After Hours Phone: (619)
515-2424

NPI: 1184169963

Accepting New Patients: Yes

Min/Max Age: 0\150

Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: Family
Health Centers of San Diego

Website: www.fhcsd.org

LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Phone: (619) 280-4213

Fax: (619) 795-9849

After Hours Phone: (619)
280-4213

NPI: 1336353721

Accepting New Patients: Yes

Min/Max Age: 0\150

Site English Spoken: Y

Cultural Competency: N

Hours: M-F

8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Medical Group/IPA: La

Maestra Family Clinic

Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

MID-CITY COMMUNITY CLINIC

Provider ID: 233532

4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

Phone: (619) 280-2058

Fax: (858) 633-4682

After Hours Phone: (619)
280-2058

NPI: 1962483040

Accepting New Patients: Yes

Min/Max Age: 0\22

Site English Spoken: Y

Cultural Competency: N

Hours: M-F

8:00AM-5:00PM

SA 8:00AM-2:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP of
Southern Cal-PHP

Website: www.sdfamilycare.org

SAN DIEGO AMERICAN INDIAN HEALTH CENTER

Provider ID: 207382

2630 1ST AVE

SAN DIEGO, CA 92103

Phone: (619) 234-2158

Fax: (619) 234-0206

After Hours Phone: (619)

234-2158

License Number: 090000168

NPI: 1003902917

Accepting New Patients: Yes

Min/Max Age: 0\150

Site English Spoken: Y

Site Language(s) Spoken:
Korean, Spanish, Hindi

Cultural Competency: N

Hours: M-F

8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP of
Southern Cal-PHP

Website: WWW.SDAIHC.ORG

G

Indian Health Services: Y

MID-CITY COMMUNITY CLINIC

Provider ID: 233597

4290 POLK AVE
SAN DIEGO, CA 92105

Phone: (619) 563-0250

Fax: (858) 633-4681

After Hours Phone: (619)
563-0250

NPI: 1962483040

Accepting New Patients: Yes

Min/Max Age: 0\150

Site English Spoken: Y

Cultural Competency: N

Hours: M-F

8:00AM-5:00PM

SA 8:00AM-2:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP of

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal


Southern Cal-PHP

 Website: www.sdfamilycare.org


OPERATION SAMAHAN RANCHO PENASQUITOS

Provider ID: 418535

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

 Phone: (844) 200-2426

Fax: (858) 695-9074

 After Hours Phone: (844) 200-2426


License Number: 550003857

NPI: 1699216622


Accepting New Patients: Yes

Min/Max Age: 0\150

 Site English Spoken: Y

 Site Languages(s) Spoken: Spanish

Cultural Competency: N


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

W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: Operation Samahan

 Website: www.operationsamahan.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

Fax: (858) 488-1394

 After Hours Phone: (619) 515-2444

License Number: 080000115


NPI: 1386689701

Accepting New Patients: Yes

Min/Max Age: 0\150

 Site English Spoken: Y

Cultural Competency: N

 Hours: M-W
8:30AM-5:30PM
TH 9:00AM-6:00PM
F 8:30AM-5:30PM

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: Family Health Centers of San Diego


 Website: www.fhcsd.org

Email: sabay@fhcsd.org

DOWNTOWN FAMILY CTR AT CONNECTIONS

Provider ID: 417782

 1250 6TH AVE STE 100
SAN DIEGO, CA 92101

 Phone: (619) 515-2430

Fax: (619) 578-2410

 After Hours Phone: (619) 515-2430

License Number: 550002251


NPI: 1588901045

Accepting New Patients: Yes


Min/Max Age: 0\150

 Site English Spoken: Y

Cultural Competency: N

 Hours: M-F
8:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: Family Health Centers of San Diego


 Website: www.fhcsd.org

Email: jinah@fhcsd.org

FAMILY HEALTH CTR OF SD- ELM ST

Provider ID: 419167

 140 ELM ST
SAN DIEGO, CA 92101

 Phone: (619) 515-2520

Fax: (619) 231-0431

 After Hours Phone: (619) 515-2520


License Number: 550002061

NPI: 1316419070

Accepting New Patients: Yes

Min/Max Age: 0\150

 Site English Spoken: Y
Cultural Competency: N

 Hours: M-F
8:00AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: Family Health Centers of San Diego


 Website: www.fhcsd.org

Email: jinah@fhcsd.org

FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE

Provider ID: 417429

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101

 Phone: (619) 515-2525

Fax: (619) 501-5814

 After Hours Phone: (619) 515-2525

License Number: 550002865

NPI: 1356750376

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal

Accepting New Patients: Yes

Min/Max Age: 0\150


 Site English Spoken: Y

Cultural Competency: N

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

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: Family Health Centers of San Diego


 Website: www.fhcsd.org

Email: janeta@fhcsd.org

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 Phone: (619) 233-8500

Fax: (619) 687-1067

 After Hours Phone: (619)
233-8500

License Number: 090000297


NPI: 1659415131

Accepting New Patients: No

Min/Max Age: 0\999

 Site English Spoken: Y

Cultural Competency: N

 Hours: M-F
8:00AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP of Southern Cal-PHP

 Website: N/A


FAMILY HEALTH CTR SAN DIEGO-OAK PARK

Provider ID: 418142

 5160 FEDERAL BLVD
SAN DIEGO, CA 92105

 Phone: (619) 515-2454

Fax: (619) 794-2696

 After Hours Phone: (619)
515-2454

License Number: 550003556

NPI: 1336525906

Accepting New Patients: Yes

Min/Max Age: 0\150

 Site English Spoken: Y

Cultural Competency: N

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

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: Family Health Centers of San Diego


 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

Fax: (619) 234-2447

 After Hours Phone: (619)
515-2300

NPI: 1447281936

Accepting New Patients: Yes


Min/Max Age: 0\150

 Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: Family


Health Centers of San Diego


 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

SAN YSIDRO HEALTH PRECISION PARK

Provider ID: 631494

 1666 PRECISION PARK LN
SAN DIEGO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 600-4870

 After Hours Phone: (619)
662-4100


License Number: 550007737

NPI: 1124782685


Accepting New Patients: Yes

Min/Max Age: 0\999

 Site English Spoken: Y


 Site Languages(s) Spoken:
Spanish

Cultural Competency: N

 Hours: M-F
8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP of Southern Cal-PHP

 Website: www.syhealth.org

FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

Fax: (619) 501-9645

 After Hours Phone: (619)
515-2545

License Number: 550003099

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

NPI: 1629456900

Accepting New Patients: Yes

Min/Max Age: 0\150

Site English Spoken: Y

Cultural Competency: N

Hours: M-TH

8:00AM-9:00PM

F 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: Family Health Centers of San Diego

Website: www.fhcsd.org

Email: fabianm@fhcsd.org

KING CHAVEZ HEALTH CENTER

Provider ID: 451167

950 S EUCLID AVE
SAN DIEGO, CA 92114

Phone: (619) 662-4100

Fax: (619) 205-1952

After Hours Phone: (619) 662-4100

NPI: 1538262092

Accepting New Patients: Yes

Min/Max Age: 0\150

Site English Spoken: Y

Site Languages(s) Spoken: Chinese, Spanish, Tagalog, Vietnamese

Cultural Competency: N

Hours: M-F

8:00AM-5:00PM

SA 8:00AM-4:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP of

Southern Cal-PHP

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

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

Fax: (619) 263-2499

After Hours Phone: (619) 515-2560

NPI: 1982747671

Accepting New Patients: Yes

Min/Max Age: 0\150

Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: Family Health Centers of San Diego

Website: www.fhcsd.org

Email: nancyl@fhcsd.org

FAMILY HEALTH CTR SAN DIEGO-OAK PARK

Provider ID: 664747

2114 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2406

After Hours Phone: (619) 515-2406

License Number: 550003556

NPI: 1336525906

Accepting New Patients: Yes

Min/Max Age: 0\999

Site English Spoken: Y

Cultural Competency: N

Hours: M-F

8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: Family Health Centers of San Diego

Website: www.fhcsd.org

FAMILY HEALTH CTR IBARRA

Provider ID: 417987

4874 POLK AVE
SAN DIEGO, CA 92105

Phone: (619) 515-2426

Fax: (619) 255-8002

After Hours Phone: (619) 515-2426

License Number: 550003108

NPI: 1477953933

Accepting New Patients: Yes

Min/Max Age: 0\150

Site English Spoken: Y

Cultural Competency: N

Hours: M-F

8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: Family Health Centers of San Diego

Website: www.fhcsd.org

NESTOR COMMUNITY HEALTH CENTER

Provider ID: 214492

1016 OUTER RD
SAN DIEGO, CA 92154

Phone: (619) 429-3733

Fax: (619) 628-5550

After Hours Phone: (619)

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

429-3733
License Number: 550001474
NPI: 1215246996
Accepting New Patients: Yes
Min/Max Age: 0\150
 Site English Spoken: Y
 Site Language(s) Spoken: Spanish
Cultural Competency: N
 Hours: M 8:30AM-5:00PM
TU-TH 8:30AM-8:00PM
F 8:30AM-5:00PM
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal-PHP
 Website: www.ibclinic.org
Email: avaldez@ibclinic.org

LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 624977
 2204 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2355
Fax: (619) 232-7011
 After Hours Phone: (619) 515-2355
NPI: 1447281936
Accepting New Patients: Yes
Min/Max Age: 0\150
 Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: Family Health Centers of San Diego
 Website: www.fhcsd.org

SHERMAN HEIGHTS FAMILY HLTH CTRS INC

Provider ID: 356145
 2391 ISLAND AVE
SAN DIEGO, CA 92102
 Phone: (619) 515-2435
Fax: (619) 515-2435
 After Hours Phone: (619) 515-2435
NPI: 1174549232
Accepting New Patients: Yes
Min/Max Age: 0\150
 Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: Family Health Centers of San Diego
 Website: N/A
Email: dalvarado@fhcsd.org

FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL

Provider ID: 419529
 2325 COMMERCIAL ST STE 1400
SAN DIEGO, CA 92113
 Phone: (619) 515-2422
Fax: (619) 269-0053
 After Hours Phone: (619) 515-2422
License Number: 550003113
NPI: 1235521782
Accepting New Patients: Yes
Min/Max Age: 0\150
 Site English Spoken: Y
Cultural Competency: N
 Hours: M-F
8:00AM-5:00PM

American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: Family Health Centers of San Diego
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE

Provider ID: 517403
 316 25TH ST
SAN DIEGO, CA 92102
 Phone: (619) 238-5551
Fax: (619) 238-3807
 After Hours Phone: (619) 238-5551
NPI: 1598308926
Accepting New Patients: Yes
Min/Max Age: 0\120
 Site English Spoken: Y
Cultural Competency: N
 Hours: M-F
8:00AM-5:00PM
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal-PHP
 Website: N/A

SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409
 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
 Phone: (619) 662-4100
Fax: (619) 595-0258
 After Hours Phone: (619) 662-4100

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

NPI: 1326225632

Accepting New Patients: Yes

Min/Max Age: 0\150

Site English Spoken: Y

Site Language(s) Spoken: ,
Spanish

Cultural Competency: N

Hours: M-F

8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP of

Southern Cal-PHP

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

Provider ID: 625875

1595 GRAND AVE STE 100

SAN MARCOS, CA

92078-2450

Phone: 760-520-8200

Fax: 360-462-2749

After Hours Phone:

760-520-8200

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: TRUECARE

Website: www.ihpsocal.org

1595 GRAND AVE STE 100

SAN MARCOS, CA

92078-2450

Phone: 760-736-6767

Fax: 760-736-6744

After Hours Phone:

760-736-6767

License Number: PA17718

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: TRUECARE

Website: www.ihpsocal.org

SAN MARCOS

TRUECARE

Provider ID: 625875

1595 GRAND AVE STE 100

SAN MARCOS, CA

92078-2450

Phone: 760-520-8200

Fax: 360-462-2749

After Hours Phone:

760-520-8200

License Number: 80000167

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: TRUECARE

Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

1595 GRAND AVE STE 100

SAN MARCOS, CA

92078-2450

Phone: 760-736-6767

Fax: 760-736-6744

After Hours Phone:

760-736-6767

License Number: 1598122871

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: TRUECARE

Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

1595 GRAND AVE STE 100

SAN MARCOS, CA

92078-2450

Phone: 760-736-6767

Fax: 760-736-6744

After Hours Phone:

760-736-6767

License Number: NP18788

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: TRUECARE

Website: www.ihpsocal.org

TRUECARE

TRUECARE

Provider ID: 625875


TRUECARE


Provider ID: 625875


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

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

 Phone: 760-736-6767

 Fax: 760-736-8740

 After Hours Phone:
760-736-6767

License Number: 80000167

NPI: 1598122871

Accepting New Patients: Yes


Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: TRUECARE


 Website: www.ihpsocal.org


TRUECARE

Provider ID: 614511

 1595 GRAND AVE STE 106
SAN MARCOS, CA
92078-2450

 Phone: 760-736-6767

 Fax: 760-736-6744

 After Hours Phone:
760-736-6767

License Number: 80000167

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes


Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: TRUECARE


 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

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

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767

License Number: PA22667

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: TRUECARE


 Website: www.ihpsocal.org

TRUECARE

Provider ID: 614511

 1595 GRAND AVE STE 106
SAN MARCOS, CA
92078-2450

 Phone: 760-736-6767

 Fax: 760-736-6744

 After Hours Phone:
760-736-6767

License Number: C54157

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: TRUECARE


 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

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

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767

License Number: PA19825

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish


Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: TRUECARE


 Website: www.ihpsocal.org


TRUECARE

Provider ID: 625875

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

 Phone: 760-736-6767

 Fax: 760-736-8740

 After Hours Phone:
760-736-6767

NPI: 1598122871

Accepting New Patients: Yes


Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal


Medical Group/IPA: TRUECARE  Accessibility: CONTACT PROVIDER
 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

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

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767

License Number: PA21723

NPI: 1598122871

Accepting New Patients: Yes


Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish


Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: TRUECARE


 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

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

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767

License Number: PA51867

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

Medical Group/IPA: TRUECARE  Accessibility: CONTACT PROVIDER


Medical Group/IPA: TRUECARE


 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

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

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767

License Number: PA17101

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish


Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: TRUECARE

 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

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

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767

License Number: NP95003903

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: TRUECARE


 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

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

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767

License Number: NP95002545

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish


Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: TRUECARE


 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

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

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767

License Number: G71182

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: TRUECARE

 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

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

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767

License Number: C54157

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: TRUECARE


 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

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

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767

License Number: A93248

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:

Spanish
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: TRUECARE

 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

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

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767

License Number: DC29074

NPI: 1598122871

Accepting New Patients: Yes


Site English Spoken: Yes

Site Languages(s) Spoken:

Spanish

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: TRUECARE


 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

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

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767

License Number: A71311

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: TRUECARE

 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

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

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767

License Number: NP18874

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: TRUECARE


 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

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

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767

License Number: NM235997

NPI: 1598122871

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Accepting New Patients: Yes

- Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: TRUECARE


 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

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

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767

License Number: NM235844

NPI: 1598122871

Accepting New Patients: Yes


- Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: TRUECARE


 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

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

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767

License Number: NP95001653

NPI: 1598122871

Accepting New Patients: Yes


- Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: TRUECARE


 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

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

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767

License Number: NP21368

NPI: 1598122871

Accepting New Patients: Yes

- Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: TRUECARE


 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

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

 Phone: 760-736-6767

 After Hours Phone:

760-736-6767

License Number: NP20893

NPI: 1598122871

Accepting New Patients: Yes


- Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: TRUECARE


 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

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

 Phone: 760-736-6767

 After Hours Phone:
760-736-6767

License Number: G74757

NPI: 1598122871


Accepting New Patients: Yes

- Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: TRUECARE


 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875

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

 Phone: 760-736-6767






 After Hours Phone:

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal





760-736-6767
License Number: 20A15159
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org

TRUECARE






Provider ID: 625875
 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973
 Phone: 760-736-6767
 After Hours Phone: 760-736-6767
License Number: A116562
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org

TRUECARE


Provider ID: 625875
 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973





 Phone: 760-736-6767
 After Hours Phone: 760-736-6767
License Number: 20A17306
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org

TRUECARE






Provider ID: 625875
 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973
 Phone: 760-736-6767
 After Hours Phone: 760-736-6767
License Number: A48980
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875
 1595 GRAND AVE STE 100

SAN MARCOS, CA
92069-2973
 Phone: 760-736-6767
 After Hours Phone: 760-736-6767
License Number: A60958
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org

TRUECARE

Provider ID: 625875
 1595 GRAND AVE STE 100
SAN MARCOS, CA
92069-2973
 Phone: 760-736-6767
 After Hours Phone: 760-736-6767
License Number: A63903
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
 Website: www.ihpsocal.org

TRUECARE

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Provider ID: 614511

1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)
736-6767

License Number: 080000167

NPI: 1598484255

Accepting New Patients: Yes

Min/Max Age: 0\999

Site English Spoken: Y
Cultural Competency: N

Hours: M-F
8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP of
Southern Cal-PHP

Website: www.ihpsocal.org

TRUECARE

Provider ID: 614511

1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)
736-6767

License Number: 080000167

NPI: 1811617939

Accepting New Patients: Yes

Min/Max Age: 0\999

Site English Spoken: Y
Cultural Competency: N

Hours: M-F
8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

Medical Group/IPA: IHP of
Southern Cal-PHP

Website: www.ihpsocal.org

TRUECARE

Provider ID: 614511

1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)
736-6767

License Number: 080000167

NPI: 1245246917

Accepting New Patients: Yes

Min/Max Age: 0\999

Site English Spoken: Y
Cultural Competency: N

Hours: M-F
8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP of
Southern Cal-PHP

Website: www.ihpsocal.org

TRUECARE

Provider ID: 206426

150 VALPREDA RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)
736-6767

License Number: 080000167

NPI: 1245246917

Accepting New Patients: Yes

Min/Max Age: 0\150

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

Cultural Competency: N

Hours: M-F
8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP of
Southern Cal-PHP

Website: www.ihpsocal.org

TRUECARE

Provider ID: 206426

150 VALPREDA RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)
736-6767

License Number: 080000167

NPI: 1598484255

Accepting New Patients: Yes

Min/Max Age: 0\150

Site English Spoken: Y
Site Languages(s) Spoken:
Spanish

Cultural Competency: N

Hours: M-F
8:00AM-5:00PM
SA 8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER








Medical Group/IPA: IHP of
Southern Cal-PHP

Website: www.ihpsocal.org

TRUECARE





D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Provider ID: 206426
 150 VALPRED A RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767
 Fax: (760) 736-6744
 After Hours Phone: (760)
736-6767
License Number: 080000167
NPI: 1811617939
Accepting New Patients: Yes
Min/Max Age: 0\150
 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish
Cultural Competency: N
 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-5:00PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP of
Southern Cal-PHP
 Website: www.ihpsocal.org

SAN YSIDRO

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS





Provider ID: 227469
 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: PT302385
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS
 Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS







Provider ID: 227469
 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: PA58672
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS
 Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469
 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322
 Phone: 619-662-4100
Fax: 619-600-4870
 After Hours Phone:
619-662-4100
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes

Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS
 Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469
 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: NP95003671
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS
 Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469
 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: NP95001960
NPI: 1598122871

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HLTH SAN DIEGO

PACE SENIOR HLTH SVS

Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469

3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: NP95003721

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HLTH SAN DIEGO

PACE SENIOR HLTH SVS

Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469

3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: NP95004315

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN

YSIDRO HLTH SAN DIEGO

PACE SENIOR HLTH SVS

Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469

3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: NP95017732

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN

YSIDRO HLTH SAN DIEGO

PACE SENIOR HLTH SVS

Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469

3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: NP95019995

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN

YSIDRO HLTH SAN DIEGO

PACE SENIOR HLTH SVS

Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469

3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

Phone: 619-662-4100

After Hours Phone:
619-662-4100

License Number: NP12112

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN

YSIDRO HLTH SAN DIEGO

PACE SENIOR HLTH SVS


Website: www.ihpsocal.org


SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Provider ID: 227469

 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: G66745


NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HLTH SAN DIEGO


PACE SENIOR HLTH SVS

 Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469

 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: DPM2930

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HLTH SAN DIEGO


PACE SENIOR HLTH SVS

 Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469

 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A40473

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HLTH SAN DIEGO


PACE SENIOR HLTH SVS

 Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469

 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A51843

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HLTH SAN DIEGO


PACE SENIOR HLTH SVS

 Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469

 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: C42207


NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HLTH SAN DIEGO


PACE SENIOR HLTH SVS


 Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469

 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A164201

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal


YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS


 Website: www.ihpsocal.org

**SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS**

Provider ID: 227469

 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A167529

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS


 Website: www.ihpsocal.org

**SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS**

Provider ID: 227469

 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A32571

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HLTH SAN DIEGO


PACE SENIOR HLTH SVS


 Website: www.ihpsocal.org

**SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS**

Provider ID: 227469

 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A120584

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS


 Website: www.ihpsocal.org

**SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS**

Provider ID: 227469

 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A145480

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS


 Website: www.ihpsocal.org

**SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS**

Provider ID: 227469

 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A153975

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS


 Website: www.ihpsocal.org

**SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS**

Provider ID: 227469

 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

 Phone: 619-600-4867

 After Hours Phone:
619-600-4867




License Number: PA22855

NPI: 1598122871

Accepting New Patients: Yes


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal


 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS
 Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469

 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

 Phone: 619-600-4870

 After Hours Phone:
619-600-4870

License Number: NP95018617

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS

 Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469

 3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A113624

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS

 Website: www.ihpsocal.org


SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

Fax: 619-205-6341

 After Hours Phone:
619-662-4100

License Number: A78373

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
 Site Languages(s) Spoken:

Spanish, Tagalog,
Portuguese

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100



Fax: 619-205-6341

 After Hours Phone:
619-662-4100

License Number: 20A7241

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100



Fax: 619-205-6341

 After Hours Phone:
619-662-4100

License Number: A164201

NPI: 1598122871

Accepting New Patients: Yes


 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Cultural Competency: No

American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 *Phone: 619-662-4100*

Fax: 619-205-6341


 *After Hours Phone: 619-662-4100*

License Number: A55469

NPI: 1598122871


Accepting New Patients: Yes

 *Site English Spoken: Yes*

 *Site Languages(s) Spoken: Spanish, Tagalog, Portuguese*

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER


 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA

92173-2007

 *Phone: 619-662-4100*


 *After Hours Phone: 619-662-4100*

License Number: G51462

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*

 *Site Languages(s) Spoken: Spanish, Tagalog, Portuguese*

Cultural Competency: No

American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 *Phone: 619-662-4100*


 *After Hours Phone: 619-662-4100*

License Number: G59670

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*

 *Site Languages(s) Spoken: Spanish, Tagalog, Portuguese*

Cultural Competency: No

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: SAN


YSIDRO HEALTH SAN YSIDRO HEALTH CENTER


 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 *Phone: 619-662-4100*


 *After Hours Phone: 619-662-4100*

License Number: G80107

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*

 *Site Languages(s) Spoken: Spanish, Tagalog, Portuguese*

Cultural Competency: No

American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 *Phone: 619-662-4100*

 *After Hours Phone: 619-662-4100*

License Number: NP12112

NPI: 1598122871

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish, Tagalog, Portuguese

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN

YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

Phone: 619-662-4100

After Hours Phone: 619-662-4100

License Number: G81461

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish, Tagalog, Portuguese

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN

YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

Provider ID: 206292

4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

Phone: 619-662-4100

Fax: 619-205-6341

After Hours Phone: 619-662-4100

License Number: DPM2930

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN

YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

Phone: 619-662-4100

After Hours Phone: 619-662-4100

License Number: PA20490

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish, Tagalog, Portuguese

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN

YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

Phone: 619-662-4100

Fax: 619-205-6305

After Hours Phone: 619-662-4100

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish, Tagalog, Portuguese

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN

YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

Phone: 619-662-4100

After Hours Phone: 619-662-4100

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

License Number: NP95003355

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish, Tagalog, Portuguese

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

Phone: 619-662-4100

After Hours Phone: 619-662-4100

License Number: PA17162

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish, Tagalog, Portuguese

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

Phone: 619-662-4100

After Hours Phone: 619-662-4100

License Number: A145480

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish, Tagalog, Portuguese

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

Phone: 619-662-4100

After Hours Phone: 619-662-4100

License Number: A157505

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish, Tagalog,

Portuguese

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

Phone: 619-662-4100

After Hours Phone: 619-662-4100

License Number: A158364

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish, Tagalog, Portuguese

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Website: www.ihpsocal.org





SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER





Provider ID: 206292

4004 BEYER BLVD
SAN YSIDRO, CA

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal




D1. Clínicas de salud con calificación federal


92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A138568
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER
 Website: www.ihpsocal.org


**SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER**
Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A132982
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER
 Website: www.ihpsocal.org




SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER



Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A145008
NPI: 1598122871

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER






Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A169694
NPI: 1598122871

Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER
 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A170738
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER
 Website: www.ihpsocal.org


SAN YSIDRO HEALTH SAN


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal

YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A173435

NPI: 1598122871

Accepting New Patients: Yes


Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A159673

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A114893

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

After Hours Phone:

619-662-4100

License Number: A125329

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A114008

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal


HEALTH CENTER

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100


 After Hours Phone:
619-662-4100

License Number: A113482

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100


 After Hours Phone:
619-662-4100

License Number: A127188

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100


 After Hours Phone:
619-662-4100

License Number: A130348

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100


 After Hours Phone:
619-662-4100

License Number: A131021

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100


 After Hours Phone:
619-662-4100

License Number: A131952

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes


 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

American Sign Language (ASL):
N


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal


 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 *Phone: 619-662-4100*

 *After Hours Phone: 619-662-4100*

License Number: A93785

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish, Tagalog, Portuguese

Cultural Competency: No

American Sign Language (ASL):

N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER


 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 *Phone: 619-662-4100*

 *After Hours Phone: 619-662-4100*

License Number: A99433

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish, Tagalog, Portuguese

Cultural Competency: No

American Sign Language (ASL):

N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 *Phone: 619-662-4100*

 *After Hours Phone: 619-662-4100*

License Number: A84160

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish, Tagalog, Portuguese

Cultural Competency: No

American Sign Language (ASL):

N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 *Phone: 619-662-4100*

 *After Hours Phone: 619-662-4100*

License Number: DC33693

NPI: 1598122871

Accepting New Patients: Yes


Site English Spoken: Yes

Site Languages(s) Spoken: Spanish, Tagalog, Portuguese

Cultural Competency: No

American Sign Language (ASL):

N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 *Phone: 619-662-4100*

 *After Hours Phone: 619-662-4100*

License Number: C51110

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes




Site Languages(s) Spoken: Spanish, Tagalog,

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal


Portuguese
Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER


Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 *Phone: 619-662-4100*
 *After Hours Phone:*
619-662-4100



License Number: C42207
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese


Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA

92173-2007
 *Phone: 619-662-4100*
 *After Hours Phone:*
619-662-4100
License Number: A80832
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese


Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 *Phone: 619-662-4100*
 *After Hours Phone:*
619-662-4100

License Number: A77936
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese


Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 *Phone: 619-662-4100*
 *After Hours Phone:*
619-662-4100

License Number: A72235
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 *Phone: 619-662-4100*
 *After Hours Phone:*
619-662-4100

License Number: A71304
NPI: 1598122871

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Accepting New Patients: Yes

- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish, Tagalog, Portuguese

Cultural Competency: No

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A49267

NPI: 1598122871

Accepting New Patients: Yes

- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish, Tagalog, Portuguese

Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER


 Website: www.ihpsocal.org


SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A49307

NPI: 1598122871

Accepting New Patients: Yes

- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish, Tagalog, Portuguese

Cultural Competency: No

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A56153

NPI: 1598122871

Accepting New Patients: Yes

- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish, Tagalog, Portuguese

Cultural Competency: No

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A66885

NPI: 1598122871

Accepting New Patients: Yes

- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish, Tagalog, Portuguese

Cultural Competency: No

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER






























Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100






D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

 After Hours Phone: 619-662-4100 License Number: A63844 NPI: 1598122871 Accepting New Patients: Yes	HEALTH CENTER  Website: www.ihpsocal.org	 Site Language(s) Spoken: Spanish, Tagalog, Portuguese Cultural Competency: No American Sign Language (ASL): N
 Site English Spoken: Yes  Site Language(s) Spoken: Spanish, Tagalog, Portuguese Cultural Competency: No American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER  Website: www.ihpsocal.org	SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER Provider ID: 206292  4004 BEYER BLVD SAN YSIDRO, CA 92173-2007  Phone: 619-662-4100  After Hours Phone: 619-662-4100 License Number: A40480 NPI: 1598122871 Accepting New Patients: Yes	 Accessibility: CONTACT PROVIDER Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER  Website: www.ihpsocal.org
SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER Provider ID: 206292  4004 BEYER BLVD SAN YSIDRO, CA 92173-2007  Phone: 619-662-4100  After Hours Phone: 619-662-4100 License Number: A40061 NPI: 1598122871 Accepting New Patients: Yes	SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER Provider ID: 206292  4004 BEYER BLVD SAN YSIDRO, CA 92173-2007  Phone: 619-662-4100  After Hours Phone: 619-662-4100 License Number: A180886 NPI: 1598122871 Accepting New Patients: Yes	 Site English Spoken: Yes  Site Language(s) Spoken: Spanish, Tagalog, Portuguese Cultural Competency: No American Sign Language (ASL): N
 Site English Spoken: Yes  Site Language(s) Spoken: Spanish, Tagalog, Portuguese Cultural Competency: No American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO	SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER Provider ID: 206292  4004 BEYER BLVD SAN YSIDRO, CA 92173-2007  Phone: 619-662-4100  After Hours Phone: 619-662-4100 License Number: A177337 NPI: 1598122871 Accepting New Patients: Yes	 Accessibility: CONTACT PROVIDER Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER  Website: www.ihpsocal.org
	 Site English Spoken: Yes	SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER Provider ID: 206292

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal






D1. Clínicas de salud con calificación federal






-  4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A175006
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Language(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER
 Website: www.ihpsocal.org
- SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR**
Provider ID: 227411
 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: C160626
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
- Medical Group/IPA: SAN
YSIDRO HEALTH MATERNAL
AND CHILD HEALTH CTR
 Website: www.ihpsocal.org
- SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR**
Provider ID: 227411
 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: C158543
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH MATERNAL
AND CHILD HEALTH CTR
 Website: www.ihpsocal.org
- SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR**
Provider ID: 227411
 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: C149818
NPI: 1598122871
Accepting New Patients: Yes
-  Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH MATERNAL
AND CHILD HEALTH CTR
 Website: www.ihpsocal.org
- SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR**
Provider ID: 227411
 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A178949
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH MATERNAL
AND CHILD HEALTH CTR
 Website: www.ihpsocal.org
- SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR**
Provider ID: 227411
 4050 BEYER BLVD
SAN YSIDRO, CA





D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal






92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A175006
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH MATERNAL
AND CHILD HEALTH CTR
 Website: www.ihpsocal.org




**SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR**
Provider ID: 227411
 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A47906
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH MATERNAL
AND CHILD HEALTH CTR
 Website: www.ihpsocal.org

**SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR**
Provider ID: 227411
 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A94813
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH MATERNAL
AND CHILD HEALTH CTR
 Website: www.ihpsocal.org

**SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR**
Provider ID: 227411
 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A74960
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT

PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH MATERNAL
AND CHILD HEALTH CTR
 Website: www.ihpsocal.org

**SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR**
Provider ID: 227411
 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A138938
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH MATERNAL
AND CHILD HEALTH CTR
 Website: www.ihpsocal.org

**SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR**
Provider ID: 227411
 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A113914
NPI: 1598122871

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A112627

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

 Website: www.ihpsocal.org


SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR


Provider ID: 227411

 4050 BEYER BLVD

SAN YSIDRO, CA

92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A157505

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A169577

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: A111118

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: 20A8516

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR
 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 *Phone: 619-662-4100*

 *After Hours Phone: 619-662-4100*

License Number: 20A14949

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL):

N


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 *Phone: 619-662-4100*

 *After Hours Phone: 619-662-4100*

License Number: 20A14222

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL):


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 *Phone: 619-662-4100*

 *After Hours Phone: 619-662-4100*

License Number: 20A12555

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL):


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 *Phone: 619-662-4100*

Fax: 619-205-1948

 *After Hours Phone: 619-662-4100*

License Number: A82187

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL):


 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 *Phone: 619-662-4100*

Fax: 619-205-1948

 *After Hours Phone: 619-662-4100*

License Number: G20087

NPI: 1598122871

Accepting New Patients: Yes

 *Site English Spoken: Yes*
Cultural Competency: No

American Sign Language (ASL):

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: SAN

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal


YSIDRO HEALTH MATERNAL
AND CHILD HEALTH CTR

 Website: www.ihpsocal.org

**SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR**

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

 After Hours Phone:
619-662-4100

License Number: G52183

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH MATERNAL
AND CHILD HEALTH CTR

 Website: www.ihpsocal.org

**SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR**

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

Fax: 619-205-1948

 After Hours Phone:
619-662-4100

License Number: A49307

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH MATERNAL
AND CHILD HEALTH CTR

 Website: www.ihpsocal.org

**SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR**

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

Fax: 619-205-1948

 After Hours Phone:
619-662-4100

License Number: A63844

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH MATERNAL
AND CHILD HEALTH CTR


 Website: www.ihpsocal.org


**SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR**

Provider ID: 227411

 4050 BEYER BLVD

SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100
Fax: 619-205-1948

 After Hours Phone:
619-662-4100

License Number: A72721

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH MATERNAL
AND CHILD HEALTH CTR


 Website: www.ihpsocal.org

**SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER**

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-428-4463

 After Hours Phone:
619-428-4463

License Number: 20A8245


NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal


YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER


 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-428-4463


 After Hours Phone:
619-428-4463

License Number: A112627

NPI: 1598122871

Accepting New Patients: Yes


 Site English Spoken: Yes

 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER

 Website: www.ihpsocal.org


SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

Fax: 619-205-1948

 After Hours Phone:
619-662-4100

License Number: G51462

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH MATERNAL
AND CHILD HEALTH CTR

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

 4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100

Fax: 619-205-6305

 After Hours Phone:
619-662-4100

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH MATERNAL
AND CHILD HEALTH CTR

 Website: www.ihpsocal.org


SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER


Provider ID: 206292

 4004 BEYER BLVD

SAN YSIDRO, CA

92173-2007


 Phone: 619-205-6341


 After Hours Phone:
619-205-6341

License Number: A64487

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007

 Phone: 619-662-4100


 After Hours Phone:
619-662-4100

License Number: 20A8081

NPI: 1598122871

Accepting New Patients: Yes

 Site English Spoken: Yes

 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese

Cultural Competency: No

American Sign Language (ASL):
N




 Accessibility: CONTACT

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER
 Website: www.ihpsocal.org


SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: 20A9907
NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese


Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A101017


NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese
Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100

License Number: A106103

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese




Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A101827
NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese




Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER

 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 Phone: 619-662-4100
 After Hours Phone:
619-662-4100
License Number: A104660
NPI: 1598122871

Accepting New Patients: Yes




Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish, Tagalog,
Portuguese



D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal


Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER


Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 *Phone: 619-662-4100*
 *After Hours Phone: 619-662-4100*
License Number: 20A10964
NPI: 1598122871

Accepting New Patients: Yes
 *Site English Spoken: Yes*
 *Site Languages(s) Spoken: Spanish, Tagalog, Portuguese*



Cultural Competency: No
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 *Website: www.ihpsocal.org*



SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

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




 *Phone: 619-662-4100*
 *After Hours Phone: 619-662-4100*
License Number: 20A11153
NPI: 1598122871

Accepting New Patients: Yes
 *Site English Spoken: Yes*
 *Site Languages(s) Spoken: Spanish, Tagalog, Portuguese*



Cultural Competency: No
American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 *Website: www.ihpsocal.org*


SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
 *Phone: 619-662-4100*
 *After Hours Phone: 619-662-4100*

License Number: 20A12653
NPI: 1598122871


Accepting New Patients: Yes
 *Site English Spoken: Yes*
 *Site Languages(s) Spoken: Spanish, Tagalog, Portuguese*



Cultural Competency: No
American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN



YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER



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

 *Phone: 619-662-4100*
 *After Hours Phone: 619-662-4100*


License Number: 20A17643
NPI: 1598122871



Accepting New Patients: Yes
 *Site English Spoken: Yes*
 *Site Languages(s) Spoken: Spanish, Tagalog, Portuguese*

Cultural Competency: No
American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 *Website: www.ihpsocal.org*

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

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





 *Phone: 619-662-4100*
 *After Hours Phone: 619-662-4100*

License Number: 20A7502
NPI: 1598122871









Accepting New Patients: Yes

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal









D1. Clínicas de salud con calificación federal

 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 Website: www.ihpsocal.org


SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS






Provider ID: 227469
 3364 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
Fax: (619) 600-4870
 After Hours Phone: (619) 662-4100
NPI: 1801438239
Accepting New Patients: Yes
Min/Max Age: 0\150
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
Cultural Competency: N
 Hours: M-F
8:00AM-5:00PM
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal-PHP
 Website: <https://www.syhealth.org/locations>

SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER
Provider ID: 206292
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
Fax: (619) 205-6305
 After Hours Phone: (619) 662-4100
NPI: 1952364747
Accepting New Patients: Yes
Min/Max Age: 0\150
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
Cultural Competency: N
 Hours: M-F
8:00AM-5:30PM
SA 8:30AM-2:00PM
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal-PHP
 Website: www.syhealth.org/clinics/san-ysidro-health-center







SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411
 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
Fax: (619) 205-1967
 After Hours Phone: (619) 662-4100
NPI: 1558852947
Accepting New Patients: Yes
Min/Max Age: 0\150

 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish, Tagalog
Cultural Competency: N
 Hours: M-F
8:00AM-5:00PM
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal-PHP
 Website: syhealth.org/clinics/maternal-child-health-center

SPRING VALLE

GROSSMONT SPRING VALLEY

FAMILY HLTH CTRS INC
Provider ID: 206361
 8788 JAMACHA RD
SPRING VALLE, CA 91977-4035
 Phone: 619-515-2555
 After Hours Phone: 619-515-2555
License Number: 20A11535
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC
 Website: www.fhcsd.org

GROSSMONT SPRING VALLEY

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

FAMILY HLTH CTRS INC

Provider ID: 206361

8788 JAMACHA RD
SPRING VALLE, CA
91977-4035

Phone: 619-515-2555

After Hours Phone:
619-515-2555

License Number: 20A14919

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

GROSSMONT SPRING VALLEY

FAMILY HLTH CTRS INC

Website: www.fhcsd.org

GROSSMONT SPRING VALLEY

FAMILY HLTH CTRS INC

Provider ID: 206361

8788 JAMACHA RD
SPRING VALLE, CA
91977-4035

Phone: 619-515-2555

After Hours Phone:
619-515-2555

License Number: A114181

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

GROSSMONT SPRING VALLEY

FAMILY HLTH CTRS INC

Website: www.fhcsd.org

GROSSMONT SPRING VALLEY

FAMILY HLTH CTRS INC

Provider ID: 206361

8788 JAMACHA RD
SPRING VALLE, CA
91977-4035

Phone: 619-515-2555

After Hours Phone:
619-515-2555

License Number: A116680

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

GROSSMONT SPRING VALLEY

FAMILY HLTH CTRS INC

Website: www.fhcsd.org

GROSSMONT SPRING VALLEY

FAMILY HLTH CTRS INC

Provider ID: 206361

8788 JAMACHA RD
SPRING VALLE, CA
91977-4035

Phone: 619-515-2555

After Hours Phone:
619-515-2555

License Number: A108228

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

GROSSMONT SPRING VALLEY

FAMILY HLTH CTRS INC

Website: www.fhcsd.org

GROSSMONT SPRING VALLEY

FAMILY HLTH CTRS INC

Provider ID: 206361

8788 JAMACHA RD
SPRING VALLE, CA
91977-4035

Phone: 619-515-2555

After Hours Phone:
619-515-2555

License Number: 20A15459

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

GROSSMONT SPRING VALLEY

FAMILY HLTH CTRS INC

Website: www.fhcsd.org

GROSSMONT SPRING VALLEY

FAMILY HLTH CTRS INC

Provider ID: 206361

8788 JAMACHA RD
SPRING VALLE, CA
91977-4035

Phone: 619-515-2555

After Hours Phone:
619-515-2555




































License Number: A113001

NPI: 1134155377

Accepting New Patients: Yes

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

-  *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC
 *Website: www.fhcsd.org*
- GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC**
Provider ID: 206361
 8788 JAMACHA RD
SPRING VALLE, CA 91977-4035
 *Phone: 619-515-2555*
Fax: 619-462-5584
 *After Hours Phone: 619-515-2555*
NPI: 1134155377
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC
 *Website: www.fhcsd.org*
- GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC**
Provider ID: 206361
 8788 JAMACHA RD
SPRING VALLE, CA 91977-4035
 *Phone: 619-515-2555*
 *After Hours Phone:*
- 619-515-2555
License Number: PA54588
NPI: 1134155377
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC
 *Website: www.fhcsd.org*
- GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC**
Provider ID: 206361
 8788 JAMACHA RD
SPRING VALLE, CA 91977-4035
 *Phone: 619-515-2555*
 *After Hours Phone: 619-515-2555*
License Number: NP95013978
NPI: 1134155377
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC
 *Website: www.fhcsd.org*
- GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC**
Provider ID: 206361
 8788 JAMACHA RD
SPRING VALLE, CA 91977-4035
 *Phone: 619-515-2555*
 *After Hours Phone:*
- 8788 JAMACHA RD
SPRING VALLE, CA 91977-4035
 *Phone: 619-515-2555*
 *After Hours Phone: 619-515-2555*
License Number: NP10943
NPI: 1134155377
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC
 *Website: www.fhcsd.org*
- GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC**
Provider ID: 206361
 8788 JAMACHA RD
SPRING VALLE, CA 91977-4035
 *Phone: 619-515-2555*
 *After Hours Phone: 619-515-2555*
License Number: G78814
NPI: 1134155377
Accepting New Patients: Yes
 *Site English Spoken: Yes*
Cultural Competency: No
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC
 *Website: www.fhcsd.org*

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC Provider ID: 206361 8788 JAMACHA RD SPRING VALLE, CA 91977-4035 Phone: 619-515-2555 After Hours Phone: 619-515-2555 License Number: A76059 NPI: 1134155377 Accepting New Patients: Yes Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC Website: www.fhcsd.org	<i>Medical Group/IPA:</i> GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC Website: www.fhcsd.org	<i>American Sign Language (ASL):</i> N Accessibility: CONTACT PROVIDER <i>Medical Group/IPA:</i> GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC Website: www.fhcsd.org
GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC Provider ID: 206361 8788 JAMACHA RD SPRING VALLE, CA 91977-4035 Phone: 619-515-2555 After Hours Phone: 619-515-2555 License Number: A178499 NPI: 1134155377 Accepting New Patients: Yes Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC Website: www.fhcsd.org	GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC Provider ID: 206361 8788 JAMACHA RD SPRING VALLE, CA 91977-4035 Phone: 619-515-2555 After Hours Phone: 619-515-2555 License Number: A178499 NPI: 1134155377 Accepting New Patients: Yes Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC Website: www.fhcsd.org	GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC Provider ID: 206361 8788 JAMACHA RD SPRING VALLE, CA 91977-4035 Phone: 619-515-2555 After Hours Phone: 619-515-2555 License Number: A148014 NPI: 1134155377 Accepting New Patients: Yes Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC Website: www.fhcsd.org
GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC Provider ID: 206361 8788 JAMACHA RD SPRING VALLE, CA 91977-4035 Phone: 619-515-2555 After Hours Phone: 619-515-2555 License Number: A68463 NPI: 1134155377 Accepting New Patients: Yes Site English Spoken: Yes Cultural Competency: No American Sign Language (ASL): N Accessibility: CONTACT PROVIDER	GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC Provider ID: 206361 8788 JAMACHA RD SPRING VALLE, CA 91977-4035 Phone: 619-515-2555 After Hours Phone: 619-515-2555 License Number: A55932 NPI: 1134155377 Accepting New Patients: Yes Site English Spoken: Yes Cultural Competency: No	GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC Provider ID: 206361 8788 JAMACHA RD SPRING VALLE, CA 91977-4035 Phone: 619-515-2555 After Hours Phone: 619-515-2555 License Number: A149063

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA:


GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC


 Website: www.fhcsd.org

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

 8788 JAMACHA RD
SPRING VALLE, CA
91977-4035

 Phone: 619-515-2555

 After Hours Phone:
619-515-2555


License Number: A154298

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:

GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC


 Website: www.fhcsd.org


GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

 8788 JAMACHA RD
SPRING VALLE, CA

91977-4035

 Phone: 619-515-2555

 After Hours Phone:
619-515-2555

License Number: A164859

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA:


GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC

 Website: www.fhcsd.org

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

 8788 JAMACHA RD
SPRING VALLE, CA
91977-4035

 Phone: 619-515-2555

 After Hours Phone:
619-515-2555

License Number: A169342

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:


GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC


 Website: www.fhcsd.org


GROSSMONT SPRING VALLEY

FAMILY HLTH CTRS INC

Provider ID: 206361

 8788 JAMACHA RD
SPRING VALLE, CA
91977-4035

 Phone: 619-515-2555

 After Hours Phone:
619-515-2555

License Number: A163464

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:


GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC


 Website: www.fhcsd.org


SPRING VALLEY

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

 8788 JAMACHA RD
SPRING VALLEY, CA
91977-4035

 Phone: 619-515-2555

 After Hours Phone:
619-515-2555


License Number: A118095

NPI: 1134155377

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N




 Accessibility: CONTACT
PROVIDER

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal


Medical Group/IPA:
GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC
 Website: www.fhcsd.org

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC




Provider ID: 206361
 8788 JAMACHA RD
SPRING VALLEY, CA
91977-4035
 Phone: 619-515-2555
 After Hours Phone:
619-515-2555
License Number: A72005
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No


American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

Medical Group/IPA:
GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC
 Website: www.fhcsd.org




GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361
 8788 JAMACHA RD
SPRING VALLEY, CA
91977-4035
 Phone: 619-515-2555
 After Hours Phone:
619-515-2555
License Number: C174771
NPI: 1134155377
Accepting New Patients: Yes
 Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):  After Hours Phone: (760)
742-9919
License Number: 080000483
NPI: 1437335148

Medical Group/IPA:
GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC
 Website: www.fhcsd.org


GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361
 8788 JAMACHA RD
SPRING VALLEY, CA 91977
 Phone: (619) 515-2555
Fax: (619) 462-5584
 After Hours Phone: (619)
515-2555
NPI: 1508801069

Accepting New Patients: Yes
Min/Max Age: 0\150

Site English Spoken: Y
Cultural Competency: N



American Sign Language (ASL):
N





 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: Family
Health Centers of San Diego
 Website: www.fhcsd.org
Email: angelad@fhcsd.org







VALLEY CENTER

NEIGHBORHOOD HEALTHCARE

Provider ID: 519918
 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
 Phone: (760) 742-9919
Fax: (360) 462-2750

 After Hours Phone: (760)
742-9919
License Number: 080000483
NPI: 1437335148
Accepting New Patients: Yes
Min/Max Age: 0\999
 Site English Spoken: Y
Cultural Competency: N
 Hours: M-F
8:00AM-5:00PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP of
Southern Cal-PHP
 Website: N/A

NEIGHBORHOOD HEALTHCARE

Provider ID: 519918
 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
 Phone: (760) 742-9919
Fax: (360) 462-2750
 After Hours Phone: (760)
742-9919
License Number: 080000397
NPI: 1437335148
Accepting New Patients: Yes
Min/Max Age: 0\999
 Site English Spoken: Y
Cultural Competency: N
 Hours: M-F
8:00AM-5:00PM
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Medical Group/IPA: IHP of
Southern Cal-PHP
 Website: N/A

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

NEIGHBORHOOD HEALTHCARE

Provider ID: 519918

28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

Phone: (760) 742-9919

Fax: (360) 462-2750

After Hours Phone: (760)
742-9919

License Number: 080000483

NPI: 1437335148

Accepting New Patients: Yes

Min/Max Age: 0\999

Site English Spoken: Y
Cultural Competency: N

Hours: M-F
8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP of
Southern Cal-PHP

Website: N/A

NEIGHBORHOOD HEALTHCARE

Provider ID: 519918

28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

Phone: (760) 742-9919

Fax: (360) 462-2750

After Hours Phone: (760)
742-9919

License Number: 080000397

NPI: 1437335148

Accepting New Patients: Yes

Min/Max Age: 0\999

Site English Spoken: Y
Cultural Competency: N

Hours: M-F

8:00AM-5:00PM

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: IHP of
Southern Cal-PHP

Website: N/A

VISTA

VISTA COMMUNITY CLINIC GRAPEVINE

Provider ID: 400339

134 GRAPEVINE RD
VISTA, CA 92083-4004

Phone: 760-631-5000

After Hours Phone:
760-631-5000

License Number: PA20775

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: VISTA
COMMUNITY CLINIC

GRAPEVINE

Website: N/A

VISTA COMMUNITY CLINIC GRAPEVINE

Provider ID: 400339

134 GRAPEVINE RD
VISTA, CA 92083-4004

Phone: 760-631-5000

After Hours Phone:
760-631-5000

License Number: DC32054

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: VISTA
COMMUNITY CLINIC

GRAPEVINE

Website: N/A

VISTA COMMUNITY CLINIC GRAPEVINE

Provider ID: 400339

134 GRAPEVINE RD
VISTA, CA 92083-4004

Phone: 760-631-5000

After Hours Phone:
760-631-5000

License Number: NP7791

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Medical Group/IPA: VISTA
COMMUNITY CLINIC

GRAPEVINE

Website: N/A

VISTA COMMUNITY CLINIC GRAPEVINE

Provider ID: 400339

136 GRAPEVINE RD
VISTA, CA 92083-4004

Phone: 760-631-5000

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

Fax: 760-414-3892

 After Hours Phone:
760-631-5000

License Number: 80000328

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: Yes

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: VISTA
COMMUNITY CLINIC
GRAPEVINE

 Website: N/A

VISTA COMMUNITY CLINIC GRAPEVINE

Provider ID: 400339

 135 GRAPEVINE RD
VISTA, CA 92083-4004

 Phone: 760-631-5000

 After Hours Phone:
760-631-5000


License Number: A60517

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: VISTA
COMMUNITY CLINIC
GRAPEVINE


 Website: N/A

VISTA COMMUNITY CLINIC GRAPEVINE

Provider ID: 400339

 134 GRAPEVINE RD
VISTA, CA 92083-4004

 Phone: 760-631-5000

 After Hours Phone:
760-631-5000

License Number: RN410247

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: VISTA
COMMUNITY CLINIC
GRAPEVINE

 Website: N/A

VISTA COMMUNITY CLINIC GRAPEVINE

Provider ID: 400339

 134 GRAPEVINE RD
VISTA, CA 92083-4004

 Phone: 760-631-5000

Fax: 760-414-3892

 After Hours Phone:
760-631-5000

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: VISTA
COMMUNITY CLINIC
GRAPEVINE


 Website: N/A

VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR
VISTA, CA 92084-5218

 Phone: 760-414-3892

 After Hours Phone:
760-414-3892

License Number: DC31392

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish

Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: VISTA
COMMUNITY CLINIC


 Website: [www.vistacommu
nityclinic.org](http://www.vistacommu
nityclinic.org)

VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR
VISTA, CA 92084-5218

 Phone: 760-414-3892

 After Hours Phone:
760-414-3892


License Number: NP23217

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes
 Site Languages(s) Spoken:
Spanish

Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: VISTA

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal


COMMUNITY CLINIC

 Website: [www.vistacommu
nityclinic.org](http://www.vistacommu
nityclinic.org)

VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR
VISTA, CA 92084-5218

 Phone: 760-414-3892

 After Hours Phone:
760-414-3892

License Number: NP95003087

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: VISTA


COMMUNITY CLINIC

 Website: [www.vistacommu
nityclinic.org](http://www.vistacommu
nityclinic.org)

VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR
VISTA, CA 92084-5218

 Phone: 760-631-5000

 After Hours Phone:
760-631-5000

License Number: A62780

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: VISTA


COMMUNITY CLINIC

 Website: [www.vistacommu
nityclinic.org](http://www.vistacommu
nityclinic.org)

VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR
VISTA, CA 92084-5218

 Phone: 760-631-5000

 After Hours Phone:
760-631-5000

License Number: A173511

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: VISTA


COMMUNITY CLINIC


 Website: [www.vistacommu
nityclinic.org](http://www.vistacommu
nityclinic.org)

VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR
VISTA, CA 92084-5218

 Phone: 760-631-5000

 After Hours Phone:
760-631-5000

License Number: A56214

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No


American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: VISTA


COMMUNITY CLINIC


 Website: [www.vistacommu
nityclinic.org](http://www.vistacommu
nityclinic.org)

VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR
VISTA, CA 92084-5218

 Phone: 760-631-5000

 After Hours Phone:
760-631-5000

License Number: A125026

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: VISTA


COMMUNITY CLINIC


 Website: [www.vistacommu
nityclinic.org](http://www.vistacommu
nityclinic.org)

VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR
VISTA, CA 92084-5218

 Phone: 760-631-5000

 After Hours Phone:
760-631-5000

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

License Number: 20A8949

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: VISTA COMMUNITY CLINIC

 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR
VISTA, CA 92084-5218

 Phone: 760-631-5000

 After Hours Phone: 760-631-5000

License Number: 20A7241

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: VISTA COMMUNITY CLINIC


 Website: www.vistacommunityclinic.org


VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR

VISTA, CA 92084-5218

 Phone: 760-631-5000

 After Hours Phone: 760-631-5000

License Number: 20A18374

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: VISTA COMMUNITY CLINIC


 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR
VISTA, CA 92084-5218

 Phone: 760-631-5000

 After Hours Phone: 760-631-5000

License Number: 20A13745

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: VISTA COMMUNITY CLINIC

 Website: www.vistacommunityclinic.org


VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR
VISTA, CA 92084-5218

 Phone: 760-414-3892

Fax: 760-414-3892

 After Hours Phone: 760-414-3892

License Number: 20A9149

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes


Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: VISTA COMMUNITY CLINIC


 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR
VISTA, CA 92084-5218

 Phone: 760-631-5000

 After Hours Phone: 760-631-5000

License Number: PA19629

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL): N




 Accessibility: CONTACT PROVIDER

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

PROVIDER
Medical Group/IPA: VISTA
COMMUNITY CLINIC
 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338
 1000 VALE TERRACE DR
VISTA, CA 92084-5218
 Phone: 844-308-5003
 After Hours Phone:
844-308-5003
License Number: NP11448
NPI: 1598122871

Accepting New Patients: Yes

- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish

Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: VISTA
COMMUNITY CLINIC

 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338
 1000 VALE TERRACE DR
VISTA, CA 92084-5218
 Phone: 844-308-5003
 After Hours Phone:
844-308-5003

License Number: PA20775

NPI: 1598122871

Accepting New Patients: Yes

- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish

Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: VISTA
COMMUNITY CLINIC

 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338
 1000 VALE TERRACE DR
VISTA, CA 92084-5218
 Phone: 760-631-5000
 After Hours Phone:
760-631-5000

License Number: NP95016368
NPI: 1598122871

Accepting New Patients: Yes

- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish

Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: VISTA
COMMUNITY CLINIC

 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC


Provider ID: 206338
 1000 VALE TERRACE DR
VISTA, CA 92084-5218
 Phone: 760-631-5000
 After Hours Phone:
760-631-5000

License Number: NP95009284
NPI: 1598122871




Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: VISTA
COMMUNITY CLINIC

 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338
 1000 VALE TERRACE DR
VISTA, CA 92084-5218
 Phone: 760-631-5000
 After Hours Phone:
760-631-5000

License Number: NP95003571
NPI: 1598122871

Accepting New Patients: Yes

- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish



Cultural Competency: No
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: VISTA
COMMUNITY CLINIC




 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC






Provider ID: 206338
 1000 VALE TERRACE DR
VISTA, CA 92084-5218
 Phone: 760-631-5000

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal






D1. Clínicas de salud con calificación federal

 After Hours Phone: 760-631-5000
License Number: NP95009149
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC
 Website: www.vistacommunityclinic.org





VISTA COMMUNITY CLINIC

Provider ID: 206338
 1000 VALE TERRACE DR
VISTA, CA 92084-5218
 Phone: 760-631-5000
 After Hours Phone: 760-631-5000
License Number: NP10896
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC
 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC






Provider ID: 206338
 1000 VALE TERRACE DR
VISTA, CA 92084-5218
 Phone: 760-631-5000
 After Hours Phone: 760-631-5000
License Number: G79676
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC
 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC




Provider ID: 206338
 1000 VALE TERRACE DR
VISTA, CA 92084-5218
 Phone: 760-631-5000
 After Hours Phone: 760-631-5000
License Number: G51286
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC

 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338
 1000 VALE TERRACE DR
VISTA, CA 92084-5218
 Phone: 760-631-5000
 After Hours Phone: 760-631-5000
License Number: G86902
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC
 Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC

Provider ID: 206338
 1000 VALE TERRACE DR
VISTA, CA 92084-5218
 Phone: 760-631-5000
 After Hours Phone: 760-631-5000
License Number: DPM3999
NPI: 1598122871
Accepting New Patients: Yes
 Site English Spoken: Yes
 Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal


D1. Clínicas de salud con calificación federal


 *Accessibility: CONTACT PROVIDER*
Medical Group/IPA: VISTA COMMUNITY CLINIC
 *Website: www.vistacommunityclinic.org*

VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR
VISTA, CA 92084-5218

 *Phone: 760-631-5000*

 *After Hours Phone:
760-631-5000*

License Number: DC32054

NPI: 1598122871


Accepting New Patients: Yes

Site English Spoken: Yes

*Site Languages(s) Spoken:
Spanish*

Cultural Competency: No

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: VISTA COMMUNITY CLINIC

 *Website: www.vistacommunityclinic.org*

VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR
VISTA, CA 92084-5218

 *Phone: 760-631-5000*

 *After Hours Phone:
760-631-5000*

License Number: A80635

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken:

Spanish
Cultural Competency: No
*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: VISTA COMMUNITY CLINIC


 *Website: www.vistacommunityclinic.org*

VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR
VISTA, CA 92084-5218

 *Phone: 760-631-5000*

 *After Hours Phone:
760-631-5000*

License Number: C143703

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

*Site Languages(s) Spoken:
Spanish*

Cultural Competency: No

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: VISTA COMMUNITY CLINIC


 *Website: www.vistacommunityclinic.org*

VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR
VISTA, CA 92084-5218

 *Phone: 760-631-5000*

 *After Hours Phone:
760-631-5000*

License Number: C162072

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

*Site Languages(s) Spoken:
Spanish*

Cultural Competency: No

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*


Medical Group/IPA: VISTA COMMUNITY CLINIC


 *Website: www.vistacommunityclinic.org*

VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR
VISTA, CA 92084-5218

 *Phone: 760-631-5000*

 *After Hours Phone:
760-631-5000*

License Number: C171929

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

*Site Languages(s) Spoken:
Spanish*

Cultural Competency: No

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*

Medical Group/IPA: VISTA COMMUNITY CLINIC

 *Website: www.vistacommunityclinic.org*


VISTA COMMUNITY CLINIC


Provider ID: 206338

 1000 VALE TERRACE DR
VISTA, CA 92084-5218

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal

 Phone: 760-631-5000

 After Hours Phone:
760-631-5000

License Number: C52564

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Language(s) Spoken:
Spanish

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: VISTA
COMMUNITY CLINIC

 Website: www.vistacommunityclinic.org


VCC DURIAN

Provider ID: 411518

 105 DURIAN ST STE A
VISTA, CA 92083-6206

 Phone: 844-308-5003

Fax: 760-414-3892

 After Hours Phone:
844-308-5003

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: VCC
DURIAN


 Website: N/A


VCC DURIAN

Provider ID: 411518

 105 DURIAN ST STE A

VISTA, CA 92083-6206

 Phone: 844-308-5003
Fax: 760-414-3892

 After Hours Phone:
844-308-5003

License Number: 1851300123

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: VCC
DURIAN

 Website: N/A


VCC DURIAN

Provider ID: 411518

 105 DURIAN ST STE A
VISTA, CA 92083-6206

 Phone: 844-308-5003

Fax: 760-414-3892

 After Hours Phone:
844-308-5003

License Number: 80000328

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Medical Group/IPA: VCC
DURIAN


 Website: N/A

VCC DURIAN

Provider ID: 411518

 105 DURIAN ST STE A

VISTA, CA 92083

 Phone: (844) 308-5003
Fax: (760) 414-3892

 After Hours Phone: (844)
308-5003

License Number: 1851300123


NPI: 1851300123

Accepting New Patients: Yes

Min/Max Age: 0\999

Site English Spoken: Y


Cultural Competency: N

 Hours: M-F
8:30AM-5:00PM

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Medical Group/IPA: IHP of
Southern Cal-PHP

 Website: www.vistacommunityclinic.org


VCC DURIAN

Provider ID: 411518

 105 DURIAN ST STE A
VISTA, CA 92083

 Phone: (844) 308-5003

Fax: (760) 414-3892

 After Hours Phone: (844)
308-5003

License Number: 080000328


NPI: 1851300123

Accepting New Patients: Yes

Min/Max Age: 0\999

Site English Spoken: Y

Cultural Competency: N

 Hours: M-F
8:30AM-5:00PM

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

D. Lista de proveedores de la red de Blue Shield Promise Medi-Cal

D1. Clínicas de salud con calificación federal


*Medical Group/IPA: IHP of
Southern Cal-PHP*

 *Website: www.vistacommunityclinic.org*

VISTA COMMUNITY CLINIC GRAPEVINE

Provider ID: 400339

 *134 GRAPEVINE RD
VISTA, CA 92083*

 *Phone: (760) 631-5000*

Fax: (760) 414-3892

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


License Number: 080000328

NPI: 1851300123

Accepting New Patients: Yes


Min/Max Age: 0\999

 *Site English Spoken: Y
Cultural Competency: N*

 *Hours: M 8:00AM-5:00PM
TU 10:30AM-7:30PM
W-F 8:00AM-5:00PM*

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

*Medical Group/IPA: IHP of
Southern Cal-PHP*

 *Website: www.vistacommunityclinic.org*

D2. Directorio de atención primaria

ALPINE

CERTIFIED NURSE PRACTITIONER

KAHL, NICHOLAS

Provider ID: 517802

Provider Gender: Male


License Number: NP95006360


NPI: 1821306598


Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH ALPINE
FAMILY MEDICINE

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

KAHL, NICHOLAS

Provider ID: 517802

Provider Gender: Male

License Number: NP95006360


NPI: 1821306598


Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH ALPINE

FAMILY MEDICINE

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

SANDERS, JESSICA

Provider ID: 517802

Provider Gender: Female

License Number: NP23004


NPI: 1760765333


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


Cultural Competency: N
Board Certified Specialty: No

IHP of Southern Cal-PHP
SAN YSIDRO HEALTH ALPINE

FAMILY MEDICINE

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

CERTIFIED NURSE PRACTITIONER

SANDERS, JESSICA

Provider ID: 517802

Provider Gender: Female

License Number: NP23004


NPI: 1760765333


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


Cultural Competency: N
Board Certified Specialty: No


IHP of Southern Cal-PHP
SAN YSIDRO HEALTH ALPINE

FAMILY MEDICINE

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

TODD, MIKAYLA

Provider ID: 517802

Provider Gender: Female

License Number: NP95005999


NPI: 1316478092


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


Cultural Competency: N


D2. Directorio de atención primaria

Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH ALPINE
FAMILY MEDICINE

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

CERTIFIED NURSE **PRACTITIONER**


TODD, MIKAYLA

Provider ID: 517802

Provider Gender: Female

License Number: NP95005999

NPI: 1316478092

 *Provider English Spoken: Y*


 *Provider Language(s)*
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH ALPINE
FAMILY MEDICINE

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

CHIROPRACTOR


ABDULRAHIM, AHMED


Provider ID: 517802

Provider Gender: Male

License Number: DC28335

NPI: 1619040292

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Burmese, Gujarati,
Hindi, Urdu


Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH ALPINE
FAMILY MEDICINE

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

 Phone: (619) 662-4100

Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

 Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

CHIROPRACTOR

ABDULRAHIM, AHMED


Provider ID: 517802

Provider Gender: Male

License Number: DC28335

NPI: 1619040292

 *Provider English Spoken: Y*


 *Provider Language(s)*
Spoken: Burmese, Gujarati,
Hindi, Urdu


Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP


SAN YSIDRO HEALTH ALPINE
FAMILY MEDICINE

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

 Phone: (619) 662-4100

Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

 Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

CHIROPRACTOR

KELCHNER, MATTHEW

Provider ID: 517802

Provider Gender: Male

License Number: DC22733

NPI: 1174656755


 *Provider English Spoken: Y*


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH ALPINE
FAMILY MEDICINE


 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

D2. Directorio de atención primaria


 Website: www.mtnhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N




 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

CHIROPRACTOR

KELCHNER, MATTHEW


Provider ID: 517802
Provider Gender: Male
License Number: DC22733
NPI: 1174656755

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH ALPINE
FAMILY MEDICINE

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

 Website: www.mtnhealth.org



Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM



FAMILY PRACTICE

BAUTISTA, LUIS

Provider ID: 517802
Provider Gender: Male

License Number: A97270
NPI: 1295712206
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Hospital Affiliation:
COMMUNITY REGIONAL
MEDICAL CENTER-FRESNO,
ST AGNES MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH ALPINE
FAMILY MEDICINE

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



 Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE



BAUTISTA, LUIS


Provider ID: 517802
Provider Gender: Male
License Number: A97270
NPI: 1295712206
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Hospital Affiliation:
COMMUNITY REGIONAL
MEDICAL CENTER-FRESNO,

ST AGNES MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH ALPINE
FAMILY MEDICINE

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

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

 Website: www.mtnhealth.org


Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER


FAMILY PRACTICE

DUBE, BIANCA

Provider ID: 517802
Provider Gender: Female
License Number: C172036
NPI: 1740535152

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH ALPINE
FAMILY MEDICINE

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

 Phone: (619) 662-4100
Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100


 Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

D2. Directorio de atención primaria

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

DUBE, BIANCA

Provider ID: 517802

Provider Gender: Female

License Number: C172036


NPI: 1740535152


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP


SAN YSIDRO HEALTH ALPINE
FAMILY MEDICINE

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

 Phone: (619) 662-4100

Fax: (619) 205-6305


 After Hours Phone: (619)
662-4100

 Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


KAUFHOLD, ANNE


Provider ID: 517802

Provider Gender: Female

License Number: A88893

NPI: 1164508073

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA


VISTA

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH ALPINE
FAMILY MEDICINE

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE



KAUFHOLD, ANNE

Provider ID: 517802

Provider Gender: Female

License Number: A88893

NPI: 1164508073

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Arabic, Spanish
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA


VISTA


Board Certified Specialty: No
IHP of Southern Cal-PHP


SAN YSIDRO HEALTH ALPINE

FAMILY MEDICINE

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

VANHOLLEBEKE, RACHEL

Provider ID: 517802

Provider Gender: Female

License Number: A177337

NPI: 1497217756

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH ALPINE
FAMILY MEDICINE

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


 Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

D2. Directorio de atención primaria

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE


VANHOLLEBEKE, RACHEL


Provider ID: 517802

Provider Gender: Female

License Number: A177337

NPI: 1497217756

 *Provider English Spoken: Y*


 *Provider Language(s) Spoken: Spanish*


Cultural Competency: N


Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL


Board Certified Specialty: No IHP of Southern Cal-PHP

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

 *1620 ALPINE BLVD STE 110 ALPINE, CA 91901*

 *Phone: (619) 662-4100*

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

 *Website: www.mtnhealth.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

WYLIE, BLAKE

Provider ID: 517802

Provider Gender: Male

License Number: 20A11088

NPI: 1922314145


 *Provider English Spoken: Y*


Cultural Competency: N


Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS

Board Certified Specialty: No IHP of Southern Cal-PHP

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

 *1620 ALPINE BLVD STE 110 ALPINE, CA 91901*

 *Phone: (619) 662-4100*

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

 *Website: www.mtnhealth.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE


WYLIE, BLAKE

Provider ID: 517802

Provider Gender: Male

License Number: 20A11088

NPI: 1922314145

 *Provider English Spoken: Y*


Cultural Competency: N

Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS


Board Certified Specialty: No IHP of Southern Cal-PHP

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

 *1620 ALPINE BLVD STE 110 ALPINE, CA 91901*

 *Phone: (619) 662-4100*

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

 *Website: www.mtnhealth.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*

FQHC

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE,

Provider ID: 517802

NPI: 1770124315


 *Provider English Spoken: Y*

Cultural Competency: N

IHP of Southern Cal-PHP


SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

 *1620 ALPINE BLVD STE 110 ALPINE, CA 91901*

 *Phone: (619) 662-4100*

Fax: (619) 320-3347

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

 *Website: www.mtnhealth.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM

FQHC

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE,

Provider ID: 517802


D2. Directorio de atención primaria


NPI: 1770124315

 Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH ALPINE
FAMILY MEDICINE

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

 Phone: (619) 662-4100

Fax: (619) 320-3347


 After Hours Phone: (619)
662-4100

 Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS


STENSMAN, LARS


Provider ID: 517802

Provider Gender: Male

License Number: A158569

NPI: 1659638062

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Danish, French,
Norwegian, Swedish


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH ALPINE
FAMILY MEDICINE

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

STENSMAN, LARS


Provider ID: 517802

Provider Gender: Male

License Number: A158569

NPI: 1659638062

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Danish, French,
Norwegian, Swedish


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH ALPINE
FAMILY MEDICINE

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS


STENSMAN, LARS

Provider ID: 595793

Provider Gender: Male

NPI: 1659638062

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Danish, French,
Norwegian, Swedish


Cultural Competency: N

Board Certified Specialty: No

Rady Childrens Health Network

LARS M STENSMAN

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

 Phone: (619) 662-4100

Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT

BAISLEY, SHAWN

Provider ID: 517802

Provider Gender: Male

License Number: PA52347


NPI: 1376936120


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH ALPINE
FAMILY MEDICINE


 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


 Website: www.mtnhealth.org

D2. Directorio de atención primaria

g
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER


PHYSICIANS ASSISTANT

BAISLEY, SHAWN

Provider ID: 517802
Provider Gender: Male
License Number: PA52347
NPI: 1376936120
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP


SAN YSIDRO HEALTH ALPINE
FAMILY MEDICINE

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.mtnhealth.or

g
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER


PHYSICIANS ASSISTANT

SHARPE, NORMA

Provider ID: 517802
Provider Gender: Female
License Number: PA20490
NPI: 1619100237
 Provider English Spoken: Y

Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH ALPINE
FAMILY MEDICINE


 1620 ALPINE BLVD STE 110
ALPINE, CA 91901
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.mtnhealth.or

g
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

SHARPE, NORMA

Provider ID: 517802
Provider Gender: Female
License Number: PA20490
NPI: 1619100237

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH ALPINE
FAMILY MEDICINE

 1620 ALPINE BLVD STE 110
ALPINE, CA 91901
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.mtnhealth.or

g
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER




CARLSBAD



CERTIFIED NURSE PRACTITIONER

YOUNG, JENNIFER

Provider ID: 480120
Provider Gender: Female
License Number: NP95003087
NPI: 1558701094

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE


 1295 CARLSBAD VILLAGE
DR STE 100
CARLSBAD, CA 92008
 Phone: (760) 736-6767
 After Hours Phone: (760)
736-6767

 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

CERTIFIED NURSE PRACTITIONER




YOUNG, JENNIFER

Provider ID: 480120
Provider Gender: Female
License Number: NP95003087
NPI: 1558701094


 Provider English Spoken: Y

D2. Directorio de atención primaria

Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 1295 CARLSBAD VILLAGE
DR STE 100
CARLSBAD, CA 92008
 Phone: (760) 736-6767
 After Hours Phone: (760)
736-6767
 Website: N/A

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N


 *Accessibility: CONTACT*
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM





CERTIFIED NURSE

PRACTITIONER


YOUNG, JENNIFER

Provider ID: 480120
Provider Gender: Female
License Number: NP95003087
NPI: 1558701094

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 1295 CARLSBAD VILLAGE
DR STE 100
CARLSBAD, CA 92008
 Phone: (760) 736-6767
 After Hours Phone: (760)
736-6767
 Website: N/A

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):


N
 *Accessibility: CONTACT*
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM




CERTIFIED NURSE


PRACTITIONER


YOUNG, JENNIFER

Provider ID: 480120
Provider Gender: Female
License Number: NP95003087
NPI: 1558701094

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE


 1295 CARLSBAD VILLAGE
DR STE 100
CARLSBAD, CA 92008
 Phone: (760) 736-6767
 After Hours Phone: (760)
736-6767



 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM


FQHC


TRUECARE,

Provider ID: 480120
NPI: 1245246917
 *Provider English Spoken: Y*
Cultural Competency: N
IHP of Southern Cal-PHP

TRUECARE
 1295 CARLSBAD VILLAGE
DR STE 100
CARLSBAD, CA 92008
 Phone: (760) 736-6767
Fax: (760) 736-8740


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



 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM


FQHC


TRUECARE,

Provider ID: 480120
NPI: 1245246917
 *Provider English Spoken: Y*
Cultural Competency: N
IHP of Southern Cal-PHP
TRUECARE

 1295 CARLSBAD VILLAGE
DR STE 100
CARLSBAD, CA 92008
 Phone: (760) 736-6767
Fax: (760) 736-8740

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

 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

D2. Directorio de atención primaria

INTERNAL MEDICINE

PONIACHIK, SAMUEL

Provider ID: 480120

Provider Gender: Male

License Number: G74757

NPI: 1467485078

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

1295 CARLSBAD VILLAGE
DR STE 100

CARLSBAD, CA 92008

Phone: (760) 736-6767

After Hours Phone: (760)
736-6767

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-2:00PM

INTERNAL MEDICINE

PONIACHIK, SAMUEL

Provider ID: 480120

Provider Gender: Male

License Number: G74757

NPI: 1467485078

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

1295 CARLSBAD VILLAGE
DR STE 100

CARLSBAD, CA 92008

Phone: (760) 736-6767

After Hours Phone: (760)
736-6767

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-2:00PM

INTERNAL MEDICINE

PONIACHIK, SAMUEL

Provider ID: 480120

Provider Gender: Male

License Number: G74757

NPI: 1467485078

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

1295 CARLSBAD VILLAGE
DR STE 100

CARLSBAD, CA 92008

Phone: (760) 736-6767

After Hours Phone: (760)
736-6767

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-2:00PM

INTERNAL MEDICINE

PONIACHIK, SAMUEL

Provider ID: 480120

Provider Gender: Male

License Number: G74757

NPI: 1467485078

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

1295 CARLSBAD VILLAGE
DR STE 100

CARLSBAD, CA 92008

Phone: (760) 736-6767

After Hours Phone: (760)
736-6767

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-2:00PM

OBSTETRICS / GYNECOLOGY

POUNTNEY, MARLENE

Provider ID: 480120


Provider Gender: Female




License Number: A93248



NPI: 1174703680

Provider English Spoken: Y

D2. Directorio de atención primaria



 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE




 1295 CARLSBAD VILLAGE
DR STE 100
CARLSBAD, CA 92008
 *Phone: (760) 736-6767*
 *After Hours Phone: (760)*
736-6767


 *Website: N/A*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM


OBSTETRICS / GYNECOLOGY

POUNTNEY, MARLENE

Provider ID: 480120
Provider Gender: Female
License Number: A93248
NPI: 1174703680
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE



 1295 CARLSBAD VILLAGE
DR STE 100
CARLSBAD, CA 92008
 *Phone: (760) 736-6767*
 *After Hours Phone: (760)*
736-6767

 *Website: N/A*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N




 *Accessibility: CONTACT*
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM


OBSTETRICS / GYNECOLOGY

POUNTNEY, MARLENE


Provider ID: 480120
Provider Gender: Female
License Number: A93248
NPI: 1174703680
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 1295 CARLSBAD VILLAGE
DR STE 100
CARLSBAD, CA 92008
 *Phone: (760) 736-6767*
 *After Hours Phone: (760)*
736-6767

 *Website: N/A*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):



N

 *Accessibility: CONTACT*
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM




OBSTETRICS / GYNECOLOGY


POUNTNEY, MARLENE


Provider ID: 480120
Provider Gender: Female
License Number: A93248
NPI: 1174703680

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

Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 1295 CARLSBAD VILLAGE
DR STE 100
CARLSBAD, CA 92008
 *Phone: (760) 736-6767*
 *After Hours Phone: (760)*
736-6767

 *Website: N/A*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM



PEDIATRICS

BURGAMY, ELIZABETH

Provider ID: 326275

D2. Directorio de atención primaria

Provider Gender: Female
NPI: 1164609558


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


Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

ENCINITAS, SHARP MEMORIAL
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No
Rady Childrens Health Network
ELIZABETH B BURGAMY

 3257 CAMINO DE LOS
COCHES STE 202
CARLSBAD, CA 92009

 Phone: (760) 633-3640
Fax: (760) 633-3644


 After Hours Phone: (760)
633-3640

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

IYENGAR, RADHA


Provider ID: 480120

Provider Gender: Female

License Number: A49273

NPI: 1265448112


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Hindi, Spanish,
Tagalog, Tamil


Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

TRUECARE

 1295 CARLSBAD VILLAGE
DR STE 100
CARLSBAD, CA 92008

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

PEDIATRICS


IYENGAR, RADHA


Provider ID: 480120

Provider Gender: Female

License Number: A49273

NPI: 1265448112


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Hindi, Spanish,
Tagalog, Tamil


Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

TRUECARE

 1295 CARLSBAD VILLAGE
DR STE 100
CARLSBAD, CA 92008

 Phone: (760) 736-6767


 After Hours Phone: (760)
736-6767

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

PEDIATRICS

IYENGAR, RADHA


Provider ID: 480120

Provider Gender: Female

License Number: A49273

NPI: 1265448112


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Hindi, Spanish,
Tagalog, Tamil


Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

TRUECARE

 1295 CARLSBAD VILLAGE
DR STE 100
CARLSBAD, CA 92008

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

PEDIATRICS

IYENGAR, RADHA

Provider ID: 480120

Provider Gender: Female

D2. Directorio de atención primaria

License Number: A49273

NPI: 1265448112

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi, Spanish,
Tagalog, Tamil

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

TRUECARE

1295 CARLSBAD VILLAGE
DR STE 100

CARLSBAD, CA 92008

Phone: (760) 736-6767

After Hours Phone: (760)
736-6767

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-2:00PM

PEDIATRICS

MUTH, NATALIE

Provider ID: 328451

Provider Gender: Female

NPI: 1497982888

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, SCRIPPS

MEMORIAL HOSPITAL

Board Certified Specialty: No

Rady Childrens Health Network Hours: M-F 8:00AM-5:00PM

NATALIE D MUTH

3257 CAMINO DE LOS
COCHES STE 202

CARLSBAD, CA 92009

Phone: (760) 633-3640

Fax: (760) 633-3644

After Hours Phone: (760)
633-3640

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

OCONNOR, ERICA

Provider ID: 651599

Provider Gender: Female

NPI: 1134782725

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

Rady Childrens Health Network

ERICA L OCONNOR

3257 CAMINO DE LOS
COCHES STE 202

CARLSBAD, CA 92009

Phone: (760) 633-3640

Fax: (760) 633-3644

After Hours Phone: (760)
633-3640

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

TANAKA, MARY

Provider ID: 465387

Provider Gender: Female

NPI: 1295962686

Provider English Spoken: Y

Provider Language(s)
Spoken: Thai

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, RADY

CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No

Rady Childrens Health Network

MARY S TANAKA

3257 CAMINO DE LOS
COCHES STE 202

CARLSBAD, CA 92009

Phone: (760) 633-3640

Fax: (760) 633-3644

After Hours Phone: (760)
633-3640

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

ZACHRY, ALISON

Provider ID: 480120


Provider Gender: Female




License Number: A131678


NPI: 1922402858

Provider English Spoken: Y


D2. Directorio de atención primaria

 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, TRI CITY MEDICAL CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 1295 CARLSBAD VILLAGE
DR STE 100
CARLSBAD, CA 92008
 *Phone: (760) 736-6767*
 *After Hours Phone: (760)*
736-6767

 *Website: N/A*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150



American Sign Language (ASL):
N


 *Accessibility: CONTACT*
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM



PEDIATRICS


ZACHRY, ALISON

Provider ID: 480120
Provider Gender: Female
License Number: A131678
NPI: 1922402858


 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, TRI CITY MEDICAL CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 1295 CARLSBAD VILLAGE
DR STE 100
CARLSBAD, CA 92008

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

 *Website: N/A*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150



American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM




PEDIATRICS


ZACHRY, ALISON

Provider ID: 480120
Provider Gender: Female
License Number: A131678
NPI: 1922402858

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


Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, TRI CITY MEDICAL CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 1295 CARLSBAD VILLAGE
DR STE 100
CARLSBAD, CA 92008
 *Phone: (760) 736-6767*
 *After Hours Phone: (760)*
736-6767

 *Website: N/A*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):



N

 *Accessibility: CONTACT*
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM




PEDIATRICS


ZACHRY, ALISON

Provider ID: 480120
Provider Gender: Female
License Number: A131678
NPI: 1922402858


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

Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, TRI CITY MEDICAL CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 1295 CARLSBAD VILLAGE
DR STE 100
CARLSBAD, CA 92008
 *Phone: (760) 736-6767*
 *After Hours Phone: (760)*
736-6767

 *Website: N/A*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

N

 *Accessibility: CONTACT*
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

PHYSICIANS ASSISTANT

CHISWICK, GARY

Provider ID: 480120

D2. Directorio de atención primaria

Provider Gender: Male
License Number: PA22667
NPI: 1174964001
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE
📍 1295 CARLSBAD VILLAGE
DR STE 100
CARLSBAD, CA 92008
☎ Phone: (760) 736-6767
Fax: (760) 720-7204
🕒 After Hours Phone: (760)
736-6767
🌐 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

PHYSICIANS ASSISTANT

CHISWICK, GARY

Provider ID: 480120
Provider Gender: Male
License Number: PA22667
NPI: 1174964001
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE
📍 1295 CARLSBAD VILLAGE

DR STE 100
CARLSBAD, CA 92008
☎ Phone: (760) 736-6767
Fax: (760) 720-7204
🕒 After Hours Phone: (760)
736-6767
🌐 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

PHYSICIANS ASSISTANT

CHISWICK, GARY

Provider ID: 480120
Provider Gender: Male
License Number: PA22667
NPI: 1174964001
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE
📍 1295 CARLSBAD VILLAGE
DR STE 100
CARLSBAD, CA 92008
☎ Phone: (760) 736-6767
Fax: (760) 720-7204
🕒 After Hours Phone: (760)
736-6767
🌐 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

PHYSICIANS ASSISTANT

CHISWICK, GARY

Provider ID: 480120
Provider Gender: Male
License Number: PA22667
NPI: 1174964001
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE


📍 1295 CARLSBAD VILLAGE
DR STE 100
CARLSBAD, CA 92008
☎ Phone: (760) 736-6767
Fax: (760) 720-7204
🕒 After Hours Phone: (760)
736-6767
🌐 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM




PHYSICIANS ASSISTANT


RUSSO, KRISTA


Provider ID: 480120
Provider Gender: Female
License Number: PA53036
NPI: 1922471192

D2. Directorio de atención primaria

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 1295 CARLSBAD VILLAGE
DR STE 100
CARLSBAD, CA 92008
 *Phone: (760) 736-6767*
 *After Hours Phone: (760)*
736-6767


 *Website: N/A*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N




 *Accessibility: CONTACT*
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM


PHYSICIANS ASSISTANT


RUSSO, KRISTA

Provider ID: 480120
Provider Gender: Female
License Number: PA53036
NPI: 1922471192

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 1295 CARLSBAD VILLAGE
DR STE 100
CARLSBAD, CA 92008
 *Phone: (760) 736-6767*
 *After Hours Phone: (760)*
736-6767


 *Website: N/A*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):




N
 *Accessibility: CONTACT*
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM


PHYSICIANS ASSISTANT


RUSSO, KRISTA

Provider ID: 480120
Provider Gender: Female
License Number: PA53036
NPI: 1922471192

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 1295 CARLSBAD VILLAGE
DR STE 100
CARLSBAD, CA 92008
 *Phone: (760) 736-6767*
 *After Hours Phone: (760)*
736-6767

 *Website: N/A*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

N
 *Accessibility: CONTACT*
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM


PHYSICIANS ASSISTANT



RUSSO, KRISTA


Provider ID: 480120
Provider Gender: Female
License Number: PA53036
NPI: 1922471192


 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 1295 CARLSBAD VILLAGE
DR STE 100
CARLSBAD, CA 92008

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

 *Website: N/A*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N



 *Accessibility: CONTACT*
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

CHULA VISTA




ALLERGY IMMUNOLOGY

REDDY, SUMANA


Provider ID: 427322
Provider Gender: Female
License Number: C52581
NPI: 1053300251

 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Cambodian, Hindi,
Spanish, Telugu
Cultural Competency: N

Hospital Affiliation:
GROSSMONT HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA

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

D2. Directorio de atención primaria

662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

ALLERGY IMMUNOLOGY


REDDY, SUMANA


Provider ID: 427322

Provider Gender: Female

License Number: C52581

NPI: 1053300251

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Cambodian, Hindi,
Spanish, Telugu

Cultural Competency: N

Hospital Affiliation:


GROSSMONT HOSPITAL


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

CHAPIN, DENISE

Provider ID: 206355

Provider Gender: Female

License Number: NP23687


NPI: 1952737033


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San
Diego

CHULA VISTA FAMILY HLTH
CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

CHAPIN, DENISE

Provider ID: 206355

Provider Gender: Female

License Number: NP23687

NPI: 1952737033


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego

CHULA VISTA FAMILY HLTH
CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500


 Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

FERNANDEZ LEYVA, JUAN

Provider ID: 206355

Provider Gender: Male

License Number: NP95001964

NPI: 1194115568

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San
Diego

CHULA VISTA FAMILY HLTH
CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org
Email:

D2. Directorio de atención primaria

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

FERNANDEZ LEYVA, JUAN

Provider ID: 206355

Provider Gender: Male

License Number: NP95001964

NPI: 1194115568

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego


CHULA VISTA FAMILY HLTH
CTR

 251 LANDIS AVE

CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

IBARRA, MARTHA

Provider ID: 427322

Provider Gender: Female

License Number: NP12112

NPI: 1114957289

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,


SCRIPPS MERCY HOSPITAL

CHULA VISTA


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

IBARRA, MARTHA

Provider ID: 427322

Provider Gender: Female

License Number: NP12112

NPI: 1114957289

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,


SCRIPPS MERCY HOSPITAL

CHULA VISTA


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

LEONARD, BEVERLY

Provider ID: 206355

Provider Gender: Female

License Number: NP10943

NPI: 1285772392

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San
Diego

CHULA VISTA FAMILY HLTH
CTR

D2. Directorio de atención primaria

 251 LANDIS AVE
CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org

Email:

MARTHAO@FHCSO.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER


LEONARD, BEVERLY

Provider ID: 206355

Provider Gender: Female

License Number: NP10943

NPI: 1285772392



 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

CHULA VISTA FAMILY HLTH
CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org

Email:

MARTHAO@FHCSO.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER


OWEN, MICHAEL

Provider ID: 206355

Provider Gender: Female

License Number: NP95001492

NPI: 1073869145

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

CHULA VISTA FAMILY HLTH
CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org

Email:

MARTHAO@FHCSO.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

OWEN, MICHAEL

Provider ID: 206355

Provider Gender: Female

License Number: NP95001492

NPI: 1073869145


 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

CHULA VISTA FAMILY HLTH
CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org

Email:

MARTHAO@FHCSO.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

QUILALANG, SUSAN

Provider ID: 427322



Provider Gender: Female

License Number: NP5579

NPI: 1841200482

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA

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


D2. Directorio de atención primaria

 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER


QUILALANG, SUSAN

Provider ID: 427322
Provider Gender: Female
License Number: RN371480
NPI: 1841200482
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA VISTA

 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE **PRACTITIONER**

QUILALANG, SUSAN


Provider ID: 427322
Provider Gender: Female
License Number: NP5579
NPI: 1841200482
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA VISTA

 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER


CERTIFIED NURSE

PRACTITIONER

QUILALANG, SUSAN

Provider ID: 427322
Provider Gender: Female
License Number: RN371480
NPI: 1841200482
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA VISTA


 678 3RD AVE
CHULA VISTA, CA 91910


 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

ROSS, CRYSTAL

Provider ID: 427322
Provider Gender: Female
License Number: NP95015413
NPI: 1548683378
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, GROSSMONT HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA VISTA

 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

D2. Directorio de atención primaria

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER

ROSS, CRYSTAL

Provider ID: 427322

Provider Gender: Female

License Number: NP95015413

NPI: 1548683378

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,

GROSSMONT HOSPITAL


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA

VISTA

 *678 3RD AVE*
CHULA VISTA, CA 91910

 *Phone: (619) 662-4100*

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

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE

PRACTITIONER

SICKLES, MAGGIE

Provider ID: 427322

Provider Gender: Female

License Number: NP22000

NPI: 1821346826

 *Provider English Spoken: Y*
Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA

VISTA

 *678 3RD AVE*
CHULA VISTA, CA 91910

 *Phone: (619) 662-4100*

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

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE

PRACTITIONER

SICKLES, MAGGIE

Provider ID: 427322

Provider Gender: Female

License Number: NP22000

NPI: 1821346826

 *Provider English Spoken: Y*
Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA

VISTA

 *678 3RD AVE*
CHULA VISTA, CA 91910

 *Phone: (619) 662-4100*

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

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

al- plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE

PRACTITIONER

VEGA, TERESA

Provider ID: 206355

Provider Gender: Female

License Number: NP95001705

NPI: 1912304569

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No


Family Health Centers of San


Diego

CHULA VISTA FAMILY HLTH

CTR

 *251 LANDIS AVE*
CHULA VISTA, CA 91910

 *Phone: (619) 515-2500*

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

 *Website: www.fhcsd.org*

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE

PRACTITIONER

D2. Directorio de atención primaria


VEGA, TERESA

Provider ID: 206355

Provider Gender: Female

License Number: NP95001705

NPI: 1912304569

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

CHULA VISTA FAMILY HLTH
CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER


WILLIAMS, TAKISHA

Provider ID: 206355

Provider Gender: Female

License Number: NP95013978

NPI: 1881727386

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego

CHULA VISTA FAMILY HLTH
CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

WILLIAMS, TAKISHA


Provider ID: 206355

Provider Gender: Female

License Number: NP95013978

NPI: 1881727386

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

CHULA VISTA FAMILY HLTH
CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED REGISTERED

NURSE MIDWIFE

BOSTON, LAURA

Provider ID: 206355

Provider Gender: Female

License Number: NM792

NPI: 1174553259

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

CHULA VISTA FAMILY HLTH
CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED REGISTERED

NURSE MIDWIFE

D2. Directorio de atención primaria

BOSTON, LAURA

Provider ID: 206355

Provider Gender: Female

License Number: NM792

NPI: 1174553259

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego

CHULA VISTA FAMILY HLTH

CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

HASHEM, SHIVA

Provider ID: 206355

Provider Gender: Female

License Number: DC26269

NPI: 1952950776

Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego

CHULA VISTA FAMILY HLTH

CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

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

CHIROPRACTOR

HASHEM, SHIVA

Provider ID: 206355

Provider Gender: Female

License Number: DC26269

NPI: 1952950776

Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego

CHULA VISTA FAMILY HLTH

CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

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

CHIROPRACTOR

KAZEM, HARON

Provider ID: 427322

Provider Gender: Male

License Number: DC33295

NPI: 1306221262

Provider English Spoken: Y

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


Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: [www.syhealth.org/
/clinics/chula- vista- medic
al- plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

CHIROPRACTOR

KAZEM, HARON



Provider ID: 427322

Provider Gender: Male

License Number: DC33295

D2. Directorio de atención primaria


NPI: 1306221262

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Farsi, Persian,
Spanish


Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

CHIROPRACTOR

PLANTE, CHARLES

Provider ID: 427322

Provider Gender: Male


License Number: DC31963

NPI: 1760464960


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA
VISTA


 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)

662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

PLANTE, CHARLES

Provider ID: 427322

Provider Gender: Male


License Number: DC31963

NPI: 1760464960


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

REYNOSO, ALFONSO

Provider ID: 427322

Provider Gender: Male


License Number: DC20760

NPI: 1285921627


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

REYNOSO, ALFONSO

Provider ID: 427322

Provider Gender: Male


License Number: DC20760

NPI: 1285921627


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE


CHULA VISTA, CA 91910

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

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

D2. Directorio de atención primaria

al- plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER


ENDOCRINOLOGY
METABOLISM DIABETES
CARRILLO, MARITZA

Provider ID: 427322
Provider Gender: Female
License Number: A163183
NPI: 1649628587
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA VISTA

 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: [www.syhealth.org/clinics/chula- vista- medic al- plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

ENDOCRINOLOGY
METABOLISM DIABETES

CARRILLO, MARITZA


Provider ID: 427322
Provider Gender: Female
License Number: A163183
NPI: 1649628587
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA VISTA

 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: [www.syhealth.org/clinics/chula- vista- medic al- plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

ENDOCRINOLOGY
METABOLISM DIABETES



CRUZ, MICHAEL

Provider ID: 427322
Provider Gender: Male
License Number: A138772

NPI: 1265851133
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA VISTA
 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: [www.syhealth.org/clinics/chula- vista- medic al- plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY
METABOLISM DIABETES

CRUZ, MICHAEL

Provider ID: 427322
Provider Gender: Male
License Number: A138772
NPI: 1265851133
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP

D2. Directorio de atención primaria


SAN YSIDRO HEALTH CHULA VISTA

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY METABOLISM DIABETES

VINCENT, LAUREN

Provider ID: 427322

Provider Gender: Female

License Number: A134303

NPI: 1053757997

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA VISTA

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY METABOLISM DIABETES

VINCENT, LAUREN

Provider ID: 427322

Provider Gender: Female

License Number: A134303

NPI: 1053757997

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA VISTA

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE



ALANIZ, MATEO

Provider ID: 427322

Provider Gender: Male

License Number: A124388

NPI: 1700175577

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Spanish
Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA VISTA

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE



ALANIZ, MATEO

Provider ID: 427322

Provider Gender: Male

License Number: A124388

NPI: 1700175577

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


Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA



Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA VISTA



 678 3RD AVE
CHULA VISTA, CA 91910


D2. Directorio de atención primaria



 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE AMANAT, SOROOSH

Provider ID: 427322
 Provider Gender: Male
 License Number: A153022
 NPI: 1003279621
 Provider English Spoken: Y
 Provider Language(s) Spoken: Farsi, Spanish
 Cultural Competency: N
 Hospital Affiliation: UCSD
 MEDICAL CTR, UCSD LA JOLLA
 JOHN SALLY THORNTON
 Board Certified Specialty: No
 IHP of Southern Cal-PHP
 SAN YSIDRO HEALTH CHULA VISTA



 678 3RD AVE
 CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:30AM-5:30PM
 SA 8:00AM-2:30PM
FAMILY PRACTICE
AMANAT, SOROOSH
 Provider ID: 427322
 Provider Gender: Male
 License Number: A153022
 NPI: 1003279621

 Provider English Spoken: Y
 Provider Language(s) Spoken: Farsi, Spanish
 Cultural Competency: N
 Hospital Affiliation: UCSD
 MEDICAL CTR, UCSD LA JOLLA
 JOHN SALLY THORNTON
 Board Certified Specialty: No
 IHP of Southern Cal-PHP
 SAN YSIDRO HEALTH CHULA VISTA



 678 3RD AVE
 CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:30AM-5:30PM
 SA 8:00AM-2:30PM

FAMILY PRACTICE ARCEGOMEZ, LAURA

Provider ID: 427322
 Provider Gender: Female
 License Number: A123604
 NPI: 1053532986
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish, Tagalog
 Cultural Competency: N
 Hospital Affiliation: CHULA VISTA COMM HOSP
 Board Certified Specialty: No
 IHP of Southern Cal-PHP
 SAN YSIDRO HEALTH CHULA VISTA

 678 3RD AVE
 CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\150
 American Sign Language (ASL):
 N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE ARCEGOMEZ, LAURA

Provider ID: 427322
 Provider Gender: Female
 License Number: A123604
 NPI: 1053532986
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish, Tagalog
 Cultural Competency: N
 Hospital Affiliation: CHULA


D2. Directorio de atención primaria


VISTA COMM HOSP


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


 Website: [www.syhealth.org/clinics/chula- vista- medic al- plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

CAMPOS, MELISSA

Provider ID: 427322

Provider Gender: Female

License Number: A138474

NPI: 1427475318

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
CHULA VISTA, CA 91910



Phone: (619) 662-4100



After Hours Phone: (619)
662-4100



Website: [www.syhealth.org/clinics/chula- vista- medic al- plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

CAMPOS, MELISSA

Provider ID: 427322

Provider Gender: Female

License Number: A138474

NPI: 1427475318

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS


MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE

CHULA VISTA, CA 91910



Phone: (619) 662-4100



After Hours Phone: (619)
662-4100



Website: [www.syhealth.org/clinics/chula- vista- medic al- plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N



Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

CHERY, FARAH

Provider ID: 206355

Provider Gender: Female

License Number: A108681

NPI: 1114183688

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: EL CENTRO

REGIONAL MEDICAL CENTER,

SHARP CHULA VISTA MED CTR

Board Certified Specialty: No

Family Health Centers of San
Diego

CHULA VISTA FAMILY HLTH
CTR

 251 LANDIS AVE

CHULA VISTA, CA 91910

Phone: (619) 515-2500

After Hours Phone: (619)
515-2500

Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N



Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

CHERY, FARAH

Provider ID: 206355

D2. Directorio de atención primaria

Provider Gender: Female

License Number: A108681

NPI: 1114183688

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: EL CENTRO

REGIONAL MEDICAL CENTER,
SHARP CHULA VISTA MED CTR

Board Certified Specialty: No
Family Health Centers of San
Diego

CHULA VISTA FAMILY HLTH
CTR

251 LANDIS AVE
CHULA VISTA, CA 91910

Phone: (619) 515-2500

After Hours Phone: (619)
515-2500

Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

CHERY, FARAH

Provider ID: 417641

Provider Gender: Female

License Number: A108681

NPI: 1114183688

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: EL CENTRO

REGIONAL MEDICAL CENTER,
SHARP CHULA VISTA MED CTR

Board Certified Specialty: No

Family Health Centers of San
Diego

FAMILY HLTH CTR SAN

DIEGO-RICE FAM HC

352 L ST
CHULA VISTA, CA 91911

Phone: (619) 515-2325

After Hours Phone: (619)
515-2325

Website: www.fhcsd.org

Email: chantalt@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

CHERY, FARAH

Provider ID: 417641

Provider Gender: Female

License Number: A108681

NPI: 1114183688

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: EL CENTRO

REGIONAL MEDICAL CENTER,
SHARP CHULA VISTA MED CTR

Board Certified Specialty: No

Family Health Centers of San
Diego

FAMILY HLTH CTR SAN

DIEGO-RICE FAM HC

352 L ST
CHULA VISTA, CA 91911

Phone: (619) 515-2325

After Hours Phone: (619)
515-2325

Website: www.fhcsd.org

Email: chantalt@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

DY, DIANE

Provider ID: 206355

Provider Gender: Female

License Number: A153344

NPI: 1467807560

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San
Diego

CHULA VISTA FAMILY HLTH
CTR

251 LANDIS AVE
CHULA VISTA, CA 91910

Phone: (619) 515-2500

After Hours Phone: (619)
515-2500

Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT

D2. Directorio de atención primaria

<p>PROVIDER</p> <p><u>FAMILY PRACTICE</u> DY, DIANE Provider ID: 206355 Provider Gender: Female License Number: A153344 NPI: 1467807560</p> <p> Provider English Spoken: Y Cultural Competency: N Board Certified Specialty: No Family Health Centers of San Diego CHULA VISTA FAMILY HLTH CTR</p> <p> 251 LANDIS AVE CHULA VISTA, CA 91910 Phone: (619) 515-2500 After Hours Phone: (619) 515-2500 Website: www.fhcsd.org Email: MARTHAO@FHCSD.ORG Medi-Cal Open Panel: Yes Min/Max Age: 0\150 American Sign Language (ASL): N Accessibility: CONTACT PROVIDER</p> <p><u>FAMILY PRACTICE</u> ELSAYED, MOHAMMED Provider ID: 19561 Provider Gender: Male NPI: 1821033424</p> <p> Provider English Spoken: Y Provider Language(s) Spoken: Arabic, German, Spanish Cultural Competency: N Hospital Affiliation: SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL, PARADISE VALLEY HOSPITAL,</p>	<p>CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL, PARADISE VALLEY HOSPITAL, SCRIPPS MERCY HOSPITAL Board Certified Specialty: No Community Care IPA LLC MOHAMMED K ELSAYED</p> <p> 330 OXFORD ST STE 106 CHULA VISTA, CA 91911 Phone: (619) 409-1802 Fax: (619) 409-1831 After Hours Phone: (619) 409-1802 Website: N/A Medi-Cal Open Panel: Yes Min/Max Age: 0\150 American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: M-TH 9:00AM-5:00PM F 8:00AM-4:00PM</p> <p><u>FAMILY PRACTICE</u> ELSAYED, MOHAMMED Provider ID: 19561 Provider Gender: Male NPI: 1821033424</p> <p> Provider English Spoken: Y Provider Language(s) Spoken: Arabic, German, Spanish Cultural Competency: N Hospital Affiliation: SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL, PARADISE VALLEY HOSPITAL,</p>	<p>SCRIPPS MERCY HOSPITAL Board Certified Specialty: No Imperial Health Holdings Medical Group-SD MOHAMMED K ELSAYED</p> <p> 330 OXFORD ST STE 106 CHULA VISTA, CA 91911 Phone: (619) 409-1802 Fax: (619) 409-1831 After Hours Phone: (619) 409-1802 Website: N/A Medi-Cal Open Panel: Yes Min/Max Age: 0\150 American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: M-TH 9:00AM-5:00PM F 8:00AM-4:00PM</p> <p><u>FAMILY PRACTICE</u> GARCIA, KARLA Provider ID: 427322 Provider Gender: Female License Number: A120672 NPI: 1154647410</p> <p> Provider English Spoken: Y Provider Language(s) Spoken: Spanish Cultural Competency: N Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL Board Certified Specialty: No IHP of Southern Cal-PHP SAN YSIDRO HEALTH CHULA VISTA 678 3RD AVE</p>
--	---	--

D2. Directorio de atención primaria

CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/chula- vista- medic al- plaza
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

GARCIA, KARLA

Provider ID: 427322
 Provider Gender: Female
 License Number: A120672
 NPI: 1154647410
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL
 Board Certified Specialty: No IHP of Southern Cal-PHP
 SAN YSIDRO HEALTH CHULA VISTA

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

Medi-Cal Open Panel: Yes
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

HUBLEY, PAUL

Provider ID: 206355
 Provider Gender: Male
 License Number: A73172
 NPI: 1568496974
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No Family Health Centers of San Diego

CHULA VISTA FAMILY HLTH CTR
 251 LANDIS AVE
 CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619) 515-2500

Website: www.fhcsd.org
 Email: MARTHAO@FHCS.D.ORG
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\150

American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

HUBLEY, PAUL

Provider ID: 206355

Provider Gender: Male
 License Number: A73172
 NPI: 1568496974
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No Family Health Centers of San Diego

CHULA VISTA FAMILY HLTH CTR

251 LANDIS AVE
 CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619) 515-2500

Website: www.fhcsd.org
 Email: MARTHAO@FHCS.D.ORG
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\150

American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

JIMENEZ, KRystal

Provider ID: 427322
 Provider Gender: Female
 License Number: A159831
 NPI: 1922531250
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA
 Board Certified Specialty: No IHP of Southern Cal-PHP
 SAN YSIDRO HEALTH CHULA

D2. Directorio de atención primaria

VISTA

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

JIMENEZ, KRystal

Provider ID: 427322

Provider Gender: Female

License Number: A159831


NPI: 1922531250


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA
VISTA

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

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): NPI: 1679137780

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE



LACH, REBECCA

Provider ID: 427322

Provider Gender: Female

License Number: A177922

NPI: 1679137780


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

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA
VISTA

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

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

LACH, REBECCA

Provider ID: 427322

Provider Gender: Female

License Number: A177922

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA
VISTA


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

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE



LAW, KAREN

Provider ID: 427322

Provider Gender: Female

License Number: A138534

NPI: 1205253150

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

Cultural Competency: N

Hospital Affiliation: CHULA
VISTA COMM HOSP

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA
VISTA

D2. Directorio de atención primaria

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


LAW, KAREN

Provider ID: 427322

Provider Gender: Female

License Number: A138534

NPI: 1205253150

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: CHULA
VISTA COMM HOSP

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA
VISTA

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

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


MCKENNETT, MARIANNE

Provider ID: 427322

Provider Gender: Female

License Number: G57243

NPI: 1376639666

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA


VISTA, SCRIPPS MERCY

HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA
VISTA

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

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

MCKENNETT, MARIANNE

Provider ID: 427322

Provider Gender: Female

License Number: G57243

NPI: 1376639666

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY


HOSPITAL


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

MENON, POOJA

Provider ID: 427322

Provider Gender: Female

License Number: A123263

NPI: 1053600064

 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA


VISTA

D2. Directorio de atención primaria

 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE



MENON, POOJA

Provider ID: 427322
Provider Gender: Female
License Number: A123263
NPI: 1053600064
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE



MERRILL, SARAH

Provider ID: 427322
Provider Gender: Female
License Number: A123492
NPI: 1225399512
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

MERRILL, SARAH



Provider ID: 427322
Provider Gender: Female
License Number: A123492
NPI: 1225399512
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

MOYA, MARY

Provider ID: 427322
Provider Gender: Female
License Number: A80185
NPI: 1093844417
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA
Board Certified Specialty: No
IHP of Southern Cal-PHP

D2. Directorio de atención primaria


SAN YSIDRO HEALTH CHULA VISTA

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


MOYA, MARY

Provider ID: 427322

Provider Gender: Female

License Number: A80185

NPI: 1093844417

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA

VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

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

al- plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

NGUYEN, CARIE

Provider ID: 427322

Provider Gender: Female

License Number: A106103

NPI: 1174781132

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA

VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

NGUYEN, LINH

Provider ID: 417641

Provider Gender: Female

License Number: A144995

NPI: 1619357993

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL


Board Certified Specialty: No


Family Health Centers of San
Diego


FAMILY HLTH CTR SAN

DIEGO-RICE FAM HC

 352 L ST
CHULA VISTA, CA 91911

 Phone: (619) 515-2325

 After Hours Phone: (619) 515-2325

 Website: www.fhcsd.org
Email: chantalt@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

NGUYEN, LINH


Provider ID: 417641

Provider Gender: Female

License Number: A144995

NPI: 1619357993

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL

Board Certified Specialty: No

Family Health Centers of San

D2. Directorio de atención primaria

Diego

FAMILY HLTH CTR SAN
DIEGO-RICE FAM HC

352 L ST

CHULA VISTA, CA 91911

Phone: (619) 515-2325

After Hours Phone: (619)
515-2325

Website: www.fhcsd.org

Email: chantalt@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

NGUYEN, CARIE

Provider ID: 427322

Provider Gender: Female

License Number: A106103

NPI: 1174781132

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA

VISTA

678 3RD AVE

CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

PALOMINO, MARY

Provider ID: 427322

Provider Gender: Female

License Number: A115699

NPI: 1770718975

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA

VISTA

678 3RD AVE

CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

PALOMINO, MARY

Provider ID: 427322

Provider Gender: Female

License Number: A115699

NPI: 1770718975

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA

VISTA

678 3RD AVE

CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

PEDROTTY, JOHN

Provider ID: 427322

Provider Gender: Male

License Number: G80234

NPI: 1992861629

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND

D2. Directorio de atención primaria

HEALTHCARE CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA VISTA

678 3RD AVE

CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

PEDROTTY, JOHN

Provider ID: 427322

Provider Gender: Male

License Number: G80234

NPI: 1992861629

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND HEALTHCARE CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA VISTA

678 3RD AVE

CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100



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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

PEREZ, PERLITA

Provider ID: 206355

Provider Gender: Female

License Number: A119689

NPI: 1174810972

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

CHULA VISTA FAMILY HLTH CTR

251 LANDIS AVE

CHULA VISTA, CA 91910

Phone: (619) 515-2500

After Hours Phone: (619) 515-2500

Website: www.fhcsd.org
Email:

MARTHAO@FHCSD.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

PEREZ, PERLITA

Provider ID: 206355

Provider Gender: Female

License Number: A119689

NPI: 1174810972

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

CHULA VISTA FAMILY HLTH CTR

251 LANDIS AVE

CHULA VISTA, CA 91910

Phone: (619) 515-2500

After Hours Phone: (619) 515-2500

Website: www.fhcsd.org
Email:

MARTHAO@FHCSD.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

PIEROS, JANELLE

Provider ID: 427322

Provider Gender: Female

License Number: 20A13225

NPI: 1386935914

Provider English Spoken: Y

Provider Language(s) Spoken: Faroese, Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA

D2. Directorio de atención primaria

VISTA

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA

VISTA

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

PIEROS, JANELLE

Provider ID: 427322

Provider Gender: Female

License Number: 20A13225

NPI: 1386935914

Provider English Spoken: Y

Provider Language(s)
Spoken: Faroese, Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA

VISTA

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

PINA, RAQUEL

Provider ID: 206355

Provider Gender: Female

License Number: A177698

NPI: 1255893368

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San Diego

CHULA VISTA FAMILY HLTH

CTR

251 LANDIS AVE
CHULA VISTA, CA 91910

Phone: (619) 515-2500

After Hours Phone: (619) 515-2500

Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

PINA, RAQUEL

Provider ID: 206355

Provider Gender: Female

License Number: A177698

NPI: 1255893368

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San Diego

CHULA VISTA FAMILY HLTH

CTR

251 LANDIS AVE
CHULA VISTA, CA 91910

Phone: (619) 515-2500

After Hours Phone: (619) 515-2500

Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

PISINGER, PATRICIA

Provider ID: 427322

Provider Gender: Female

License Number: A69264

NPI: 1861428302

Provider English Spoken: Y

Provider Language(s)
Spoken: Czech

Cultural Competency: N

D2. Directorio de atención primaria

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

PISINGER, PATRICIA

Provider ID: 427322

Provider Gender: Female

License Number: A69264

NPI: 1861428302

Provider English Spoken: Y

Provider Language(s)
Spoken: Czech

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

RAJ, ASHA

Provider ID: 417641

Provider Gender: Female

License Number: 20A15683

NPI: 1003293507

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-RICE FAM HC

352 L ST
CHULA VISTA, CA 91911
Phone: (619) 515-2500
After Hours Phone: (619)
515-2500

Website: www.fhcsd.org
Email: chantalt@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

RAJ, ASHA

Provider ID: 417641

Provider Gender: Female

License Number: 20A15683

NPI: 1003293507

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN

DIEGO-RICE FAM HC

352 L ST
CHULA VISTA, CA 91911
Phone: (619) 515-2500
After Hours Phone: (619)
515-2500

Website: www.fhcsd.org
Email: chantalt@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

ROSENBLATT, EUGENE

Provider ID: 427322

Provider Gender: Male

License Number: 20A9060

NPI: 1427123991

Provider English Spoken: Y

Cultural Competency: N

D2. Directorio de atención primaria

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

ROSENBLATT, EUGENE

Provider ID: 427322

Provider Gender: Male

License Number: 20A9060


NPI: 1427123991


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


SERPAS, SHAILA


Provider ID: 427322

Provider Gender: Female

License Number: G74728

NPI: 1124039136

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL, SHARP CHULA

VISTA MED CTR, SCRIPPS


MEMORIAL HOSPITAL


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

SERPAS, SHAILA


Provider ID: 427322

Provider Gender: Female

License Number: G74728

NPI: 1124039136

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL, SHARP CHULA

VISTA MED CTR, SCRIPPS


MEMORIAL HOSPITAL


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

SHAHTAJI, ALAN


Provider ID: 427322

Provider Gender: Male



License Number: 20A11087


NPI: 1972751089

D2. Directorio de atención primaria

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

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

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

FAMILY PRACTICE


SHAHTAJI, ALAN

Provider ID: 427322

Provider Gender: Male

License Number: 20A11087

NPI: 1972751089


 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 *Phone: (619) 662-4100*

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

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

FAMILY PRACTICE



SWARTZ, JOHN

Provider ID: 427322

Provider Gender: Male

License Number: G72486

NPI: 1396754131

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

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL, LOS ANGELES

COUNTY HARBOR UCLA


MEDICAL CENTER


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 *Phone: (619) 662-4100*

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

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

SWARTZ, JOHN

Provider ID: 427322

Provider Gender: Male

License Number: G72486

NPI: 1396754131

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL, LOS ANGELES

COUNTY HARBOR UCLA

MEDICAL CENTER


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA

VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 *Phone: (619) 662-4100*

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

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

D2. Directorio de atención primaria

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

TALAVERA, GREGORY

Provider ID: 427322

Provider Gender: Male

License Number: A40061

NPI: 1740337161

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA


VISTA

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

TALAVERA, GREGORY

Provider ID: 427322

Provider Gender: Male

License Number: A40061

NPI: 1740337161

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA


VISTA

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

TEE, ALEXANDRA

Provider ID: 427322

Provider Gender: Female

License Number: A164392

NPI: 1881198406

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL, UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA


VISTA

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

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


al- plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

TEE, ALEXANDRA

Provider ID: 427322

Provider Gender: Female

License Number: A164392

NPI: 1881198406

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL, UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA


VISTA

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

D2. Directorio de atención primaria

FAMILY PRACTICE

TOLEDO-NADER, CAROLL

Provider ID: 427322

Provider Gender: Male

License Number: A41486

NPI: 1427126648

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

TOLEDO-NADER, CAROLL

Provider ID: 427322

Provider Gender: Male

License Number: A41486

NPI: 1427126648

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

TREJO, RAUL

Provider ID: 427322

Provider Gender: Male

License Number: A77936

NPI: 1174534184

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA


Board Certified Specialty: No
IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

TREJO, RAUL

Provider ID: 427322

Provider Gender: Male

License Number: A77936

NPI: 1174534184

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):


D2. Directorio de atención primaria

<p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><u>FAMILY PRACTICE</u></p> <p>VELASQUEZ, SHARON</p> <p><i>Provider ID: 427322</i></p> <p><i>Provider Gender: Female</i></p> <p><i>License Number: A71304</i></p> <p><i>NPI: 1972732584</i></p> <p> <i>Provider English Spoken: Y</i></p> <p> <i>Provider Language(s) Spoken: Spanish</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA</i></p> <p><i>Board Certified Specialty: No IHP of Southern Cal-PHP</i></p> <p><i>SAN YSIDRO HEALTH CHULA VISTA</i></p> <p> 678 3RD AVE CHULA VISTA, CA 91910</p> <p> <i>Phone: (619) 662-4100</i></p> <p> <i>After Hours Phone: (619) 662-4100</i></p> <p> <i>Website: www.syhealth.org/clinics/chula- vista- medic al- plaza</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p> <p><i>Min/Max Age: 0\150</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><u>FAMILY PRACTICE</u></p> <p>VELASQUEZ, SHARON</p> <p><i>Provider ID: 427322</i></p> <p><i>Provider Gender: Female</i></p> <p><i>License Number: A71304</i></p>	<p><i>NPI: 1972732584</i></p> <p> <i>Provider English Spoken: Y</i></p> <p> <i>Provider Language(s) Spoken: Spanish</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA</i></p> <p><i>Board Certified Specialty: No IHP of Southern Cal-PHP</i></p> <p><i>SAN YSIDRO HEALTH CHULA VISTA</i></p> <p> 678 3RD AVE CHULA VISTA, CA 91910</p> <p> <i>Phone: (619) 662-4100</i></p> <p> <i>After Hours Phone: (619) 662-4100</i></p> <p> <i>Website: www.syhealth.org/clinics/chula- vista- medic al- plaza</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p> <p><i>Min/Max Age: 0\150</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><u>FAMILY PRACTICE</u></p> <p>WHITLEY, NICHOLAS</p> <p><i>Provider ID: 427322</i></p> <p><i>Provider Gender: Male</i></p> <p><i>License Number: A118250</i></p> <p><i>NPI: 1629394721</i></p> <p> <i>Provider English Spoken: Y</i></p> <p> <i>Provider Language(s) Spoken: Spanish</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA</i></p> <p><i>Board Certified Specialty: No IHP of Southern Cal-PHP</i></p> <p><i>SAN YSIDRO HEALTH CHULA VISTA</i></p> <p> 678 3RD AVE CHULA VISTA, CA 91910</p> <p> <i>Phone: (619) 662-4100</i></p> <p> <i>After Hours Phone: (619) 662-4100</i></p> <p> <i>Website: www.syhealth.org/clinics/chula- vista- medic</i></p>	<p><i>IHP of Southern Cal-PHP</i></p> <p><i>SAN YSIDRO HEALTH CHULA VISTA</i></p> <p> 678 3RD AVE CHULA VISTA, CA 91910</p> <p> <i>Phone: (619) 662-4100</i></p> <p> <i>After Hours Phone: (619) 662-4100</i></p> <p> <i>Website: www.syhealth.org/clinics/chula- vista- medic al- plaza</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p> <p><i>Min/Max Age: 0\150</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><u>FAMILY PRACTICE</u></p> <p>WHITLEY, NICHOLAS</p> <p><i>Provider ID: 427322</i></p> <p><i>Provider Gender: Male</i></p> <p><i>License Number: A118250</i></p> <p><i>NPI: 1629394721</i></p> <p> <i>Provider English Spoken: Y</i></p> <p> <i>Provider Language(s) Spoken: Spanish</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA</i></p> <p><i>Board Certified Specialty: No IHP of Southern Cal-PHP</i></p> <p><i>SAN YSIDRO HEALTH CHULA VISTA</i></p> <p> 678 3RD AVE CHULA VISTA, CA 91910</p> <p> <i>Phone: (619) 662-4100</i></p> <p> <i>After Hours Phone: (619) 662-4100</i></p> <p> <i>Website: www.syhealth.org/clinics/chula- vista- medic</i></p>
---	--	--

D2. Directorio de atención primaria

al- plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

YOON, RYAN

Provider ID: 427322

Provider Gender: Male

License Number: A114600


NPI: 1942435144


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

YOON, RYAN

Provider ID: 427322

Provider Gender: Male

License Number: A114600


NPI: 1942435144


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FQHC

CHULA VISTA FAMILY HLTH CTR,

Provider ID: 206355


NPI: 1346480837

 Provider English Spoken: Y
Cultural Competency: N

Family Health Centers of San
Diego
CHULA VISTA FAMILY HLTH
CTR


 251 LANDIS AVE

CHULA VISTA, CA 91910

 Phone: (619) 515-2500

Fax: (619) 397-1161

 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC

CHULA VISTA FAMILY HLTH CTR,

Provider ID: 206355


NPI: 1346480837

 Provider English Spoken: Y
Cultural Competency: N

Family Health Centers of San
Diego


CHULA VISTA FAMILY HLTH
CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

Fax: (619) 397-1161

 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT

D2. Directorio de atención primaria

PROVIDER
Hours: M-F 8:00AM-5:00PM

FQHC

**FAMILY HLTH CTR SAN
DIEGO-RICE FAM HC,**

Provider ID: 417641

NPI: 1083959464

☐ Provider English Spoken: Y
Cultural Competency: N

Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-RICE FAM HC

📍 352 L ST
CHULA VISTA, CA 91911

☎ Phone: (619) 515-2325

Fax: (619) 420-0660

🕒 After Hours Phone: (619)
515-2325

🌐 Website: www.fhcsd.org

Email: chantalt@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC

**FAMILY HLTH CTR SAN
DIEGO-RICE FAM HC,**

Provider ID: 417641

NPI: 1083959464

☐ Provider English Spoken: Y
Cultural Competency: N

Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-RICE FAM HC

📍 352 L ST
CHULA VISTA, CA 91911

☎ Phone: (619) 515-2325

Fax: (619) 420-0660

🕒 After Hours Phone: (619)
515-2325

🌐 Website: www.fhcsd.org

Email: chantalt@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC

**SAN YSIDRO HEALTH CHULA
VISTA,**

Provider ID: 427322

NPI: 1326486861

☐ Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA
VISTA

📍 678 3RD AVE
CHULA VISTA, CA 91910

☎ Phone: (619) 662-4100

Fax: (619) 425-6941

🕒 After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-4:00PM

FQHC

**SAN YSIDRO HEALTH CHULA
VISTA,**

Provider ID: 427322

NPI: 1326486861

☐ Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA
VISTA

📍 678 3RD AVE
CHULA VISTA, CA 91910

☎ Phone: (619) 662-4100

Fax: (619) 425-6941

🕒 After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:00PM

FQHC

**SAN YSIDRO HEALTH SOUTH
BAY PEDIATRICS,**

Provider ID: 664445

NPI: 1184135873

☐ Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SOUTH
BAY PEDIATRICS

📍 280 E ST

D2. Directorio de atención primaria

CHULA VISTA, CA 91910
☎ Phone: (619) 662-4100
Fax: (619) 426-2170
🕒 After Hours Phone: (619) 662-4100
🌐 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FQHC

SAN YSIDRO HEALTH SOUTH BAY PEDIATRICS,

Provider ID: 664445
NPI: 1184135873
☑ Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SOUTH BAY PEDIATRICS

📍 280 E ST
CHULA VISTA, CA 91910
☎ Phone: (619) 662-4100
Fax: (619) 426-2170
🕒 After Hours Phone: (619) 662-4100
🌐 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

GENERAL DENTISTRY

PHAM, QUYNH

Provider ID: 427322
Provider Gender: Female
License Number: DDS102880
NPI: 1366917353
☑ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA VISTA

📍 678 3RD AVE
CHULA VISTA, CA 91910
☎ Phone: (619) 662-4100
🕒 After Hours Phone: (619) 662-4100
🌐 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

GENERAL DENTISTRY

PHAM, QUYNH

Provider ID: 427322
Provider Gender: Female
License Number: DDS102880
NPI: 1366917353
☑ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA VISTA

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

🕒 After Hours Phone: (619) 662-4100
🌐 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

GENERAL PRACTICE

SAMI, REMAN

Provider ID: 427322
Provider Gender: Female
License Number: 20A19457
NPI: 1295362242
☑ Provider English Spoken: Y
☑ Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA VISTA

📍 678 3RD AVE
CHULA VISTA, CA 91910
☎ Phone: (619) 662-4100
🕒 After Hours Phone: (619) 662-4100
🌐 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER

D2. Directorio de atención primaria

GENERAL PRACTICE


SAMI, REMAN

Provider ID: 427322

Provider Gender: Female

License Number: 20A19457

NPI: 1295362242

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

HEMATOLOGY / ONCOLOGY

QUIROZ, ELISA


Provider ID: 427322

Provider Gender: Female

License Number: A162816

NPI: 1932558301

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Portuguese,
Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

GREEN HOSPITAL, SCRIPPS

MERCY HOSPITAL, SCRIPPS


MERCY HOSPITAL CHULA

VISTA


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

HEMATOLOGY / ONCOLOGY


QUIROZ, ELISA


Provider ID: 427322

Provider Gender: Female

License Number: A162816

NPI: 1932558301

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Portuguese,
Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

GREEN HOSPITAL, SCRIPPS

MERCY HOSPITAL, SCRIPPS


MERCY HOSPITAL CHULA

VISTA


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE

CHEN, TSUH-YIN


Provider ID: 427322

Provider Gender: Female

License Number: C55563

NPI: 1093803520

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Portuguese,
Spanish

Cultural Competency: N


Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE


CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


 Website: www.syhealth.org

D2. Directorio de atención primaria

/clinics/chula- vista- medic
al- plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

CHEN, TSUH-YIN

Provider ID: 427322
Provider Gender: Female
License Number: C55563
NPI: 1093803520
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Portuguese,
Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA
 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: [www.syhealth.org
/clinics/chula- vista- medic
al- plaza](http://www.syhealth.org/clinics/chula- vista- medic
al- plaza)
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE



HAMMETT, ERIN

Provider ID: 427322
Provider Gender: Female
License Number: 20A14025
NPI: 1467884098
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
CORONADO HOSP AND
HEALTHCARE CTR, SANTA
BARBARA COTTAGE HOSP,
GOLETA VALLEY COTTAGE
HOSP
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA
 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: [www.syhealth.org
/clinics/chula- vista- medic
al- plaza](http://www.syhealth.org/clinics/chula- vista- medic
al- plaza)
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
INTERNAL MEDICINE
HAMMETT, ERIN
Provider ID: 427322
Provider Gender: Female
License Number: 20A14025

NPI: 1467884098
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
CORONADO HOSP AND
HEALTHCARE CTR, SANTA
BARBARA COTTAGE HOSP,
GOLETA VALLEY COTTAGE
HOSP
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA
 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: [www.syhealth.org
/clinics/chula- vista- medic
al- plaza](http://www.syhealth.org/clinics/chula- vista- medic
al- plaza)
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE


KAKAIYA, ROSHNI

Provider ID: 427322
Provider Gender: Female
License Number: 20A19485
NPI: 1073179529
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N

D2. Directorio de atención primaria



Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA

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


Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE


KAKAIYA, ROSHNI

Provider ID: 427322
Provider Gender: Female
License Number: 20A19485
NPI: 1073179529
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE


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

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM


INTERNAL MEDICINE

KIM, JIUN

Provider ID: 427322
Provider Gender: Female
License Number: C182935
NPI: 1598020752

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA


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

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER


INTERNAL MEDICINE

KIM, JIUN

Provider ID: 427322
Provider Gender: Female
License Number: C182935
NPI: 1598020752

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA



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

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

UWEDJOJEVWE, LETICIA

Provider ID: 380242
Provider Gender: Female
NPI: 1891882221

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA
Board Certified Specialty: No

D2. Directorio de atención primaria

Imperial Health Holdings
Medical Group-SD

LETICIA M UWEDJOJEVWE

340 4TH AVE STE 10
CHULA VISTA, CA 91910

Phone: (619) 934-2215

Fax: (619) 500-5955

After Hours Phone: (619)
934-2215

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-5:00PM

F 8:00AM-4:00PM

INTERNAL MEDICINE

**VELAZQUEZ CAMARENA,
MARIA**

Provider ID: 427322

Provider Gender: Female

License Number: A56153

NPI: 1518965714

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA
VISTA

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)

662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

**VELAZQUEZ CAMARENA,
MARIA**

Provider ID: 427322

Provider Gender: Female

License Number: A56153

NPI: 1518965714

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA
VISTA

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

INTERNAL MEDICINE

WEN, AKI YEN CHANG

Provider ID: 427322

Provider Gender: Male

License Number: 20A12555

NPI: 1205126505

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA
VISTA

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE

WEN, AKI YEN CHANG

Provider ID: 427322

Provider Gender: Male

License Number: 20A12555

NPI: 1205126505

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA

D2. Directorio de atención primaria

VISTA

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY


ALIMONOS, LYSISTRATI

Provider ID: 206355

Provider Gender: Female

License Number: 20A14919

NPI: 1619397031

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation:


GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL


Board Certified Specialty: No
Family Health Centers of San
Diego

CHULA VISTA FAMILY HLTH
CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

OBSTETRICS / GYNECOLOGY


ALIMONOS, LYSISTRATI

Provider ID: 206355

Provider Gender: Female

License Number: 20A14919

NPI: 1619397031

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation:


GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL


Board Certified Specialty: No
Family Health Centers of San
Diego

CHULA VISTA FAMILY HLTH
CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500


 Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

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

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

Provider ID: 206355

Provider Gender: Female

License Number: A68463

NPI: 1376663831

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SHARP MARY

BIRCH HOSP FOR WOMEN


AND NEWBORNS


Board Certified Specialty: No


Family Health Centers of San
Diego

CHULA VISTA FAMILY HLTH
CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

D2. Directorio de atención primaria

Provider ID: 206355

Provider Gender: Female

License Number: A68463

NPI: 1376663831

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SHARP MARY

BIRCH HOSP FOR WOMEN

AND NEWBORNS


Board Certified Specialty: No


Family Health Centers of San
Diego


CHULA VISTA FAMILY HLTH
CTR

 251 LANDIS AVE

CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org

Email:


MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

Provider ID: 206355

Provider Gender: Male

License Number: A113001

NPI: 1225231582

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,

GROSSMONT HOSPITAL, TRI

CITY MEDICAL CTR


Board Certified Specialty: No


Family Health Centers of San
Diego

CHULA VISTA FAMILY HLTH
CTR

 251 LANDIS AVE

CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

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

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

Provider ID: 206355

Provider Gender: Male

License Number: A113001

NPI: 1225231582

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,


GROSSMONT HOSPITAL, TRI
CITY MEDICAL CTR


Board Certified Specialty: No
Family Health Centers of San
Diego

CHULA VISTA FAMILY HLTH
CTR

 251 LANDIS AVE

CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

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

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA

Provider ID: 206355

Provider Gender: Female

License Number: A163464

NPI: 1326531401

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No

Family Health Centers of San
Diego

CHULA VISTA FAMILY HLTH
CTR

D2. Directorio de atención primaria

 251 LANDIS AVE
CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619)
515-2500
 Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY


CHAKRABARTI, PRIYA

Provider ID: 206355

Provider Gender: Female

License Number: A163464

NPI: 1326531401

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp


Grossmont Hospital


Board Certified Specialty: No

Family Health Centers of San
Diego

CHULA VISTA FAMILY HLTH
CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY


DE MIK, TRAVIS

Provider ID: 206355

Provider Gender: Male

License Number: A108228

NPI: 1629277322


 Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San
Diego

CHULA VISTA FAMILY HLTH
CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY


DE MIK, TRAVIS

Provider ID: 206355

Provider Gender: Male

License Number: A108228

NPI: 1629277322


 Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

CHULA VISTA FAMILY HLTH
CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org

Email:


MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY

Provider ID: 206355

Provider Gender: Female

License Number: A178499

NPI: 1033613732

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, Sharp


Grossmont Hospital


Board Certified Specialty: No
Family Health Centers of San
Diego


CHULA VISTA FAMILY HLTH
CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910

D2. Directorio de atención primaria

 Phone: (619) 515-2500

 After Hours Phone: (619) 515-2500

 Website: www.fhcsd.org

Email:


MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY


DORUELO, ASHLEY

Provider ID: 206355

Provider Gender: Female

License Number: A178499

NPI: 1033613732

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp


Grossmont Hospital


Board Certified Specialty: No


Family Health Centers of San Diego

CHULA VISTA FAMILY HLTH CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619) 515-2500

 Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY


HANLEY, LAUREN


Provider ID: 206355

Provider Gender: Female

License Number: C174771

NPI: 1053392035

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp


Grossmont Hospital


Board Certified Specialty: No

Family Health Centers of San Diego

CHULA VISTA FAMILY HLTH CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619) 515-2500

 Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN

Provider ID: 206355

License Number: C174771

NPI: 1053392035

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp


Grossmont Hospital


Board Certified Specialty: No

Family Health Centers of San Diego

CHULA VISTA FAMILY HLTH CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619) 515-2500

 Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA


Provider ID: 206355

Provider Gender: Female

License Number: A72005

NPI: 1649208711

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

D2. Directorio de atención primaria

CORONADO HOSP AND
HEALTHCARE CTR, SCRIPPS
MERCY HOSPITAL,
GROSSMONT HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego
CHULA VISTA FAMILY HLTH
CTR

251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619)
515-2500
Website: www.fhcsd.org

Email:
MARTHAO@FHCS.D.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA

Provider ID: 206355
Provider Gender: Female
License Number: A72005
NPI: 1649208711
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
CORONADO HOSP AND
HEALTHCARE CTR, SCRIPPS
MERCY HOSPITAL,
GROSSMONT HOSPITAL
Board Certified Specialty: No

Family Health Centers of San
Diego
CHULA VISTA FAMILY HLTH
CTR

251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619)
515-2500
Website: www.fhcsd.org

Email:
MARTHAO@FHCS.D.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON

Provider ID: 206355
Provider Gender: Female
License Number: A116680
NPI: 1700073962
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
Family Health Centers of San
Diego
CHULA VISTA FAMILY HLTH
CTR
251 LANDIS AVE

CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619)
515-2500
Website: www.fhcsd.org
Email:
MARTHAO@FHCS.D.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON

Provider ID: 206355
Provider Gender: Female
License Number: A116680
NPI: 1700073962
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
Family Health Centers of San
Diego
CHULA VISTA FAMILY HLTH
CTR
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619)
515-2500
Website: www.fhcsd.org

D2. Directorio de atención primaria

Email:

MARTHAO@FHCSO.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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



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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

[/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA

Provider ID: 206355

Provider Gender: Female

License Number: A164859

NPI: 1952751711

Provider English Spoken: Y

Provider Language(s) Spoken: Hindi


Cultural Competency: N


Hospital Affiliation: SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No
Family Health Centers of San Diego

CHULA VISTA FAMILY HLTH CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619) 515-2500

 Website: www.fhcsd.org

Email:


MARTHAO@FHCSO.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

MENDEZ, DIEGO

Provider ID: 427322

Provider Gender: Male

License Number: A47906

NPI: 1437181922

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, BAKERSFIELD

MEMORIAL HOSP, SHARP

MEMORIAL HOSPITAL,

Adventist Health Bakersfield,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL, KERN MEDICAL

CENTER, KERN MEDICAL


CENTER

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA

VISTA

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

OBSTETRICS / GYNECOLOGY

MENDEZ, DIEGO

Provider ID: 427322

Provider Gender: Male

License Number: A47906

NPI: 1437181922

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, BAKERSFIELD

MEMORIAL HOSP, SHARP

MEMORIAL HOSPITAL,

Adventist Health Bakersfield,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL, KERN MEDICAL

CENTER, KERN MEDICAL


CENTER

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA

VISTA

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org

D2. Directorio de atención primaria

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA

Provider ID: 206355

Provider Gender: Female

License Number: A164859

NPI: 1952751711

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL

Board Certified Specialty: No
Family Health Centers of San
Diego

CHULA VISTA FAMILY HLTH
CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

SEFA-BOAKYE, KOFI

Provider ID: 427322

Provider Gender: Male

License Number: G59670

NPI: 1902993660

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SHARP


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


CHULA VISTA

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: [www.syhealth.org
/clinics/chula- vista- medic
al- plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

SEFA-BOAKYE, KOFI

Provider ID: 427322

Provider Gender: Male

License Number: G59670

NPI: 1902993660

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL


CHULA VISTA

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: [www.syhealth.org
/clinics/chula- vista- medic
al- plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

SHORT, ABIADÉ

Provider ID: 427322

Provider Gender: Male

License Number: A114893

NPI: 1750559589


Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

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

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE

D2. Directorio de atención primaria


CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/chula-vista-medic-al-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

SHORT, ABIADÉ


Provider ID: 427322
Provider Gender: Male
License Number: A114893
NPI: 1750559589
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PARADISE VALLEY HOSPITAL, SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA VISTA

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

al- plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA

Provider ID: 206355
Provider Gender: Female
License Number: 20A13958
NPI: 1932269198
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital
Board Certified Specialty: No
Family Health Centers of San Diego
CHULA VISTA FAMILY HLTH CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619) 515-2500
 Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER



OBSTETRICS / GYNECOLOGY

STABEN, REBECCA

Provider ID: 206355
Provider Gender: Female
License Number: 20A13958
NPI: 1932269198
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital
Board Certified Specialty: No
Family Health Centers of San Diego
CHULA VISTA FAMILY HLTH CTR
 251 LANDIS AVE
CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619) 515-2500
 Website: www.fhcsd.org
Email:
MARTHAO@FHCS.D.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

TRUJILLO, JENNIFER


Provider ID: 427322
Provider Gender: Female
License Number: 20A8204
NPI: 1053407593
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA

D2. Directorio de atención primaria

MED CTR





Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA



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

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

TRUJILLO, JENNIFER

Provider ID: 427322
Provider Gender: Female
License Number: 20A8204
NPI: 1053407593
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SHARP CHULA VISTA
MED CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA
 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY


ZIEG, ALAN

Provider ID: 206355
Provider Gender: Male
License Number: G78814
NPI: 1699790634
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
Family Health Centers of San
Diego
CHULA VISTA FAMILY HLTH
CTR
 251 LANDIS AVE
CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619)
515-2500
 Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY


ZIEG, ALAN

Provider ID: 206355
Provider Gender: Male
License Number: G78814
NPI: 1699790634
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
Family Health Centers of San
Diego
CHULA VISTA FAMILY HLTH
CTR
 251 LANDIS AVE
CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619)
515-2500
 Website: www.fhcsd.org
Email:
MARTHAO@FHCS.D.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

D2. Directorio de atención primaria

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

OPHTHALMOLOGY


PAPASTERGIU, GEORGIOS


Provider ID: 427322

Provider Gender: Male

License Number: A127706

NPI: 1790054393

 Provider English Spoken: Y


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


Cultural Competency: N


Hospital Affiliation: EL CENTRO
REGIONAL MEDICAL CENTER,
SCRIPPS MEMORIAL
HOSPITAL, SHARP MEMORIAL
HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

OPHTHALMOLOGY


PAPASTERGIU, GEORGIOS


Provider ID: 427322

Provider Gender: Male

License Number: A127706

NPI: 1790054393

 Provider English Spoken: Y


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


Cultural Competency: N


Hospital Affiliation: EL CENTRO
REGIONAL MEDICAL CENTER,
SCRIPPS MEMORIAL
HOSPITAL, SHARP MEMORIAL
HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

OPHTHALMOLOGY

PONS, MAURICIO

Provider ID: 427322

Provider Gender: Male

License Number: A87650

NPI: 1376723759

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, EL
CENTRO REGIONAL MEDICAL
CENTER, SHARP MEMORIAL
HOSPITAL, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OPHTHALMOLOGY

PONS, MAURICIO

Provider ID: 427322

Provider Gender: Male

License Number: A87650

NPI: 1376723759

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

D2. Directorio de atención primaria

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, EL
CENTRO REGIONAL MEDICAL
CENTER, SHARP MEMORIAL
HOSPITAL, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA

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

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

OPHTHALMOLOGY

SKAF, AYHAM

Provider ID: 427322
Provider Gender: Male
License Number: A120584
NPI: 1285888628
Provider English Spoken: Y
Provider Language(s)
Spoken: Arabic, Spanish
Cultural Competency: N
Hospital Affiliation: EL CENTRO
REGIONAL MEDICAL CENTER,
SHARP MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA

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

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

OPHTHALMOLOGY

SKAF, AYHAM

Provider ID: 427322
Provider Gender: Male
License Number: A120584
NPI: 1285888628
Provider English Spoken: Y
Provider Language(s)
Spoken: Arabic, Spanish
Cultural Competency: N
Hospital Affiliation: EL CENTRO
REGIONAL MEDICAL CENTER,
SHARP MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100


After Hours Phone: (619)
662-4100
Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

PEDIATRICS

AKASHI, MARC

Provider ID: 163322
Provider Gender: Male
NPI: 1205002417
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MERCY
HOSPITAL CHULA VISTA,
SHARP CHULA VISTA MED
CTR, SCRIPPS MERCY
HOSPITAL
Board Certified Specialty: No
Rady Childrens Health Network
MARC K AKASHI
769 MEDICAL CENTER CT
STE 300
CHULA VISTA, CA 91911
Phone: (619) 482-3090
Fax: (619) 482-7350
After Hours Phone: (619)
482-3090
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

D2. Directorio de atención primaria

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM


PEDIATRICS

ATIENZA, PAMELA

Provider ID: 106987

Provider Gender: Female

NPI: 1417916107

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Tagalog*

Cultural Competency: N


Hospital Affiliation: SHARP

CHULA VISTA MED CTR


Board Certified Specialty: No

Rady Childrens Health Network

PAMELA V ATIENZA

 *890 EASTLAKE PKWY STE
200*

CHULA VISTA, CA 91914

 *Phone: (619) 656-6817*

Fax: (619) 656-6908

 *After Hours Phone: (619)
506-1218*

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

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


PEDIATRICS

BARBADILLO, FERDINAND

Provider ID: 70456

Provider Gender: Male

NPI: 1982662193

 *Provider English Spoken: Y*

 *Provider Language(s)*

Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR


Board Certified Specialty: No

Rady Childrens Health Network

FERDINAND F BARBADILLO

 *890 EASTLAKE PKWY STE
200*

CHULA VISTA, CA 91914

 *Phone: (619) 656-6817*

Fax: (619) 656-6908

 *After Hours Phone: (619)
656-6817*

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 9:00AM-5:00PM

PEDIATRICS

BROUDY, ABRAHAM

Provider ID: 109328

Provider Gender: Male

NPI: 1528039526

 *Provider English Spoken: Y*

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, RADY CHILDRENS

HOSPITAL SAN DIEGO, SHARP

CHULA VISTA MED CTR,


SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No

Rady Childrens Health Network

ABRAHAM E BROUDY

 *2440 FENTON ST STE 100
CHULA VISTA, CA 91914*

 *Phone: (619) 656-3040*
Fax: (619) 656-3045

 *After Hours Phone: (619)
656-3040*

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM

PEDIATRICS


CAPETANAKIS, ELENI

Provider ID: 89610

Provider Gender: Female

NPI: 1346211554

 *Provider English Spoken: Y*

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

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, RADY

CHILDRENS HOSPITAL SAN

DIEGO, SHARP MEMORIAL

HOSPITAL, SCRIPPS MERCY


HOSPITAL, SHARP CHULA


VISTA MED CTR

Board Certified Specialty: Yes

Rady Childrens Health Network

ELENI I CAPETANAKIS

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

 *Phone: (619) 426-7910*

Fax: (619) 426-2337

 *After Hours Phone: (619)
426-7910*

 *Website: N/A*

D2. Directorio de atención primaria

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

CORDOBA, MIGUEL

Provider ID: 88187

Provider Gender: Male

NPI: 1053382176

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MARY BIRCH HOSP FOR

WOMEN AND NEWBORNS,

SHARP CHULA VISTA MED

CTR, RADY CHILDRENS

HOSPITAL SAN DIEGO,

SCRIPPS MERCY HOSPITAL


CHULA VISTA, SCRIPPS MERCY


HOSPITAL

Board Certified Specialty: No

Rady Childrens Health Network


MIGUEL A CORDOBA

 865 3RD AVE STE 101
CHULA VISTA, CA 91911

 Phone: (619) 426-7910

Fax: (619) 426-2337

 After Hours Phone: (619)
426-7910

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

DONG, TAMMY

Provider ID: 427322

Provider Gender: Female

License Number: A66903

NPI: 1386655413

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA

VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PEDIATRICS

DONG, TAMMY

Provider ID: 427322

Provider Gender: Female

License Number: A66903

NPI: 1386655413

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA

VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PEDIATRICS

DORINGO, ELAINIE

Provider ID: 267100

Provider Gender: Female

NPI: 1013005636

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: ALVARADO

HOSPITAL LLC, RADY

CHILDRENS HOSPITAL SAN

DIEGO, GROSSMONT

HOSPITAL, SCRIPPS MERCY

HOSPITAL CHULA VISTA,

SHARP CHULA VISTA MED

CTR, UCSD LA JOLLA JOHN

SALLY THORNTON, SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL

Board Certified Specialty: No

Rady Childrens Health Network

ELAINIE D DORINGO

 865 3RD AVE STE 101

D2. Directorio de atención primaria

CHULA VISTA, CA 91911

☎ Phone: (619) 426-7910

Fax: (619) 426-2337

🕒 After Hours Phone: (619) 426-7910

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

FLETCHER, EMILY

Provider ID: 232312

Provider Gender: Female

NPI: 1780935940

☐ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

MERCY HOSPITAL

BAKERSFIELD, RADY

CHILDRENS HOSPITAL SAN

DIEGO, SCRIPPS MERCY

HOSPITAL CHULA VISTA,

SCRIPPS MERCY HOSPITAL,

UCSF BENIOFF CHILDREN'S

HOSPITAL OAKLAND

Board Certified Specialty: No

Rady Childrens Health Network

EMILY E FLETCHER

📍 2440 FENTON ST STE 100

CHULA VISTA, CA 91914

☎ Phone: (619) 656-3040

Fax: (619) 656-3045

🕒 After Hours Phone: (619) 656-3040

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

FLORES, ERNEST

Provider ID: 658652

Provider Gender: Male

NPI: 1043848807

☐ Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

Rady Childrens Health Network

ERNEST A FLORES

📍 865 3RD AVE STE 101

CHULA VISTA, CA 91911

☎ Phone: (619) 426-7910

Fax: (619) 426-2337

🕒 After Hours Phone: (619) 426-7910

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-0:00PM

PEDIATRICS

FRESNO, BLANCA

Provider ID: 102434

Provider Gender: Female

NPI: 1346258787

☐ Provider English Spoken: Y

☐ Provider Language(s)

Spoken: Spanish, Tagalog
Cultural Competency: N

Hospital Affiliation: PARADISE

VALLEY HOSPITAL, SHARP

CHULA VISTA MED CTR

Board Certified Specialty: No

Rady Childrens Health Network

BLANCA I FRESNO

📍 1741 EASTLAKE PKWY STE 107

CHULA VISTA, CA 91915

☎ Phone: (619) 482-1700

Fax: (619) 475-4578

🕒 After Hours Phone: (619) 482-1700

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

GARCIA, CARLOS

Provider ID: 64734

Provider Gender: Male

NPI: 1417959370

☐ Provider English Spoken: Y

☐ Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, RADY

CHILDRENS HOSPITAL SAN

DIEGO

Board Certified Specialty: No

Rady Childrens Health Network

D2. Directorio de atención primaria

CARLOS M GARCIA

1392 E PALOMAR ST STE
501

CHULA VISTA, CA 91913

Phone: (619) 271-4059

Fax: (619) 271-7451

After Hours Phone: (619)
271-4059

Website: N/A

Email:

HERITAGEPARKPEDIATRICS@YAHOO.COM

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

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

F 8:30AM-5:00PM

PEDIATRICS

GARCIA, RAFAEL

Provider ID: 360408

Provider Gender: Male

NPI: 1053414086

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No

Rady Childrens Health Network

RAFAEL A GARCIA

752 MEDICAL CENTER CT
STE 210

CHULA VISTA, CA 91911

Phone: (619) 656-0206

Fax: (619) 656-8936

After Hours Phone: (619)
656-0206

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

GHAHREMANI, SIMIN

Provider ID: 664445

Provider Gender: Female

License Number: C51110

NPI: 1508904657

Provider English Spoken: Y

Provider Language(s)

Spoken: Faroese, Farsi

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA
VISTA, SHARP CHULA VISTA
MED CTR, SCRIPPS MERCY

HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SOUTH
BAY PEDIATRICS

280 E ST

CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

GHAHREMANI, SIMIN

Provider ID: 634787

Provider Gender: Female

NPI: 1508904657

Provider English Spoken: Y

Provider Language(s)

Spoken: Faroese, Farsi

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA
VISTA, SHARP CHULA VISTA
MED CTR, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No

Rady Childrens Health Network

SIMIN MOOSAVI

GHAHREMANI

280 E ST

CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 662-4196

After Hours Phone: (619)
662-4100

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

GHAHREMANI, SIMIN


Provider ID: 664445

Provider Gender: Female

License Number: C51110

D2. Directorio de atención primaria

NPI: 1508904657

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Faroese, Farsi

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SHARP CHULA VISTA

MED CTR, SCRIPPS MERCY

HOSPITAL

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SOUTH

BAY PEDIATRICS

 280 E ST

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

HOLLICK, NATALIE

Provider ID: 473802

Provider Gender: Female

NPI: 1558716845

 Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: Yes

Rady Childrens Health Network

NATALIE V HOLLICK

 865 3RD AVE STE 101

CHULA VISTA, CA 91911

 Phone: (619) 426-7910

Fax: (619) 426-2337

 After Hours Phone: (619)
426-7910

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

ISAIAS, AGNELA

Provider ID: 664445

Provider Gender: Female

License Number: A82912

NPI: 1790772572

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,

ALVARADO HOSPITAL LLC,

SHARP CORONADO HOSP


AND HEALTHCARE CTR

Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SOUTH

BAY PEDIATRICS

 280 E ST

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

Fax: (619) 426-2170

 After Hours Phone: (619)

662-4100

 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

ISAIAS, AGNELA


Provider ID: 664445

Provider Gender: Female

License Number: A82912

NPI: 1790772572

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,

ALVARADO HOSPITAL LLC,

SHARP CORONADO HOSP

AND HEALTHCARE CTR

Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SOUTH

BAY PEDIATRICS

 280 E ST

CHULA VISTA, CA 91910

 Phone: (619) 662-4100

Fax: (619) 426-2170

 After Hours Phone: (619)

662-4100

 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

JACOBS-KLEISLI, MILAGROS

Provider ID: 467596

Provider Gender: Female

D2. Directorio de atención primaria

NPI: 1811221641

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation:

GROSSMONT HOSPITAL,
SHARP MEMORIAL HOSPITAL,
RADY CHILDRENS HOSPITAL
SAN DIEGO, HUNTINGTON
MEMORIAL HOSPITAL, USC
Arcadia Hospital

Board Certified Specialty: No
Rady Childrens Health Network
MILAGROS J JACOBS-KLEISLI

 769 MEDICAL CENTER CT
STE 300

CHULA VISTA, CA 91911

 Phone: (619) 482-3090

Fax: (619) 482-7350

 After Hours Phone: (619)
482-3090

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-0:00PM

PEDIATRICS

KORSAND, SID


Provider ID: 664445

Provider Gender: Male

License Number: A49591

NPI: 1588634513

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Farsi, Persian,
Turkish


Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SOUTH
BAY PEDIATRICS

 280 E ST
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

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

Min/Max Age: 0\21

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS


KORSAND, SID


Provider ID: 664445

Provider Gender: Male

License Number: A49591

NPI: 1588634513


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Farsi, Persian,
Turkish


Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SOUTH
BAY PEDIATRICS

 280 E ST
CHULA VISTA, CA 91910

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

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

Min/Max Age: 0\21

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS


KORSAND, SID

Provider ID: 634788

Provider Gender: Male

NPI: 1588634513

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi, Persian,
Turkish


Cultural Competency: N

Board Certified Specialty: No

Rady Childrens Health Network

SID S KORSAND

 280 E ST
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

Fax: (619) 662-4196

 After Hours Phone: (619)
662-4100


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

MCMAHON, SHARON

Provider ID: 648721

Provider Gender: Female


NPI: 1487279246

 Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No

D2. Directorio de atención primaria

Rady Childrens Health Network  Website: N/A

SHARON L MCMAHON

 865 THIRD AVE STE 101
CHULA VISTA, CA 91911

 Phone: (619) 426-7910

Fax: (619) 426-2337

 After Hours Phone: (619)
426-7910


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

PEDIATRICS

MISTRY, CHETAN

Provider ID: 86439

Provider Gender: Male

NPI: 1467505834

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, RADY

CHILDRENS HOSPITAL SAN

DIEGO, SCRIPPS MERCY


HOSPITAL

Board Certified Specialty: No

Rady Childrens Health Network

CHETAN A MISTRY

 2440 FENTON ST STE 100
CHULA VISTA, CA 91914

 Phone: (619) 656-3040

Fax: (619) 656-3045

 After Hours Phone: (619)
656-3040

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

MOSQUERA, DIANA

Provider ID: 371232

Provider Gender: Female

NPI: 1144238098

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO


Board Certified Specialty: No

Rady Childrens Health Network

DIANA I MOSQUERA

 769 MEDICAL CENTER CT
STE 300

CHULA VISTA, CA 91911

 Phone: (619) 482-3090

Fax: (619) 482-7350

 After Hours Phone: (619)
482-3090

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

MOSQUERA, DIANA

Provider ID: 463001

Provider Gender: Female

NPI: 1144238098

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO


Board Certified Specialty: No


Rady Childrens Health Network

DIANA I MOSQUERA

 865 3RD AVE STE 101

CHULA VISTA, CA 91911

 Phone: (619) 426-7910

 After Hours Phone: (619)
426-7910


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

NGUYEN, TRUC

Provider ID: 78518

Provider Gender: Female

NPI: 1881884054

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SHARP CHULA VISTA

MED CTR, RADY CHILDRENS

D2. Directorio de atención primaria

HOSPITAL SAN DIEGO,
WASHINGTON HOSPITAL,
SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
Rady Childrens Health Network
TRUC H NGUYEN

2440 FENTON ST STE 100
CHULA VISTA, CA 91914

Phone: (619) 656-3040

Fax: (619) 656-3045

After Hours Phone: (619)
656-3040

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

OIRA, VICTORIA

Provider ID: 73140

Provider Gender: Female

NPI: 1134172448

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR

Board Certified Specialty: No

Rady Childrens Health Network

VICTORIA R OIRA

890 EASTLAKE PKWY STE
203

CHULA VISTA, CA 91914

Phone: (619) 656-3020

Fax: (619) 656-3019

After Hours Phone: (619)

370-6661

Website: N/A

Email:

VICKYODAN@HOTMAIL.COM

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-4:30PM

PEDIATRICS

PIANSAY, MARIACORAZON

Provider ID: 427322

Provider Gender: Female

License Number: A93785

NPI: 1669680351

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL

CHULA VISTA

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA

VISTA

678 3RD AVE

CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)

662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

PIANSAY, MARIACORAZON

Provider ID: 427322

Provider Gender: Female

License Number: A93785

NPI: 1669680351

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL

CHULA VISTA

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA

VISTA

678 3RD AVE

CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)

662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

ROWHANI, NAGHMEH

Provider ID: 664445

Provider Gender: Female

D2. Directorio de atención primaria

License Number: A92037

NPI: 1992876759

Provider English Spoken: Y

Provider Language(s)
Spoken: Persian

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SOUTH
BAY PEDIATRICS

280 E ST

CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

ROWHANI, NAGHMEH

Provider ID: 664445

Provider Gender: Female

License Number: A92037

NPI: 1992876759

Provider English Spoken: Y

Provider Language(s)
Spoken: Persian

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SOUTH
BAY PEDIATRICS

280 E ST

CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)

662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

SALAZAR, JUANITA

Provider ID: 206355

Provider Gender: Female

License Number: A78355

NPI: 1912938325

Provider English Spoken: Y

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

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
Family Health Centers of San
Diego

CHULA VISTA FAMILY HLTH
CTR

251 LANDIS AVE

CHULA VISTA, CA 91910

Phone: (619) 515-2500

After Hours Phone: (619)
515-2500

Website: www.fhcsd.org

Email:

MARTHAO@FHCSD.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

SALAZAR, JUANITA

Provider ID: 206355

Provider Gender: Female

License Number: A78355

NPI: 1912938325

Provider English Spoken: Y

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

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
Family Health Centers of San
Diego

CHULA VISTA FAMILY HLTH
CTR

251 LANDIS AVE

CHULA VISTA, CA 91910

Phone: (619) 515-2500

After Hours Phone: (619)
515-2500

Website: www.fhcsd.org

Email:

MARTHAO@FHCSD.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

SANTIAGO, ROXANE

D2. Directorio de atención primaria

Provider ID: 269279

Provider Gender: Female

NPI: 1033461801

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, SHARP CHULA VISTA

MED CTR, SCRIPPS MERCY
HOSPITAL CHULA VISTA,
SCRIPPS MEMORIAL

HOSPITAL, UCSF BENIOFF

CHILDREN'S HOSPITAL

OAKLAND, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No

Rady Childrens Health Network

ROXANE M SANTIAGO

865 3RD AVE STE 101
CHULA VISTA, CA 91911

Phone: (619) 426-7910

Fax: (619) 426-2337

After Hours Phone: (619)
426-7910

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

SHETH, HASMUKH

Provider ID: 427322

Provider Gender: Male

License Number: A45942

NPI: 1396812236

Provider English Spoken: Y

Provider Language(s)
Spoken: Gujarati, Hindi,
Urdu

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA

VISTA

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

SHETH, HASMUKH

Provider ID: 427322

Provider Gender: Male

License Number: A45942

NPI: 1396812236

Provider English Spoken: Y

Provider Language(s)
Spoken: Gujarati, Hindi,
Urdu

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA

VISTA

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

VALENCIA, MARILES

Provider ID: 104059

Provider Gender: Female

NPI: 1275541625

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, PARADISE VALLEY

HOSPITAL, SHARP CHULA

VISTA MED CTR, RADY

CHILDRENS HOSPITAL SAN

DIEGO, SCRIPPS MERCY

HOSPITAL

Board Certified Specialty: No

Rady Childrens Health Network

MARILES F VALENCIA

1741 EASTLAKE PKWY STE
107

D2. Directorio de atención primaria

CHULA VISTA, CA 91915

Phone: (619) 482-1700

Fax: (619) 475-4578

After Hours Phone: (619)
482-1700

Website: N/A

Email:

PEDIATRICSINPARADISE@YAHOO.COM

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

YAO, CATHERINE

Provider ID: 371204

Provider Gender: Female

NPI: 1801166442

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No
Rady Childrens Health Network
CATHERINE S YAO

769 MEDICAL CENTER CT
STE 300

CHULA VISTA, CA 91911

Phone: (619) 482-3090

Fax: (619) 482-7350

After Hours Phone: (619)
482-3090

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

ZARGAR, SHABNAM

Provider ID: 371075

Provider Gender: Female

NPI: 1417256074

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:
UNIVERSITY OF CALIFORNIA
IRVINE MED CTR, DESERT
REGIONAL MED CTR, JOHN F
KENNEDY MEMORIAL HOSP,
RADY CHILDRENS HOSPITAL
SAN DIEGO

Board Certified Specialty: No
Rady Childrens Health Network
SHABNAM ZARGAR

769 MEDICAL CENTER CT
STE 300

CHULA VISTA, CA 91911

Phone: (619) 482-3090

Fax: (619) 482-7350

After Hours Phone: (619)
482-3090

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT

BALDONADO, ANALICIA

Provider ID: 417641

Provider Gender: Female

License Number: PA61683

NPI: 1215477765

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-RICE FAM HC

352 L ST

CHULA VISTA, CA 91911

Phone: (619) 515-2325

After Hours Phone: (619)
515-2325

Website: www.fhcsd.org

Email: chantalt@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT

BALDONADO, ANALICIA

Provider ID: 417641

Provider Gender: Female

License Number: PA61683

NPI: 1215477765

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-RICE FAM HC

D2. Directorio de atención primaria

 352 L ST
CHULA VISTA, CA 91911
 Phone: (619) 515-2325
 After Hours Phone: (619)
515-2325


 Website: www.fhcsd.org
Email: chantalt@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT


INDA, PRISCILLA


Provider ID: 427322

Provider Gender: Female

License Number: PA54404

NPI: 1679008379

 Provider English Spoken: Y

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

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA

VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: [www.syhealth.org/clinics/chula- vista- medic
al- plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT


INDA, PRISCILLA


Provider ID: 427322

Provider Gender: Female

License Number: PA54404

NPI: 1679008379

 Provider English Spoken: Y

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

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA

VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: [www.syhealth.org/clinics/chula- vista- medic
al- plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT

MENDEZ, JESUS

Provider ID: 427322

Provider Gender: Male

License Number: PA13796

NPI: 1023202108

 Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA

VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: [www.syhealth.org/clinics/chula- vista- medic
al- plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

MENDEZ, JESUS

Provider ID: 427322

Provider Gender: Male

License Number: PA13796

NPI: 1023202108

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA

VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

D2. Directorio de atención primaria

 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

QUICK, ELISABETH

Provider ID: 206355
Provider Gender: Female
License Number: PA21591
NPI: 1790055010
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
CHULA VISTA FAMILY HLTH CTR
 251 LANDIS AVE
CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619) 515-2500
 Website: www.fhcsd.org
Email: MARTHAO@FHCS.D.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER



PHYSICIANS ASSISTANT

QUICK, ELISABETH

Provider ID: 206355
Provider Gender: Female
License Number: PA21591
NPI: 1790055010
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
CHULA VISTA FAMILY HLTH CTR
 251 LANDIS AVE
CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619) 515-2500
 Website: www.fhcsd.org
Email: MARTHAO@FHCS.D.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

REVELES, DIANA

Provider ID: 417641
Provider Gender: Female
License Number: PA19306
NPI: 1548455405
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO-RICE FAM HC

 352 L ST
CHULA VISTA, CA 91911
 Phone: (619) 515-2325
 After Hours Phone: (619) 515-2325
 Website: www.fhcsd.org
Email: chantalt@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT


REVELES, DIANA

Provider ID: 417641
Provider Gender: Female
License Number: PA19306
NPI: 1548455405
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SAN DIEGO-RICE FAM HC
 352 L ST
CHULA VISTA, CA 91911
 Phone: (619) 515-2325
 After Hours Phone: (619) 515-2325
 Website: www.fhcsd.org
Email: chantalt@fhcsd.org
Medi-Cal Open Panel: Yes

D2. Directorio de atención primaria

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PODIATRIST


MANCHEL, BRUCE

Provider ID: 427322

Provider Gender: Male

License Number: DPM2930

NPI: 1790890788

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP


CORONADO HOSP AND


HEALTHCARE CTR


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PODIATRIST


MANCHEL, BRUCE

Provider ID: 427322

Provider Gender: Male

License Number: DPM2930

NPI: 1790890788

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP


CORONADO HOSP AND


HEALTHCARE CTR


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PODIATRIST


SCHNEIDER, SARAH

Provider ID: 206355

Provider Gender: Female

License Number: DPM4819

NPI: 1326282237

 Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San

Diego

CHULA VISTA FAMILY HLTH

CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PODIATRIST

SCHNEIDER, SARAH

Provider ID: 206355

Provider Gender: Female

License Number: DPM4819

NPI: 1326282237


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San

Diego

CHULA VISTA FAMILY HLTH
CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

D2. Directorio de atención primaria

 *Accessibility: CONTACT PROVIDER*

REGISTERED NURSE LICENSED

VOCATIONAL NURSE

QUILALANG, SUSAN

Provider ID: 427322

Provider Gender: Female


License Number: NP5579

NPI: 1841200482


Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA VISTA

 678 3RD AVE

CHULA VISTA, CA 91910

 *Phone: (619) 662-4100*


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

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

REGISTERED NURSE LICENSED

VOCATIONAL NURSE

QUILALANG, SUSAN

Provider ID: 427322

Provider Gender: Female


License Number: RN371480

NPI: 1841200482


Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA VISTA

 678 3RD AVE

CHULA VISTA, CA 91910

 *Phone: (619) 662-4100*

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

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

REGISTERED NURSE LICENSED

VOCATIONAL NURSE

QUILALANG, SUSAN

Provider ID: 427322

Provider Gender: Female


License Number: NP5579

NPI: 1841200482


Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA VISTA

 678 3RD AVE

CHULA VISTA, CA 91910

 *Phone: (619) 662-4100*

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

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

REGISTERED NURSE LICENSED

VOCATIONAL NURSE

QUILALANG, SUSAN

Provider ID: 427322

Provider Gender: Female


License Number: RN371480

NPI: 1841200482


Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHULA VISTA

 678 3RD AVE

CHULA VISTA, CA 91910

 *Phone: (619) 662-4100*


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

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

REGISTERED PHYSICAL

THERAPIST

AMAYA, RICARDO

Provider ID: 206355

Provider Gender: Male

License Number: PT37189

NPI: 1437445566


Provider English Spoken: Y
Cultural Competency: N


D2. Directorio de atención primaria


Board Certified Specialty: No
Family Health Centers of San Diego

CHULA VISTA FAMILY HLTH
CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

REGISTERED PHYSICAL THERAPIST

AMAYA, RICARDO

Provider ID: 206355

Provider Gender: Male

License Number: PT37189


NPI: 1437445566


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

CHULA VISTA FAMILY HLTH
CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

REGISTERED PHYSICAL THERAPIST


CUMMINGS, GEORGE

Provider ID: 206355

Provider Gender: Male

License Number: PT295173

NPI: 1497236384

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

CHULA VISTA FAMILY HLTH
CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

REGISTERED PHYSICAL THERAPIST

CUMMINGS, GEORGE

Provider ID: 206355

Provider Gender: Male

License Number: PT295173

NPI: 1497236384

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

CHULA VISTA FAMILY HLTH
CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500


 Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

REGISTERED PHYSICAL THERAPIST

GEORGE, JENNIFER

Provider ID: 206355

Provider Gender: Female

License Number: PT294245

NPI: 1215402177

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

D2. Directorio de atención primaria

Family Health Centers of San Diego

CHULA VISTA FAMILY HLTH CTR

251 LANDIS AVE
CHULA VISTA, CA 91910

Phone: (619) 515-2500

After Hours Phone: (619) 515-2500

Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

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

REGISTERED PHYSICAL THERAPIST

GEORGE, JENNIFER

Provider ID: 206355

Provider Gender: Female

License Number: PT294245

NPI: 1215402177

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San Diego

CHULA VISTA FAMILY HLTH CTR

251 LANDIS AVE
CHULA VISTA, CA 91910

Phone: (619) 515-2500

After Hours Phone: (619) 515-2500

Website: www.fhcsd.org

Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

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

REGISTERED PHYSICAL THERAPIST

GONZALES, MICHELLE

Provider ID: 206355

Provider Gender: Female

License Number: PT291706

NPI: 1548714652

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San Diego

CHULA VISTA FAMILY HLTH CTR

251 LANDIS AVE
CHULA VISTA, CA 91910

Phone: (619) 515-2500

After Hours Phone: (619) 515-2500

Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST

GONZALES, MICHELLE

Provider ID: 206355

Provider Gender: Female

License Number: PT291706

NPI: 1548714652

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San Diego

CHULA VISTA FAMILY HLTH CTR

251 LANDIS AVE
CHULA VISTA, CA 91910

Phone: (619) 515-2500

After Hours Phone: (619) 515-2500

Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST

MIGNEA, DAVID

Provider ID: 206355

Provider Gender: Male

License Number: PT293536

NPI: 1043736879


Provider English Spoken: Y
Cultural Competency: N


D2. Directorio de atención primaria


Board Certified Specialty: No
Family Health Centers of San Diego

CHULA VISTA FAMILY HLTH
CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500


 Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

REGISTERED PHYSICAL

THERAPIST

MIGNEA, DAVID

Provider ID: 206355

Provider Gender: Male

License Number: PT293536


NPI: 1043736879


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

CHULA VISTA FAMILY HLTH
CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

REGISTERED PHYSICAL

THERAPIST


RODRIGUEZ, CASSANDRA

Provider ID: 206355

Provider Gender: Female

License Number: PT292823

NPI: 1770025595

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

CHULA VISTA FAMILY HLTH
CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

REGISTERED PHYSICAL

THERAPIST

RODRIGUEZ, CASSANDRA

Provider ID: 206355

Provider Gender: Female

License Number: PT292823

NPI: 1770025595

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

CHULA VISTA FAMILY HLTH
CTR

 251 LANDIS AVE
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)
515-2500

 Website: www.fhcsd.org
Email:

MARTHAO@FHCS.D.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

RHEUMATOLOGY

REDDY, DANA

Provider ID: 427322

Provider Gender: Female

License Number: A115598

NPI: 1144538778

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP
CHULA VISTA MED CTR,

D2. Directorio de atención primaria

SCRIPPS MERCY HOSPITAL,
SHARP MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA

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

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

RHEUMATOLOGY


REDDY, DANA

Provider ID: 427322

Provider Gender: Female

License Number: A115598

NPI: 1144538778

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL,
SHARP MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL
ENCINITAS

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHULA
VISTA

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

SPEECH PATHOLOGIST

CABADING, DOREEN

Provider ID: 427322

Provider Gender: Female

License Number: SP18192


NPI: 1043507585

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA
VISTA

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

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SPEECH PATHOLOGIST

CABADING, DOREEN

Provider ID: 427322

Provider Gender: Female

License Number: SP18192


NPI: 1043507585


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHULA
VISTA

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

EL CAJON

ALLERGY IMMUNOLOGY

REDDY, SUMANA

Provider ID: 569910

Provider Gender: Female

D2. Directorio de atención primaria

License Number: C52581

NPI: 1053300251

Provider English Spoken: Y

Provider Language(s)
Spoken: Cambodian, Hindi,
Spanish, Telugu

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH EL
CAJON

875 EL CAJON BLVD
EL CAJON, CA 92020

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

ALLERGY IMMUNOLOGY

REDDY, SUMANA

Provider ID: 569910

Provider Gender: Female

License Number: C52581

NPI: 1053300251

Provider English Spoken: Y

Provider Language(s)
Spoken: Cambodian, Hindi,
Spanish, Telugu

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH EL
CAJON

875 EL CAJON BLVD
EL CAJON, CA 92020

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

BELEN, NEZER

Provider ID: 418340

Provider Gender: Male

License Number: NP95009292

NPI: 1386120723

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San
Diego

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

525 E MAIN ST
EL CAJON, CA 92020

Phone: (619) 515-2498

After Hours Phone: (619)
515-2498

Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

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

CERTIFIED NURSE

PRACTITIONER

BELEN, NEZER

Provider ID: 418340

Provider Gender: Male

License Number: NP95009292

NPI: 1386120723

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San

Diego

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

525 E MAIN ST
EL CAJON, CA 92020

Phone: (619) 515-2498

After Hours Phone: (619)
515-2498

Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

Accessibility: CONTACT
PROVIDER

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

CERTIFIED NURSE

PRACTITIONER

DRISCOLL, SUSAN

Provider ID: 569910

Provider Gender: Female






License Number: NP95012943

NPI: 1477755684

Provider English Spoken: Y
 Provider Language(s)

D2. Directorio de atención primaria





Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL
CAJON


 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

DRISCOLL, SUSAN


Provider ID: 569910
Provider Gender: Female
License Number: NP95012943
NPI: 1477755684
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL
CAJON
 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org
Medi-Cal Open Panel: Yes


Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM


CERTIFIED NURSE

PRACTITIONER

GARCIA, JOHNNY

Provider ID: 418340
Provider Gender: Male
License Number: NP95007000
NPI: 1932622156
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HLTH CTR SAN
DIEGO-EL CAJON
 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE

PRACTITIONER



GARCIA, JOHNNY

Provider ID: 418340
Provider Gender: Male
License Number: NP95007000
NPI: 1932622156
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-EL CAJON

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

 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

HAMID, WAHIDA

Provider ID: 569910
Provider Gender: Female
License Number: NP95001707
NPI: 1164812293

Provider English Spoken: Y
 Provider Language(s)
Spoken: Persian, Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP



D2. Directorio de atención primaria

SAN YSIDRO HEALTH EL CAJON




 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

HAMID, WAHIDA


Provider ID: 569910
Provider Gender: Female
License Number: NP95001707
NPI: 1164812293
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Persian, Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH EL CAJON


 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

HARPEL, SHERYL


Provider ID: 569910
Provider Gender: Female
License Number: NP95009329
NPI: 1780177147
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL

CAJON

 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE PRACTITIONER

HARPEL, SHERYL


Provider ID: 569910
Provider Gender: Female
License Number: NP95009329
NPI: 1780177147
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL





CAJON

 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE PRACTITIONER

JENSEN, ADRIENNE

Provider ID: 569910
Provider Gender: Female
License Number: NP95023148
NPI: 1184389934
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL CAJON

 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

D2. Directorio de atención primaria

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER

JENSEN, ADRIENNE

Provider ID: 569910

Provider Gender: Female


License Number: NP95023148


NPI: 1184389934


Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR Board Certified Specialty: No IHP of Southern Cal-PHP SAN YSIDRO HEALTH EL CAJON

 *875 EL CAJON BLVD EL CAJON, CA 92020*

 *Phone: (619) 662-4100*

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

 *Website: www.syhealth.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER

KELLOGG, KRISTEN

Provider ID: 418340

Provider Gender: Female

License Number: NP95009180


NPI: 1649757741


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


Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO-EL CAJON

 *525 E MAIN ST EL CAJON, CA 92020*

 *Phone: (619) 515-2498*

 *After Hours Phone: (619) 515-2498*

 *Website: www.fhcsd.org*
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER

KELLOGG, KRISTEN

Provider ID: 418340

Provider Gender: Female

License Number: NP95009180

NPI: 1649757741


Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO-EL CAJON

 *525 E MAIN ST EL CAJON, CA 92020*

 *Phone: (619) 515-2498*

 *After Hours Phone: (619) 515-2498*

515-2498

 *Website: www.fhcsd.org*

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER

LEONARD, BEVERLY

Provider ID: 206354

Provider Gender: Female

License Number: NP10943

NPI: 1285772392


Provider English Spoken: Y


Provider Language(s) Spoken: Spanish


Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

CHASE AVENUE FAMILY HEALTH CTRS INC

 *1111 W CHASE AVE EL CAJON, CA 92020*

 *Phone: (619) 515-2499*


 *After Hours Phone: (619) 515-2499*

 *Website: www.fhcsd.org*
Email: jaquelin@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

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

D2. Directorio de atención primaria

CERTIFIED NURSE

PRACTITIONER

LEONARD, BEVERLY

Provider ID: 206354

Provider Gender: Female

License Number: NP10943

NPI: 1285772392

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego

CHASE AVENUE FAMILY
HEALTH CTRS INC

 1111 W CHASE AVE

EL CAJON, CA 92020

 Phone: (619) 515-2499

 After Hours Phone: (619)
515-2499

 Website: www.fhcsd.org

Email: jaquelininc@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

LU, TAMMY

Provider ID: 206354

Provider Gender: Female

License Number: NP95007253

NPI: 1457879132

Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego

CHASE AVENUE FAMILY
HEALTH CTRS INC

 1111 W CHASE AVE

EL CAJON, CA 92020

 Phone: (619) 515-2499

 After Hours Phone: (619)
515-2499

 Website: www.fhcsd.org

Email: jaquelininc@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

LU, TAMMY

Provider ID: 206354

Provider Gender: Female

License Number: NP95007253

NPI: 1457879132

Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego

CHASE AVENUE FAMILY
HEALTH CTRS INC

 1111 W CHASE AVE

EL CAJON, CA 92020

 Phone: (619) 515-2499

 After Hours Phone: (619)
515-2499

 Website: www.fhcsd.org

Email: jaquelininc@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

MANGENE, CYNTHIA

Provider ID: 206354

Provider Gender: Female

License Number: NP6782

NPI: 1548292626

Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego

CHASE AVENUE FAMILY
HEALTH CTRS INC

 1111 W CHASE AVE

EL CAJON, CA 92020

 Phone: (619) 515-2499

 After Hours Phone: (619)
515-2499

 Website: www.fhcsd.org

Email: jaquelininc@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

MANGENE, CYNTHIA


Provider ID: 206354

Provider Gender: Female

License Number: NP6782


NPI: 1548292626


D2. Directorio de atención primaria


 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

CHASE AVENUE FAMILY
HEALTH CTRS INC

 1111 W CHASE AVE
EL CAJON, CA 92020

 *Phone: (619) 515-2499*

 *After Hours Phone: (619) 515-2499*


 *Website: www.fhcsd.org*
Email: jaquelin@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE

PRACTITIONER


OCHOA, ERLINDA

Provider ID: 418501

Provider Gender: Female

License Number: NP4430

NPI: 1346437464

 *Provider English Spoken: Y*

 *Provider Language(s)*

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No


La Maestra Family Clinic


LA MAESTRA CHC EL CAJON

BROADWAY

 1032 BROADWAY

EL CAJON, CA 92021

 *Phone: (619) 795-5991*

 *After Hours Phone: (619)*

795-5991

 *Website: www.lamaestra.org*

g

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE

PRACTITIONER


OCHOA, ERLINDA


Provider ID: 418501

Provider Gender: Female

License Number: NP4430

NPI: 1346437464

 *Provider English Spoken: Y*

 *Provider Language(s)*

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No


La Maestra Family Clinic

LA MAESTRA CHC EL CAJON

BROADWAY

 1032 BROADWAY

EL CAJON, CA 92021

 *Phone: (619) 795-5991*

 *After Hours Phone: (619)*

795-5991

 *Website: www.lamaestra.org*

g

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

OCHOA, ERLINDA

Provider ID: 185267

Provider Gender: Female

License Number: NP4430

NPI: 1346437464

 *Provider English Spoken: Y*

 *Provider Language(s)*

Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No


La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC

INC

 165 S 1ST ST

EL CAJON, CA 92019

 *Phone: (619) 312-0347*

 *After Hours Phone: (619)*

312-0347

 *Website: www.lamaestra.org*

g

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

CERTIFIED NURSE

PRACTITIONER

OCHOA, ERLINDA


Provider ID: 185267

Provider Gender: Female

License Number: NP4430

NPI: 1346437464

 *Provider English Spoken: Y*

 *Provider Language(s)*

D2. Directorio de atención primaria

Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
La Maestra Family Clinic
**LA MAESTRA FAMILY CLINIC
INC**
165 S 1ST ST
EL CAJON, CA 92019
Phone: (619) 312-0347
After Hours Phone: (619)
312-0347
Website: www.lamaestra.org
g
Email:
aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

CERTIFIED NURSE PRACTITIONER

ODA, THAGHAR

Provider ID: 418340
Provider Gender: Female
License Number: NP95000205
NPI: 1063835692
Provider English Spoken: Y
Provider Language(s)
Spoken: Amharic, Arabic
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HLTH CTR SAN
DIEGO-EL CAJON
525 E MAIN ST

EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619)
515-2498
Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

ODA, THAGHAR

Provider ID: 418340
Provider Gender: Female
License Number: RN810863
NPI: 1063835692
Provider English Spoken: Y
Provider Language(s)
Spoken: Amharic, Arabic
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HLTH CTR SAN
DIEGO-EL CAJON
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619)
515-2498
Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

ODA, THAGHAR

Provider ID: 418340
Provider Gender: Female
License Number: NP95000205
NPI: 1063835692
Provider English Spoken: Y
Provider Language(s)
Spoken: Amharic, Arabic
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HLTH CTR SAN
DIEGO-EL CAJON
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619)
515-2498
Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

ODA, THAGHAR


Provider ID: 418340
Provider Gender: Female
License Number: RN810863
NPI: 1063835692
Provider English Spoken: Y
Provider Language(s)
Spoken: Amharic, Arabic

D2. Directorio de atención primaria

Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO-EL CAJON


 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619) 515-2498

 Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE

PRACTITIONER


REAL, MARIA


Provider ID: 185267

Provider Gender: Female

License Number: NP17328

NPI: 1548450471

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Catalan, German, Spanish*

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No


La Maestra Family Clinic


LA MAESTRA FAMILY CLINIC

INC

 165 S 1ST ST

EL CAJON, CA 92019

 Phone: (619) 312-0347

 After Hours Phone: (619) 312-0347

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

CERTIFIED NURSE

PRACTITIONER


REAL, MARIA


Provider ID: 185267

Provider Gender: Female

License Number: NP17328

NPI: 1548450471

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Catalan, German, Spanish*

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA


VISTA

Board Certified Specialty: No


La Maestra Family Clinic


LA MAESTRA FAMILY CLINIC

INC


 165 S 1ST ST

EL CAJON, CA 92019

 Phone: (619) 312-0347

 After Hours Phone: (619)

312-0347

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

CERTIFIED NURSE

PRACTITIONER

REGEV, SHANEE

Provider ID: 569910

Provider Gender: Female

License Number: NP95022460

NPI: 1477218121

 *Provider English Spoken: Y*

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH EL

CAJON

 875 EL CAJON BLVD

EL CAJON, CA 92020

 Phone: (619) 662-4100


 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE

D2. Directorio de atención primaria

PRACTITIONER

REGEV, SHANEE

Provider ID: 569910

Provider Gender: Female

License Number: NP95022460

NPI: 1477218121

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH EL

CAJON

875 EL CAJON BLVD
EL CAJON, CA 92020

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

REID, EMILY

Provider ID: 185267

Provider Gender: Female

License Number: NP95002766

NPI: 1083081467

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC

INC

165 S 1ST ST
EL CAJON, CA 92019

Phone: (619) 312-0347

After Hours Phone: (619)
312-0347

Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

CERTIFIED NURSE

PRACTITIONER

REID, EMILY

Provider ID: 185267

Provider Gender: Female

License Number: NP95002766

NPI: 1083081467

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC

INC

165 S 1ST ST
EL CAJON, CA 92019

Phone: (619) 312-0347

After Hours Phone: (619)
312-0347

Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

CERTIFIED NURSE

PRACTITIONER

SMITH, SHARON

Provider ID: 418340

Provider Gender: Female

License Number: NP15444

NPI: 1780603597

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San
Diego

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

525 E MAIN ST
EL CAJON, CA 92020

Phone: (619) 515-2498

After Hours Phone: (619)
515-2498

Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

SMITH, SHARON

Provider ID: 418340

Provider Gender: Female

License Number: RN428876

D2. Directorio de atención primaria

NPI: 1780603597

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego


FAMILY HLTH CTR SAN

DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER


SMITH, SHARON

Provider ID: 418340

Provider Gender: Female

License Number: RN428876

NPI: 1780603597

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No


Family Health Centers of San
Diego


FAMILY HLTH CTR SAN

DIEGO-EL CAJON

 525 E MAIN ST

EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER


SMITH, SHARON

Provider ID: 418340

Provider Gender: Female

License Number: NP15444

NPI: 1780603597

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER


SWAN, MELANIE

Provider ID: 206354

Provider Gender: Female

License Number: NP95000818

NPI: 1871934414

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San
Diego

CHASE AVENUE FAMILY
HEALTH CTRS INC

 1111 W CHASE AVE
EL CAJON, CA 92020

 Phone: (619) 515-2499

 After Hours Phone: (619)
515-2499

 Website: www.fhcsd.org

Email: jaquelininc@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE

PRACTITIONER


SWAN, MELANIE

Provider ID: 206354

Provider Gender: Female

License Number: NP95000818

NPI: 1871934414

 Provider English Spoken: Y

 Provider Language(s)

D2. Directorio de atención primaria

Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

CHASE AVENUE FAMILY
HEALTH CTRS INC

1111 W CHASE AVE
EL CAJON, CA 92020

Phone: (619) 515-2499

After Hours Phone: (619)
515-2499

Website: www.fhcsd.org
Email: jaquelinca@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

**VERDUZCO GONZALEZ,
AURORA**

Provider ID: 185267

Provider Gender: Female

License Number: NP95001961

NPI: 1932452323

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

165 S 1ST ST
EL CAJON, CA 92019

Phone: (619) 312-0347

After Hours Phone: (619)
312-0347

Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

CERTIFIED NURSE

PRACTITIONER

**VERDUZCO GONZALEZ,
AURORA**

Provider ID: 185267

Provider Gender: Female

License Number: NP95001961

NPI: 1932452323

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

165 S 1ST ST
EL CAJON, CA 92019

Phone: (619) 312-0347

After Hours Phone: (619)
312-0347

Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

CERTIFIED NURSE

PRACTITIONER

**VILLANUEVADEGUTIE,
BERENICE**

Provider ID: 185267

Provider Gender: Female

License Number: NP95002188

NPI: 1952795536

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

165 S 1ST ST
EL CAJON, CA 92019

Phone: (619) 312-0347

After Hours Phone: (619)
312-0347

Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

D2. Directorio de atención primaria

VILLANUEVADEGUTIE, BERENICE

Provider ID: 185267

Provider Gender: Female


License Number: NP95002188


NPI: 1952795536

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

 165 S 1ST ST
EL CAJON, CA 92019

 Phone: (619) 312-0347

 After Hours Phone: (619)
312-0347

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE PRACTITIONER


WILLIAMS, BREAHA

Provider ID: 185267

Provider Gender: Female

License Number: NP95001840

NPI: 1063884864

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

 165 S 1ST ST

EL CAJON, CA 92019

 Phone: (619) 312-0347

 After Hours Phone: (619)
312-0347

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

CERTIFIED NURSE PRACTITIONER


WILLIAMS, BREAHA

Provider ID: 185267

Provider Gender: Female

License Number: NP95001840

NPI: 1063884864


 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

 165 S 1ST ST

EL CAJON, CA 92019

 Phone: (619) 312-0347

 After Hours Phone: (619)
312-0347

 Website: www.lamaestra.org

g

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

CERTIFIED NURSE

PRACTITIONER

WILLIAMS, TAKISHA

Provider ID: 418340

Provider Gender: Female

License Number: NP95013978

NPI: 1881727386

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

D2. Directorio de atención primaria

CERTIFIED NURSE

PRACTITIONER

WILLIAMS, TAKISHA

Provider ID: 418340

Provider Gender: Female

License Number: NP95013978

NPI: 1881727386

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego


FAMILY HLTH CTR SAN

DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED REGISTERED

NURSE MIDWIFE

CORRY, ANDREA

Provider ID: 418340

Provider Gender: Female

License Number: NM1721

NPI: 1255489571

Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego


FAMILY HLTH CTR SAN

DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED REGISTERED

NURSE MIDWIFE

CORRY, ANDREA

Provider ID: 418340

Provider Gender: Female

License Number: NM1721

NPI: 1255489571

Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego


FAMILY HLTH CTR SAN

DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

HOURIHAN, KEITH

Provider ID: 418501

Provider Gender: Male

License Number: DC29314

NPI: 1306916994

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


La Maestra Family Clinic


LA MAESTRA CHC EL CAJON

BROADWAY

 1032 BROADWAY
EL CAJON, CA 92021

 Phone: (619) 795-5983

 After Hours Phone: (619)
795-5983

 Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

CHIROPRACTOR

HOURIHAN, KEITH

Provider ID: 418501


Provider Gender: Male

License Number: DC29314


NPI: 1306916994

Provider English Spoken: Y

D2. Directorio de atención primaria


 *Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA CHC EL CAJON
BROADWAY*

 1032 BROADWAY
EL CAJON, CA 92021
 *Phone: (619) 795-5983*
 *After Hours Phone: (619)
795-5983*
 *Website: www.lamaestra.org*

*Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 *Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM**


CHIROPRACTOR

SOSA, DAVID

*Provider ID: 206354
Provider Gender: Male
License Number: DC33150
NPI: 1013308675
 *Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego**


*CHASE AVENUE FAMILY
HEALTH CTRS INC*

 1111 W CHASE AVE
EL CAJON, CA 92020
 *Phone: (619) 515-2499*
 *After Hours Phone: (619)
515-2499*
 *Website: www.fhcsd.org
Email: jaquelin@fhcsd.org*

*Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 *Accessibility: CONTACT
PROVIDER**

CHIROPRACTOR

SOSA, DAVID


*Provider ID: 206354
Provider Gender: Male
License Number: DC33150
NPI: 1013308675
 *Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego**

*CHASE AVENUE FAMILY
HEALTH CTRS INC*

 1111 W CHASE AVE
EL CAJON, CA 92020
 *Phone: (619) 515-2499*
 *After Hours Phone: (619)
515-2499*
 *Website: www.fhcsd.org
Email: jaquelin@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 *Accessibility: CONTACT
PROVIDER**



CHIROPRACTOR

SOSA, DAVID

*Provider ID: 418340
Provider Gender: Male
License Number: DC33150
NPI: 1013308675
 *Provider English Spoken: Y**


*Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HLTH CTR SAN
DIEGO-EL CAJON*

 525 E MAIN ST
EL CAJON, CA 92020
 *Phone: (619) 515-2498*
 *After Hours Phone: (619)
515-2498*


 *Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 *Accessibility: CONTACT
PROVIDER**

CHIROPRACTOR

SOSA, DAVID

*Provider ID: 418340
Provider Gender: Male
License Number: DC33150
NPI: 1013308675
 *Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HLTH CTR SAN
DIEGO-EL CAJON**

 525 E MAIN ST
EL CAJON, CA 92020
 *Phone: (619) 515-2498*
 *After Hours Phone: (619)
515-2498*

 *Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes*

D2. Directorio de atención primaria

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

CHIROPRACTOR


UY, ASHLEY

Provider ID: 418340

Provider Gender: Female

License Number: DC33869

NPI: 1174059760

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498


 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

CHIROPRACTOR


UY, ASHLEY


Provider ID: 418340

Provider Gender: Female

License Number: DC33869

NPI: 1174059760

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY

METABOLISM DIABETES


ISLAM, JULIE


Provider ID: 418340

Provider Gender: Female

License Number: A149552

NPI: 1750780516

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Bengali, Spanish

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (616) 515-2498

 After Hours Phone: (616)
515-2498


 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM

ENDOCRINOLOGY

METABOLISM DIABETES


ISLAM, JULIE


Provider ID: 418340

Provider Gender: Female

License Number: A149552

NPI: 1750780516

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Bengali, Spanish

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (616) 515-2498

 After Hours Phone: (616)
515-2498

 Website: www.fhcsd.org


Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N



D2. Directorio de atención primaria

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM

ENDOCRINOLOGY


METABOLISM DIABETES


NAGELBERG, JODI

Provider ID: 418340
Provider Gender: Female
License Number: A146838
NPI: 1720474141
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO-EL CAJON

 *525 E MAIN ST*
EL CAJON, CA 92020
 *Phone: (619) 515-2498*
 *After Hours Phone: (619) 515-2498*

 *Website: www.fhcsd.org*
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N



 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:30AM-5:30PM

ENDOCRINOLOGY

METABOLISM DIABETES


NAGELBERG, JODI


Provider ID: 418340
Provider Gender: Female

License Number: A146838
NPI: 1720474141
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO-EL CAJON



 *525 E MAIN ST*
EL CAJON, CA 92020
 *Phone: (619) 515-2498*
 *After Hours Phone: (619) 515-2498*

 *Website: www.fhcsd.org*
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N






 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

AL ANI, NAJWAN



Provider ID: 418340
Provider Gender: Female
License Number: A144974
NPI: 1275948473
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Arabic*
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO-EL CAJON

 *525 E MAIN ST*
EL CAJON, CA 92020
 *Phone: (619) 515-2498*
 *After Hours Phone: (619) 515-2498*
 *Website: www.fhcsd.org*
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:30AM-5:30PM


FAMILY PRACTICE

AL ANI, NAJWAN

Provider ID: 418340
Provider Gender: Female
License Number: A144974
NPI: 1275948473
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Arabic*
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO-EL CAJON

 *525 E MAIN ST*
EL CAJON, CA 92020
 *Phone: (619) 515-2498*
 *After Hours Phone: (619) 515-2498*

 *Website: www.fhcsd.org*
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

 *Accessibility: CONTACT*

D2. Directorio de atención primaria

PROVIDER

Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

ALGHAMDI, ASMA

Provider ID: 569910

Provider Gender: Female

License Number: A167529

NPI: 1316310840

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL
CAJON

 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

ALGHAMDI, ASMA

Provider ID: 569910

Provider Gender: Female




License Number: A167529

NPI: 1316310840

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL
CAJON

 875 EL CAJON BLVD

EL CAJON, CA 92020
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

BAGINGITO, AUSTIN

Provider ID: 418340

Provider Gender: Male

License Number: A163977


NPI: 1942705637

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

BAGINGITO, AUSTIN

Provider ID: 418340

Provider Gender: Male






License Number: A163977

NPI: 1942705637

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619)
515-2498
 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

BROWN, BRANDON

Provider ID: 418340

Provider Gender: Male

License Number: A148499

NPI: 1013399559

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN

D2. Directorio de atención primaria

DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

SA 8:30AM-5:30PM

FAMILY PRACTICE


BROWN, BRANDON

Provider ID: 418340

Provider Gender: Male

License Number: A148499

NPI: 1013399559

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): NPI: 1447888284

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

SA 8:30AM-5:30PM

FAMILY PRACTICE


BRUHN, JOSHUA

Provider ID: 418340

Provider Gender: Male

License Number: A186694

NPI: 1447888284

 Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

SA 8:30AM-5:30PM

FAMILY PRACTICE

BRUHN, JOSHUA

Provider ID: 418340

Provider Gender: Male

License Number: A186694

NPI: 1447888284

 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org


Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

SA 8:30AM-5:30PM

FAMILY PRACTICE

CORMAN, DANIEL

Provider ID: 418340

Provider Gender: Male

License Number: 20A13060

NPI: 1629339593

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San
Diego

FAMILY HLTH CTR SAN


DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (619) 515-2498

D2. Directorio de atención primaria

 After Hours Phone: (619) 515-2498

 Website: www.fhcsd.org


Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


CORMAN, DANIEL

Provider ID: 418340

Provider Gender: Male

License Number: 20A13060

NPI: 1629339593

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego


FAMILY HLTH CTR SAN

DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619) 515-2498

 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


DOMINGUEZ, DENNIS

Provider ID: 569910

Provider Gender: Male

License Number: G43179

NPI: 1225063811

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MEMORIAL


HOSPITAL


Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH EL
CAJON

 875 EL CAJON BLVD
EL CAJON, CA 92020

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


DOMINGUEZ, DENNIS


Provider ID: 569910

Provider Gender: Male

License Number: G43179

NPI: 1225063811

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL
CAJON

 875 EL CAJON BLVD
EL CAJON, CA 92020

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

GORDON, CHRISTOPHER

Provider ID: 418340

Provider Gender: Male

License Number: A83390

NPI: 1477711521

 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San


Diego

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619) 515-2498

 Website: www.fhcsd.org


Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

D2. Directorio de atención primaria

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE


GORDON, CHRISTOPHER

Provider ID: 418340

Provider Gender: Male


License Number: A83390


NPI: 1477711521


 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (619) 515-2498


 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE


HASTANAN, CAROL

Provider ID: 206354

Provider Gender: Female


License Number: A110192


NPI: 1861648461


 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

CHASE AVENUE FAMILY
HEALTH CTRS INC

 1111 W CHASE AVE
EL CAJON, CA 92020

 Phone: (619) 515-2499

 After Hours Phone: (619)
515-2499

 Website: www.fhcsd.org
Email: jaquelininc@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


HASTANAN, CAROL

Provider ID: 206354

Provider Gender: Female


License Number: A110192


NPI: 1861648461


 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

CHASE AVENUE FAMILY
HEALTH CTRS INC

 1111 W CHASE AVE
EL CAJON, CA 92020

 Phone: (619) 515-2499

 After Hours Phone: (619)
515-2499

 Website: www.fhcsd.org
Email: jaquelininc@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


HODGKIN, EDWARD

Provider ID: 418340

Provider Gender: Male


License Number: A177445


NPI: 1922619766


 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM

FAMILY PRACTICE

HODGKIN, EDWARD

Provider ID: 418340

Provider Gender: Male

License Number: A177445

D2. Directorio de atención primaria


NPI: 1922619766


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN
DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (619) 515-2498


 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM

FAMILY PRACTICE


KASAWA, JOHN


Provider ID: 569910

Provider Gender: Male

License Number: A79338

NPI: 1134230329


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Arabic, Chaldean
Neo-Aramaic, Spanish


Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH EL
CAJON

 875 EL CAJON BLVD
EL CAJON, CA 92020

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


KASAWA, JOHN


Provider ID: 569910

Provider Gender: Male

License Number: A79338

NPI: 1134230329

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Arabic, Chaldean
Neo-Aramaic, Spanish


Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH EL
CAJON

 875 EL CAJON BLVD
EL CAJON, CA 92020

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


MANDOYAN, AUSTIN

Provider ID: 418340

Provider Gender: Female

License Number: A161682

NPI: 1841726148


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON


Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN
DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM
SA 8:00AM-5:00PM

FAMILY PRACTICE

MANDOYAN, AUSTIN

Provider ID: 418340

Provider Gender: Female

License Number: A161682

NPI: 1841726148

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

D2. Directorio de atención primaria

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO-EL CAJON

525 E MAIN ST
EL CAJON, CA 92020

Phone: (619) 515-2498

After Hours Phone: (619) 515-2498

Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM
SA 8:00AM-5:00PM

FAMILY PRACTICE

NASSIR, BASSAM

Provider ID: 569910

Provider Gender: Male

License Number: A101888

NPI: 1386848166

Provider English Spoken: Y

Provider Language(s) Spoken: Arabic

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH EL CAJON

875 EL CAJON BLVD
EL CAJON, CA 92020

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

NASSIR, BASSAM

Provider ID: 569910

Provider Gender: Male

License Number: A101888

NPI: 1386848166

Provider English Spoken: Y

Provider Language(s) Spoken: Arabic

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH EL CAJON

875 EL CAJON BLVD
EL CAJON, CA 92020

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

NIAZI, HARRIS

Provider ID: 418340

Provider Gender: Male

License Number: A146111

NPI: 1174905871

Provider English Spoken: Y

Provider Language(s) Spoken: Farsi

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO-EL CAJON

525 E MAIN ST
EL CAJON, CA 92020

Phone: (619) 515-2498

After Hours Phone: (619) 515-2498

Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM

FAMILY PRACTICE

NIAZI, HARRIS

Provider ID: 418340

Provider Gender: Male

License Number: A146111

NPI: 1174905871

Provider English Spoken: Y

Provider Language(s) Spoken: Farsi

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO-EL CAJON

525 E MAIN ST

D2. Directorio de atención primaria

EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM

FAMILY PRACTICE

PUTRUS, RAMIZ

Provider ID: 664824
Provider Gender: Male
License Number: A68184
NPI: 1144300534
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA CHC-REA AVE

181 REA AVE
EL CAJON, CA 92020
Phone: (619) 312-0347
After Hours Phone: (619) 312-0347
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

PUTRUS, RAMIZ

Provider ID: 664824
Provider Gender: Male
License Number: A68184
NPI: 1144300534
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA CHC-REA AVE

181 REA AVE
EL CAJON, CA 92020
Phone: (619) 312-0347
After Hours Phone: (619) 312-0347
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

PUTRUS, RAMIZ

Provider ID: 185267
Provider Gender: Male
License Number: A68184
NPI: 1144300534
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC INC

165 S 1ST ST
EL CAJON, CA 92019
Phone: (619) 312-0347
After Hours Phone: (619) 312-0347
Website: www.lamaestra.org
Email: aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

PUTRUS, RAMIZ

Provider ID: 185267
Provider Gender: Male
License Number: A68184
NPI: 1144300534
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC INC

165 S 1ST ST
EL CAJON, CA 92019
Phone: (619) 312-0347
After Hours Phone: (619) 312-0347
Website: www.lamaestra.org
Email: aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

D2. Directorio de atención primaria

N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE


RODRIGUEZ, LOUIE

Provider ID: 418340

Provider Gender: Male

License Number: A176144

NPI: 1558823625

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

 *525 E MAIN ST
EL CAJON, CA 92020*

 *Phone: (619) 515-2498*

 *After Hours Phone: (619) 515-2498*

 *Website: www.fhcsd.org*

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE


RODRIGUEZ, LOUIE

Provider ID: 418340

Provider Gender: Male

License Number: A176144

NPI: 1558823625

 *Provider English Spoken: Y*

 *Provider Language(s)*

Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

 *525 E MAIN ST
EL CAJON, CA 92020*

 *Phone: (619) 515-2498*

 *After Hours Phone: (619) 515-2498*

 *Website: www.fhcsd.org*

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE


SALEM, RAMSEY

Provider ID: 569910

Provider Gender: Male

License Number: A158364

NPI: 1245401298

 *Provider English Spoken: Y*

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH EL

CAJON

 *875 EL CAJON BLVD
EL CAJON, CA 92020*

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*

 *Website: www.syhealth.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

SALEM, RAMSEY

Provider ID: 569910

Provider Gender: Male

License Number: A158364

NPI: 1245401298

 *Provider English Spoken: Y*


Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH EL

CAJON

 *875 EL CAJON BLVD
EL CAJON, CA 92020*

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*

 *Website: www.syhealth.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

SCHUMAKER, EDWARD

Provider ID: 418501

Provider Gender: Male

License Number: 20A6433

NPI: 1184616872

 *Provider English Spoken: Y*

 *Provider Language(s)*

Spoken: Spanish

Cultural Competency: N

D2. Directorio de atención primaria

Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA CHC EL CAJON
BROADWAY

1032 BROADWAY
EL CAJON, CA 92021

Phone: (619) 795-5991

After Hours Phone: (619)
795-5991

Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

SCHUMAKER, EDWARD

Provider ID: 418501

Provider Gender: Male

License Number: 20A6433

NPI: 1184616872

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA CHC EL CAJON
BROADWAY

1032 BROADWAY
EL CAJON, CA 92021

Phone: (619) 795-5991

After Hours Phone: (619)
795-5991

Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): NPI: 1184616872
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

SCHUMAKER, EDWARD

Provider ID: 185267

Provider Gender: Male

License Number: 20A6433

NPI: 1184616872

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

165 S 1ST ST
EL CAJON, CA 92019

Phone: (619) 312-0347

After Hours Phone: (619)
312-0347

Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

SCHUMAKER, EDWARD

Provider ID: 185267

Provider Gender: Male

License Number: 20A6433

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

165 S 1ST ST
EL CAJON, CA 92019

Phone: (619) 312-0347

After Hours Phone: (619)
312-0347

Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FQHC

CHASE AVENUE FAMILY HEALTH CTRS INC,

Provider ID: 206354

NPI: 1104861681

Provider English Spoken: Y

Cultural Competency: N

Family Health Centers of San
Diego

CHASE AVENUE FAMILY
HEALTH CTRS INC


1111 W CHASE AVE
EL CAJON, CA 92020

Phone: (619) 515-2499

Fax: (619) 593-7164

After Hours Phone: (619)
515-2499

D2. Directorio de atención primaria

 Website: www.fhcsd.org
Email: jaquelininc@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER

FQHC

CHASE AVENUE FAMILY HEALTH CTRS INC,


Provider ID: 206354

NPI: 1104861681


 Provider English Spoken: Y
Cultural Competency: N
Family Health Centers of San Diego

CHASE AVENUE FAMILY HEALTH CTRS INC

 1111 W CHASE AVE
EL CAJON, CA 92020

 Phone: (619) 515-2499
Fax: (619) 593-7164

 After Hours Phone: (619) 515-2499

 Website: www.fhcsd.org
Email: jaquelininc@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER

FQHC

FAMILY HLTH CTR SAN DIEGO-EL CAJON,

Provider ID: 418340

NPI: 1932561198


 Provider English Spoken: Y

Cultural Competency: N
Family Health Centers of San Diego


FAMILY HLTH CTR SAN

DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (619) 515-2498
Fax: (619) 269-0191

 After Hours Phone: (619) 515-2498

 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM

FQHC

FAMILY HLTH CTR SAN DIEGO-EL CAJON,


Provider ID: 418340

NPI: 1932561198


 Provider English Spoken: Y
Cultural Competency: N
Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (619) 515-2498
Fax: (619) 269-0191

 After Hours Phone: (619) 515-2498

 Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM

FQHC


LA MAESTRA CHC EL CAJON BROADWAY,


Provider ID: 418501

NPI: 1134590086


 Provider English Spoken: Y
Cultural Competency: N
La Maestra Family Clinic
LA MAESTRA CHC EL CAJON

BROADWAY

 1032 BROADWAY
EL CAJON, CA 92021

 Phone: (619) 795-5991
Fax: (619) 795-5992

 After Hours Phone: (619) 795-5991

 Website: www.lamaestra.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

FQHC





LA MAESTRA CHC EL CAJON BROADWAY,

Provider ID: 418501


NPI: 1134590086

 Provider English Spoken: Y

D2. Directorio de atención primaria

Cultural Competency: N
La Maestra Family Clinic
LA MAESTRA CHC EL CAJON BROADWAY
 1032 BROADWAY
EL CAJON, CA 92021
 Phone: (619) 795-5991
Fax: (619) 795-5992
 After Hours Phone: (619) 795-5991
 Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FQHC





LA MAESTRA CHC-REA AVE,
Provider ID: 664824
NPI: 1609849074
 Provider English Spoken: Y
Cultural Competency: N
La Maestra Family Clinic
LA MAESTRA CHC-REA AVE
 181 REA AVE
EL CAJON, CA 92020
 Phone: (619) 312-0347
Fax: (619) 510-4649
 After Hours Phone: (619) 312-0347
 Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

FQHC

LA MAESTRA CHC-REA AVE,
Provider ID: 664824
NPI: 1609849074
 Provider English Spoken: Y
Cultural Competency: N
La Maestra Family Clinic
LA MAESTRA CHC-REA AVE
 181 REA AVE
EL CAJON, CA 92020
 Phone: (619) 312-0347
Fax: (619) 510-4649
 After Hours Phone: (619) 312-0347
 Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FQHC

LA MAESTRA FAMILY CLINIC INC,
Provider ID: 185267
NPI: 1336353721
 Provider English Spoken: Y
Cultural Competency: N
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC INC
 165 S 1ST ST
EL CAJON, CA 92019
 Phone: (619) 312-0347
Fax: (619) 749-5480
 After Hours Phone: (619)

312-0347
 Website: www.lamaestra.org
g
Email:
aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-TU 8:00AM-5:00PM
TH-F 8:00AM-5:00PM

FQHC

LA MAESTRA FAMILY CLINIC INC,
Provider ID: 185267
NPI: 1336353721
 Provider English Spoken: Y
Cultural Competency: N
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC INC
 165 S 1ST ST
EL CAJON, CA 92019
 Phone: (619) 312-0347
Fax: (619) 749-5480
 After Hours Phone: (619) 312-0347
 Website: www.lamaestra.org
g
Email:
aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-TU 8:00AM-5:00PM

D2. Directorio de atención primaria


TH-F 8:00AM-5:00PM

FQHC

SAN YSIDRO HEALTH EL CAJON,

Provider ID: 569910

NPI: 1568845741


 Provider English Spoken: Y

Cultural Competency: N

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH EL CAJON

 875 EL CAJON BLVD
EL CAJON, CA 92020

 Phone: (619) 662-4100

Fax: (619) 785-3356

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Hours: M-F 8:00AM-5:00PM

FQHC

SAN YSIDRO HEALTH EL CAJON,

Provider ID: 569910

NPI: 1568845741


 Provider English Spoken: Y

Cultural Competency: N

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH EL CAJON

 875 EL CAJON BLVD
EL CAJON, CA 92020

 Phone: (619) 662-4100

Fax: (619) 785-3356

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

HEPATOLOGY


GISH, ROBERT


Provider ID: 185267

Provider Gender: Male

License Number: G45632

NPI: 1548281322

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Dutch, French,
Spanish, Vietnamese


Cultural Competency: N


Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

 165 S 1ST ST
EL CAJON, CA 92019

 Phone: (619) 312-0347

 After Hours Phone: (619)
312-0347

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

HEPATOLOGY

GISH, ROBERT

Provider ID: 185267

Provider Gender: Male

License Number: G45632

NPI: 1548281322

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Dutch, French,
Spanish, Vietnamese


Cultural Competency: N


Board Certified Specialty: No


La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

 165 S 1ST ST
EL CAJON, CA 92019

 Phone: (619) 312-0347

 After Hours Phone: (619)
312-0347

 Website: www.lamaestra.org

Email:


aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

INTERNAL MEDICINE

ALWASH, MUSTAFA

Provider ID: 418340

Provider Gender: Male

License Number: A160516



NPI: 1679936439

D2. Directorio de atención primaria

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SHARP MEMORIAL HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HLTH CTR SAN
DIEGO-EL CAJON
 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619)
515-2498
 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE







ALWASH, MUSTAFA


Provider ID: 418340
Provider Gender: Male
License Number: A160516
NPI: 1679936439
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SHARP MEMORIAL HOSPITAL
Board Certified Specialty: No

Family Health Centers of San
Diego
FAMILY HLTH CTR SAN
DIEGO-EL CAJON
 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619)
515-2498
 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE




AWDISHO, ALAN

Provider ID: 569910
Provider Gender: Male
License Number: 20A18702
NPI: 1164795498
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Assyrian, Syriac
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL
CAJON
 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

AWDISHO, ALAN


Provider ID: 569910
Provider Gender: Male
License Number: 20A18702
NPI: 1164795498
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Assyrian, Syriac
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL
CAJON
 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

CARPENTERIII, ROBERT

Provider ID: 569910
Provider Gender: Male
License Number: 20A10964
NPI: 1356343040

D2. Directorio de atención primaria


 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL
CAJON

 875 EL CAJON BLVD
EL CAJON, CA 92020
 *Phone: (619) 662-4100*
 *After Hours Phone: (619)*
662-4100
 *Website: www.syhealth.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER


INTERNAL MEDICINE

CARPENTERIII, ROBERT

Provider ID: 569910
Provider Gender: Male
License Number: 20A10964
NPI: 1356343040



 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL
CAJON

 875 EL CAJON BLVD
EL CAJON, CA 92020
 *Phone: (619) 662-4100*
 *After Hours Phone: (619)*
662-4100
 *Website: www.syhealth.org*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER



INTERNAL MEDICINE

DUONG, MAI

Provider ID: 418340
Provider Gender: Female
License Number: A127798
NPI: 1629339304
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Vietnamese
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HLTH CTR SAN
DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020
 *Phone: (619) 515-2498*
 *After Hours Phone: (619)*
515-2498

 *Website: www.fhcsd.org*
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE

DUONG, MAI

Provider ID: 418340
Provider Gender: Female

License Number: A127798
NPI: 1629339304

 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Vietnamese
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020
 *Phone: (619) 515-2498*
 *After Hours Phone: (619)*
515-2498

 *Website: www.fhcsd.org*
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER

Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE

GORGES, RANDA

Provider ID: 418340
Provider Gender: Female
License Number: A138815
NPI: 1285079509

 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Arabic
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-EL CAJON


D2. Directorio de atención primaria

 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619)
515-2498
 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE

GORGES, RANDA

Provider ID: 418340
Provider Gender: Female
License Number: A138815
NPI: 1285079509
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HLTH CTR SAN
DIEGO-EL CAJON






 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619)
515-2498
 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT

PROVIDER
Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE

JABRI, ZAIN

Provider ID: 418501
Provider Gender: Male
License Number: A160760
NPI: 1891159620
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic
Cultural Competency: N
Hospital Affiliation: ST AGNES
MEDICAL CENTER, CITY OF
HOPE NATIONAL MED CTR,
JOHN F KENNEDY MEMORIAL
HOSP, SUTTER MEDICAL
CENTER SACRAMENTO,
PIONEERS MEMORIAL
HOSPITAL, SCRIPPS MERCY
HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA CHC EL CAJON
BROADWAY






 1032 BROADWAY
EL CAJON, CA 92021
 Phone: (619) 795-5991
 After Hours Phone: (619)
795-5991
 Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT

PROVIDER
Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE

JABRI, ZAIN

Provider ID: 418501
Provider Gender: Male
License Number: A160760
NPI: 1891159620
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic
Cultural Competency: N
Hospital Affiliation: ST AGNES
MEDICAL CENTER, CITY OF
HOPE NATIONAL MED CTR,
JOHN F KENNEDY MEMORIAL
HOSP, SUTTER MEDICAL
CENTER SACRAMENTO,
PIONEERS MEMORIAL
HOSPITAL, SCRIPPS MERCY
HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA CHC EL CAJON
BROADWAY

 1032 BROADWAY
EL CAJON, CA 92021
 Phone: (619) 795-5991
 After Hours Phone: (619)
795-5991
 Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT

D2. Directorio de atención primaria

PROVIDER

Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE

MANSY, TAMARA

Provider ID: 569910


Provider Gender: Female


License Number: A164238


NPI: 1396277737

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL
CAJON

 875 EL CAJON BLVD
EL CAJON, CA 92020


 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

MANSY, TAMARA

Provider ID: 569910

Provider Gender: Female

License Number: A164238


NPI: 1396277737


Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL
CAJON

 875 EL CAJON BLVD

EL CAJON, CA 92020

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

MAY, LOUIS

Provider ID: 569910

Provider Gender: Male

License Number: A138568

NPI: 1720497514


Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation:

EISENHOWER MEDICAL CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL
CAJON

 875 EL CAJON BLVD
EL CAJON, CA 92020

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

MAY, LOUIS

Provider ID: 569910

Provider Gender: Male

License Number: A138568

NPI: 1720497514


Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation:

EISENHOWER MEDICAL CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL
CAJON

 875 EL CAJON BLVD
EL CAJON, CA 92020


 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

MICHAEL, RAMI

Provider ID: 569910

Provider Gender: Male

License Number: A144513

NPI: 1467871673




Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, Chaldean
Neo-Aramaic


Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL


D2. Directorio de atención primaria

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL
CAJON

 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150



American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE




MICHAEL, RAMI


Provider ID: 569910
Provider Gender: Male
License Number: A144513
NPI: 1467871673

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, Chaldean
Neo-Aramaic

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL
CAJON

 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N



 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE

NADI, FAHIMA


Provider ID: 418340
Provider Gender: Female
License Number: A175325
NPI: 1770072290

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Pashto, Persian,
Urdu


Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM



INTERNAL MEDICINE

NADI, FAHIMA

Provider ID: 418340

Provider Gender: Female


License Number: A175325
NPI: 1770072290


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Pashto, Persian,
Urdu

Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619)
515-2498



 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE

NARAYAN, ARCHANA

Provider ID: 569910
Provider Gender: Female
License Number: A101773
NPI: 1003053950

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Hindi, Kannada
Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER
Board Certified Specialty: No

D2. Directorio de atención primaria

IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL
CAJON

875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619)
662-4100

Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE

NARAYAN, ARCHANA

Provider ID: 569910

Provider Gender: Female

License Number: A101773

NPI: 1003053950

Provider English Spoken: Y
Provider Language(s)
Spoken: Hindi, Kannada

Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER

Board Certified Specialty: No

IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL
CAJON

875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619)
662-4100

Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE

PARIKH, MILIND

Provider ID: 418340

Provider Gender: Male

License Number: 20A13745

NPI: 1194161406

Provider English Spoken: Y

Provider Language(s)
Spoken: Gujarati, Hindi,
Spanish

Cultural Competency: N

Hospital Affiliation: SHARP
CHULA VISTA MED CTR, Sharp
Grossmont Hospital, Adventist

Health and Rideout

Board Certified Specialty: No

Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-EL CAJON

525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619)
515-2498

Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

PARIKH, MILIND

Provider ID: 418340

Provider Gender: Male

License Number: 20A13745

NPI: 1194161406

Provider English Spoken: Y
Provider Language(s)
Spoken: Gujarati, Hindi,
Spanish

Cultural Competency: N

Hospital Affiliation: SHARP
CHULA VISTA MED CTR, Sharp
Grossmont Hospital, Adventist
Health and Rideout

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

525 E MAIN ST
EL CAJON, CA 92020

Phone: (619) 515-2498

After Hours Phone: (619)
515-2498

Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

REDDY, ARJUN

Provider ID: 428134

Provider Gender: Male

NPI: 1730132457

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

D2. Directorio de atención primaria

Hospital Affiliation:

GROSSMONT HOSPITAL


Board Certified Specialty: No

Community Care IPA LLC

ARJUN N REDDY

 5442 SYCUAN RD

EL CAJON, CA 92019

 *Phone:* (619) 445-0707

Fax: (619) 445-0988

 *After Hours Phone:* (619)
445-0707

 *Website:* N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

 *Accessibility:* CONTACT
PROVIDER

Hours: M-F 8:00AM-4:00PM


INTERNAL MEDICINE


ROUEL, LINDA

Provider ID: 308485

Provider Gender: Female

NPI: 1326128950

 *Provider English Spoken:* Y

 *Provider Language(s)*
Spoken: Arabic, Assyrian,
Mandarin, Syriac

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL,


GROSSMONT HOSPITAL

Board Certified Specialty: No
Imperial Health Holdings

Medical Group-SD


LINDA Y ROUEL

 860 JAMACHA RD STE 107
EL CAJON, CA 92019

 *Phone:* (619) 456-9920

Fax: (619) 456-9340

 *After Hours Phone:* (619)
456-9920

 *Website:* N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

 *Accessibility:* CONTACT
PROVIDER

Hours: M-F 8:00AM-7:00PM

INTERNAL MEDICINE


ROUEL, WADI


Provider ID: 418501

Provider Gender: Male

License Number: C55979

NPI: 1740254713

 *Provider English Spoken:* Y

 *Provider Language(s)*
Spoken: Arabic, Assyrian,
Spanish, Syriac


Cultural Competency: N


Hospital Affiliation: SHARP
MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL
HOSPITAL, GROSSMONT
HOSPITAL

Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA CHC EL CAJON
BROADWAY

 1032 BROADWAY
EL CAJON, CA 92021

 *Phone:* (619) 795-5983

 *After Hours Phone:* (619)
795-5983


 *Website:* www.lamaestra.or
g

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility:* CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE


ROUEL, WADI


Provider ID: 418501

Provider Gender: Male

License Number: C55979

NPI: 1740254713

 *Provider English Spoken:* Y

 *Provider Language(s)*
Spoken: Arabic, Assyrian,
Spanish, Syriac


Cultural Competency: N


Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL, GROSSMONT
HOSPITAL

Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA CHC EL CAJON
BROADWAY

 1032 BROADWAY
EL CAJON, CA 92021

 *Phone:* (619) 795-5983

 *After Hours Phone:* (619)
795-5983


 *Website:* www.lamaestra.or
g

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility:* CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

D2. Directorio de atención primaria

INTERNAL MEDICINE


ROUEL, WADI


Provider ID: 185267

Provider Gender: Male

License Number: C55979

NPI: 1740254713

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, Assyrian,
Spanish, Syriac

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL, GROSSMONT

HOSPITAL

Board Certified Specialty: No


La Maestra Family Clinic


LA MAESTRA FAMILY CLINIC


INC

 165 S 1ST ST

EL CAJON, CA 92019

 Phone: (619) 269-1262

 After Hours Phone: (619)
269-1262

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-TU 8:00AM-5:00PM

TH-F 8:00AM-5:00PM

INTERNAL MEDICINE


ROUEL, WADI


Provider ID: 185267

Provider Gender: Male

License Number: C55979

NPI: 1740254713

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, Assyrian,
Spanish, Syriac

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL, GROSSMONT


HOSPITAL

Board Certified Specialty: No


La Maestra Family Clinic


LA MAESTRA FAMILY CLINIC

INC

 165 S 1ST ST

EL CAJON, CA 92019

 Phone: (619) 269-1262

 After Hours Phone: (619)
269-1262

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-TU 8:00AM-5:00PM

TH-F 8:00AM-5:00PM

INTERNAL MEDICINE

SHEIKH-MOHAMED, HALA


Provider ID: 569910

Provider Gender: Female

License Number: A159247

NPI: 1972946770

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, Hindi, Urdu
Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH EL

CAJON

 875 EL CAJON BLVD

EL CAJON, CA 92020

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

SHEIKH-MOHAMED, HALA


Provider ID: 569910

Provider Gender: Female

License Number: A159247

NPI: 1972946770

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, Hindi, Urdu
Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP



SAN YSIDRO HEALTH EL

CAJON

 875 EL CAJON BLVD



EL CAJON, CA 92020

D2. Directorio de atención primaria

 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE



TCHAKMAKJIAN, LEVON

Provider ID: 569910
Provider Gender: Male
License Number: C144411
NPI: 1790744795
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Armenian, Hebrew
Cultural Competency: N
Hospital Affiliation: NORTH BAY VACAVALLEY HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL CAJON

 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE



TCHAKMAKJIAN, LEVON

Provider ID: 569910
Provider Gender: Male
License Number: C144411
NPI: 1790744795
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Armenian, Hebrew
Cultural Competency: N
Hospital Affiliation: NORTH BAY VACAVALLEY HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL CAJON

 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE



YOON, TAE

Provider ID: 418340
Provider Gender: Male
License Number: C161090
NPI: 1508918178
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Korean
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SAN


DIEGO-EL CAJON
 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619) 515-2498
 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE

YOON, TAE

Provider ID: 418340
Provider Gender: Male
License Number: C161090
NPI: 1508918178
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Korean
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SAN DIEGO-EL CAJON
 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619) 515-2498
 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

D2. Directorio de atención primaria

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:30AM-5:30PM

INTERVENTIONAL CARDIOLOGY


KAFRI, HASSAN


Provider ID: 569910

Provider Gender: Male

License Number: A96002

NPI: 1730258401

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Arabic, French, German, Russian, Spanish*

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, GROSSMONT

HOSPITAL, SHARP MEMORIAL

HOSPITAL, SHARP CHULA

VISTA MED CTR

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH EL

CAJON

 *875 EL CAJON BLVD*

EL CAJON, CA 92020

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*


 *Website: www.syhealth.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

INTERVENTIONAL

CARDIOLOGY


KAFRI, HASSAN


Provider ID: 569910

Provider Gender: Male

License Number: A96002

NPI: 1730258401

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Arabic, French, German, Russian, Spanish*

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, GROSSMONT

HOSPITAL, SHARP MEMORIAL

HOSPITAL, SHARP CHULA

VISTA MED CTR

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH EL

CAJON

 *875 EL CAJON BLVD*

EL CAJON, CA 92020

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*

 *Website: www.syhealth.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI

Provider ID: 418340

Provider Gender: Female

License Number: 20A14919

NPI: 1619397031

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,

SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No


Family Health Centers of San Diego


FAMILY HLTH CTR SAN

DIEGO-EL CAJON

 *525 E MAIN ST*

EL CAJON, CA 92020

 *Phone: (619) 515-2498*

 *After Hours Phone: (619) 515-2498*

 *Website: www.fhcsd.org*


Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI

Provider ID: 418340

Provider Gender: Female

License Number: 20A14919

NPI: 1619397031

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,

SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No

D2. Directorio de atención primaria

Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO-EL CAJON

525 E MAIN ST
EL CAJON, CA 92020

Phone: (619) 515-2498

After Hours Phone: (619) 515-2498

Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

Provider ID: 418340

Provider Gender: Female

License Number: A68463

NPI: 1376663831

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SHARP MARY

BIRCH HOSP FOR WOMEN

AND NEWBORNS

Board Certified Specialty: No

Family Health Centers of San

Diego

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

525 E MAIN ST

EL CAJON, CA 92020

Phone: (619) 515-2498

After Hours Phone: (619) 515-2498

Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

Provider ID: 418340

Provider Gender: Female

License Number: A68463

NPI: 1376663831

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SHARP MARY

BIRCH HOSP FOR WOMEN

AND NEWBORNS

Board Certified Specialty: No

Family Health Centers of San

Diego

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

525 E MAIN ST

EL CAJON, CA 92020

Phone: (619) 515-2498

After Hours Phone: (619) 515-2498

Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

Provider ID: 418340

Provider Gender: Male

License Number: A113001

NPI: 1225231582

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,

GROSSMONT HOSPITAL, TRI

CITY MEDICAL CTR

Board Certified Specialty: No

Family Health Centers of San

Diego

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

525 E MAIN ST

EL CAJON, CA 92020

Phone: (619) 515-2498

After Hours Phone: (619) 515-2498

Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

D2. Directorio de atención primaria

Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

Provider ID: 418340

Provider Gender: Male

License Number: A113001

NPI: 1225231582

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,

GROSSMONT HOSPITAL, TRI

CITY MEDICAL CTR

Board Certified Specialty: No

Family Health Centers of San

Diego

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

525 E MAIN ST

EL CAJON, CA 92020

Phone: (619) 515-2498

After Hours Phone: (619)

515-2498

Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

SA 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA

Provider ID: 418340

Provider Gender: Female

License Number: A163464

NPI: 1326531401

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No

Family Health Centers of San

Diego

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

525 E MAIN ST

EL CAJON, CA 92020

Phone: (619) 515-2498

After Hours Phone: (619)

515-2498

Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA

Provider ID: 418340

Provider Gender: Female

License Number: A163464

NPI: 1326531401

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No

Family Health Centers of San

Diego

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

525 E MAIN ST

EL CAJON, CA 92020

Phone: (619) 515-2498

After Hours Phone: (619)

515-2498

Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS

Provider ID: 418340

Provider Gender: Male

License Number: A108228

NPI: 1629277322

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San

Diego

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

525 E MAIN ST

EL CAJON, CA 92020


Phone: (619) 515-2498

After Hours Phone: (619)

515-2498

Website: www.fhcsd.org


D2. Directorio de atención primaria



Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS

Provider ID: 418340
Provider Gender: Male
License Number: A108228
NPI: 1629277322
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SAN
DIEGO-EL CAJON



 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER



OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY

Provider ID: 418340
Provider Gender: Female
License Number: A178499
NPI: 1033613732



 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, Sharp
Grossmont Hospital
Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN
DIEGO-EL CAJON
 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY



Provider ID: 418340
Provider Gender: Female
License Number: A178499
NPI: 1033613732
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, Sharp
Grossmont Hospital
Board Certified Specialty: No
Family Health Centers of San Diego

Diego
FAMILY HLTH CTR SAN
DIEGO-EL CAJON
 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619)
515-2498
 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN

Provider ID: 418340
Provider Gender: Female
License Number: C174771
NPI: 1053392035
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, Sharp
Grossmont Hospital
Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN
DIEGO-EL CAJON
 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619)
515-2498
 Website: www.fhcsd.org
Email: janellek@fhcsd.org

D2. Directorio de atención primaria

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): Provider ID: 418501

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY


HANLEY, LAUREN

Provider ID: 418340

Provider Gender: Female

License Number: C174771

NPI: 1053392035

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, Sharp


Grossmont Hospital


Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org


Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM


OBSTETRICS / GYNECOLOGY

KHAN, ALIYA

Provider Gender: Female

License Number: G50634

NPI: 1285687350


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Hindi, Urdu

Cultural Competency: N

Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA CHC EL CAJON
BROADWAY

 1032 BROADWAY
EL CAJON, CA 92021

 Phone: (619) 795-5991

 After Hours Phone: (619)
795-5991

 Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-6:00PM

SA 8:00AM-2:00PM

OBSTETRICS / GYNECOLOGY


KHAN, ALIYA

Provider ID: 418501

Provider Gender: Female

License Number: G50634

NPI: 1285687350

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hindi, Urdu

Cultural Competency: N


Board Certified Specialty: No


La Maestra Family Clinic


LA MAESTRA CHC EL CAJON
BROADWAY

 1032 BROADWAY

EL CAJON, CA 92021

 Phone: (619) 795-5991

 After Hours Phone: (619)
795-5991

 Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-6:00PM

SA 8:00AM-2:00PM

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA

Provider ID: 418340

Provider Gender: Female

License Number: A72005

NPI: 1649208711

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND
HEALTHCARE CTR, SCRIPPS
MERCY HOSPITAL,
GROSSMONT HOSPITAL

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-EL CAJON


 525 E MAIN ST
EL CAJON, CA 92020

D2. Directorio de atención primaria

 Phone: (619) 515-2498
 After Hours Phone: (619) 515-2498
 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150







American Sign Language (ASL):


N

 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA

Provider ID: 418340
Provider Gender: Female
License Number: A72005
NPI: 1649208711
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SAN DIEGO-EL CAJON
 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619) 515-2498
 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON

Provider ID: 418340
Provider Gender: Female
License Number: A116680
NPI: 1700073962
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SAN DIEGO-EL CAJON
 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619) 515-2498
 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

SA 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON

Provider ID: 418340
Provider Gender: Female
License Number: A116680
NPI: 1700073962
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SAN DIEGO-EL CAJON
 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619) 515-2498
 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

MENDEZ, DIEGO

Provider ID: 569910

D2. Directorio de atención primaria

Provider Gender: Male
License Number: A47906
NPI: 1437181922
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, BAKERSFIELD
MEMORIAL HOSP, SHARP
MEMORIAL HOSPITAL,
Adventist Health Bakersfield,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL, KERN MEDICAL
CENTER, KERN MEDICAL
CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL
CAJON
📍 875 EL CAJON BLVD
EL CAJON, CA 92020
☎ Phone: (619) 662-4100
📞 After Hours Phone: (619)
662-4100
🌐 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

MENDEZ, DIEGO

Provider ID: 569910
Provider Gender: Male
License Number: A47906

NPI: 1437181922
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, BAKERSFIELD
MEMORIAL HOSP, SHARP
MEMORIAL HOSPITAL,
Adventist Health Bakersfield,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL, KERN MEDICAL
CENTER, KERN MEDICAL
CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL
CAJON
📍 875 EL CAJON BLVD
EL CAJON, CA 92020
☎ Phone: (619) 662-4100
📞 After Hours Phone: (619)
662-4100
🌐 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA

Provider ID: 418340
Provider Gender: Female
License Number: A164859
NPI: 1952751711
☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Hindi
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HLTH CTR SAN
DIEGO-EL CAJON
📍 525 E MAIN ST
EL CAJON, CA 92020
☎ Phone: (619) 515-2498
📞 After Hours Phone: (619)
515-2498
🌐 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA

Provider ID: 418340
Provider Gender: Female
License Number: A164859
NPI: 1952751711
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Hindi
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HLTH CTR SAN

D2. Directorio de atención primaria

DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA

Provider ID: 418340

Provider Gender: Female

License Number: 20A13958

NPI: 1932269198

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Sharp


Grossmont Hospital


Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

SA 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA

Provider ID: 418340

Provider Gender: Female

License Number: 20A13958

NPI: 1932269198

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Sharp


Grossmont Hospital


Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

SA 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

WINESBURG, JENNIFER

Provider ID: 418340

Provider Gender: Female

License Number: 20A11535

NPI: 1811162456

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP

CORONADO HOSP AND

HEALTHCARE CTR,

GROSSMONT HOSPITAL,

DESERT REGIONAL MED CTR


Board Certified Specialty: No
Family Health Centers of San


Diego

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

SA 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

WINESBURG, JENNIFER

Provider ID: 418340

Provider Gender: Female

License Number: 20A11535

NPI: 1811162456

 Provider English Spoken: Y



 Provider Language(s)






D2. Directorio de atención primaria

Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, GROSSMONT HOSPITAL, DESERT REGIONAL MED CTR
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SAN DIEGO-EL CAJON
 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619) 515-2498
 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY



ZIEG, ALAN

Provider ID: 418340
Provider Gender: Male
License Number: G78814
NPI: 1699790634
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL,

SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SAN DIEGO-EL CAJON
 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619) 515-2498
 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY




ZIEG, ALAN

Provider ID: 418340
Provider Gender: Male
License Number: G78814
NPI: 1699790634
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL

CHULA VISTA
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SAN DIEGO-EL CAJON
 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619) 515-2498
 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

OPHTHALMOLOGY

ALBORZIAN, SHERVIN

Provider ID: 418340
Provider Gender: Male
License Number: A107093
NPI: 1588825129
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Farsi, Persian, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SAN DIEGO-EL CAJON
 525 E MAIN ST

D2. Directorio de atención primaria

EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM

OPHTHALMOLOGY

ALBORZIAN, SHERVIN

Provider ID: 418340
Provider Gender: Male
License Number: A107093
NPI: 1588825129
Provider English Spoken: Y
Provider Language(s)
Spoken: Farsi, Persian,
Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HLTH CTR SAN
DIEGO-EL CAJON
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM

OPHTHALMOLOGY

JARDON, JAVIER

Provider ID: 569910
Provider Gender: Male
License Number: A131365
NPI: 1609171982
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
CALIFORNIA HOSP MED CTR
LOS ANGELES, EL CENTRO
REGIONAL MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL
CAJON

875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

OPHTHALMOLOGY

JARDON, JAVIER

Provider ID: 569910
Provider Gender: Male
License Number: A131365
NPI: 1609171982
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
CALIFORNIA HOSP MED CTR
LOS ANGELES, EL CENTRO
REGIONAL MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL
CAJON
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

OPHTHALMOLOGY

MANI, NASRIN

Provider ID: 569910
Provider Gender: Female
License Number: A40473
NPI: 1023061314
Provider English Spoken: Y
Provider Language(s)
Spoken: Arabic, Faroese,
Farsi, Persian, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS

D2. Directorio de atención primaria

MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL, UCSD
MEDICAL CTR, SHARP CHULA
VISTA MED CTR, GROSSMONT
HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL
CAJON

875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619)
662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

OPHTHALMOLOGY

MANI, NASRIN

Provider ID: 569910
Provider Gender: Female
License Number: A40473
NPI: 1023061314

Provider English Spoken: Y
Provider Language(s)
Spoken: Arabic, Faroese,
Farsi, Persian, Spanish
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL, UCSD
MEDICAL CTR, SHARP CHULA
VISTA MED CTR, GROSSMONT
HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL
CAJON

875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619)
662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

OPHTHALMOLOGY

PAPASTERGIOU, GEORGIOS

Provider ID: 569910
Provider Gender: Male
License Number: A127706
NPI: 1790054393

Provider English Spoken: Y
Provider Language(s)
Spoken: Arabic, Farsi,
French, Greek, Italian,
Spanish

Cultural Competency: N
Hospital Affiliation: EL CENTRO
REGIONAL MEDICAL CENTER,
SCRIPPS MEMORIAL
HOSPITAL, SHARP MEMORIAL
HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL
CAJON

875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

OPHTHALMOLOGY

PAPASTERGIOU, GEORGIOS

Provider ID: 569910
Provider Gender: Male
License Number: A127706
NPI: 1790054393

Provider English Spoken: Y
Provider Language(s)
Spoken: Arabic, Farsi,
French, Greek, Italian,
Spanish


Cultural Competency: N
Hospital Affiliation: EL CENTRO
REGIONAL MEDICAL CENTER,
SCRIPPS MEMORIAL
HOSPITAL, SHARP MEMORIAL
HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL
CAJON

875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619)
662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

D2. Directorio de atención primaria

N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM

OPHTHALMOLOGY


PONS, MAURICIO

Provider ID: 569910

Provider Gender: Male

License Number: A87650

NPI: 1376723759

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL, EL

CENTRO REGIONAL MEDICAL

CENTER, SHARP MEMORIAL

HOSPITAL, SCRIPPS MERCY

HOSPITAL

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH EL

CAJON

 *875 EL CAJON BLVD*

EL CAJON, CA 92020

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*


 *Website: www.syhealth.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

OPHTHALMOLOGY


PONS, MAURICIO

Provider ID: 569910

Provider Gender: Male

License Number: A87650

NPI: 1376723759

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL, EL

CENTRO REGIONAL MEDICAL

CENTER, SHARP MEMORIAL

HOSPITAL, SCRIPPS MERCY

HOSPITAL

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH EL

CAJON

 *875 EL CAJON BLVD*

EL CAJON, CA 92020

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*

 *Website: www.syhealth.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

OPHTHALMOLOGY


SKAF, AYHAM


Provider ID: 569910

Provider Gender: Male

License Number: A120584

NPI: 1285888628

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Arabic, Spanish*

Cultural Competency: N

Hospital Affiliation: EL CENTRO

REGIONAL MEDICAL CENTER, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL

HOSPITAL

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH EL

CAJON

 *875 EL CAJON BLVD*

EL CAJON, CA 92020

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*

 *Website: www.syhealth.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

OPHTHALMOLOGY

SKAF, AYHAM


Provider ID: 569910

Provider Gender: Male

License Number: A120584

NPI: 1285888628

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Arabic, Spanish*

Cultural Competency: N

Hospital Affiliation: EL CENTRO

REGIONAL MEDICAL CENTER, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL

HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH EL

CAJON

 *875 EL CAJON BLVD*

EL CAJON, CA 92020

D2. Directorio de atención primaria

EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

ADJAN, ROULA

Provider ID: 185267
Provider Gender: Female
License Number: A81682
NPI: 1992847263
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, French, Spanish
Cultural Competency: N
Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC INC
165 S 1ST ST
EL CAJON, CA 92019
Phone: (619) 280-4213
After Hours Phone: (619) 280-4213
Website: www.lamaestra.org
Email: aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

ADJAN, ROULA

Provider ID: 185267
Provider Gender: Female
License Number: A81682
NPI: 1992847263
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, French, Spanish
Cultural Competency: N
Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC INC
165 S 1ST ST
EL CAJON, CA 92019
Phone: (619) 280-4213
After Hours Phone: (619) 280-4213
Website: www.lamaestra.org
Email: aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

ALWAHAB, AREEJ

Provider ID: 678064
Provider Gender: Female
NPI: 1497138002
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N

Hospital Affiliation: ST BERNARDINE MED CTR, KAISER FOUNDATION HOSPITAL SAN DIEGO
Board Certified Specialty: No
Rady Childrens Health Network
AREEJ K ALWAHAB
250 E CHASE AVE STE 110
EL CAJON, CA 92020
Phone: (619) 399-7878
Fax: (858) 499-5006
After Hours Phone: (619) 399-7878
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

CONE, STEPHANIE

Provider ID: 185267
Provider Gender: Female
License Number: A123929
NPI: 1437444858
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC INC

D2. Directorio de atención primaria


 165 S 1ST ST
EL CAJON, CA 92019
 Phone: (619) 312-0347
 After Hours Phone: (619)
312-0347
 Website: www.lamaestra.org

Email:
aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

CONE, STEPHANIE

Provider ID: 185267

Provider Gender: Female

License Number: A123929

NPI: 1437444858

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, RADY CHILDRENS

HOSPITAL SAN DIEGO

Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

 165 S 1ST ST
EL CAJON, CA 92019
 Phone: (619) 312-0347
 After Hours Phone: (619)
312-0347
 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

CONE, STEPHANIE

Provider ID: 418501

Provider Gender: Female

License Number: A123929

NPI: 1437444858

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA





VISTA, RADY CHILDRENS

HOSPITAL SAN DIEGO

Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA CHC EL CAJON
BROADWAY

 1032 BROADWAY
EL CAJON, CA 92021
 Phone: (619) 795-5991
 After Hours Phone: (619)
795-5991
 Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

PEDIATRICS

CONE, STEPHANIE

Provider ID: 418501

Provider Gender: Female

License Number: A123929

NPI: 1437444858

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA





VISTA, RADY CHILDRENS

HOSPITAL SAN DIEGO

Board Certified Specialty: No

La Maestra Family Clinic


LA MAESTRA CHC EL CAJON
BROADWAY

 1032 BROADWAY
EL CAJON, CA 92021
 Phone: (619) 795-5991
 After Hours Phone: (619)
795-5991
 Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

PEDIATRICS

FLEMING, TARA

Provider ID: 418340

Provider Gender: Female

License Number: A152462

D2. Directorio de atención primaria

NPI: 1972965242


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL


Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org


Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

PEDIATRICS

FLEMING, TARA

Provider ID: 418340

Provider Gender: Female

License Number: A152462

NPI: 1972965242

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL


Board Certified Specialty: No
Family Health Centers of San
Diego


FAMILY HLTH CTR SAN
DIEGO-EL CAJON

 525 E MAIN ST

EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

PEDIATRICS

HOANG, VY

Provider ID: 546310

Provider Gender: Female

NPI: 1649575135

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SHARP MARY BIRCH HOSP

FOR WOMEN AND

NEWBORNS, RADY

CHILDRENS HOSPITAL SAN
DIEGO


Board Certified Specialty: No

Rady Childrens Health Network

VY U HOANG

 844 JACKMAN ST

EL CAJON, CA 92020

 Phone: (619) 442-2560

Fax: (619) 442-7836

 After Hours Phone: (619)
442-2560

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS


JACKSON, DANA

Provider ID: 418340

Provider Gender: Female

License Number: 20A14119

NPI: 1689060063

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Portuguese,
Spanish

Cultural Competency: N

Hospital Affiliation:

MARINHEALTH AND

MARINHEALTH MEDICAL

CENTER, SCRIPPS MERCY
HOSPITAL


Board Certified Specialty: No
Family Health Centers of San
Diego


FAMILY HLTH CTR SAN

DIEGO-EL CAJON

 525 E MAIN ST

EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

D2. Directorio de atención primaria

PEDIATRICS


JACKSON, DANA


Provider ID: 418340

Provider Gender: Female

License Number: 20A14119

NPI: 1689060063

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Portuguese,
Spanish

Cultural Competency: N

Hospital Affiliation:

MARINHEALTH AND

MARINHEALTH MEDICAL

CENTER, SCRIPPS MERCY

HOSPITAL


Board Certified Specialty: No


Family Health Centers of San
Diego

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498


 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

JONES, SETAREH

Provider ID: 418501

Provider Gender: Female

License Number: A110010

NPI: 1033441316


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No

La Maestra Family Clinic
LA MAESTRA CHC EL CAJON
BROADWAY

 1032 BROADWAY
EL CAJON, CA 92021

 Phone: (619) 795-5983

 After Hours Phone: (619)
795-5983

 Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

PEDIATRICS

JONES, SETAREH

Provider ID: 418501

Provider Gender: Female

License Number: A110010

NPI: 1033441316


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Board Certified Specialty: No

La Maestra Family Clinic
LA MAESTRA CHC EL CAJON
BROADWAY

 1032 BROADWAY
EL CAJON, CA 92021

 Phone: (619) 795-5983

 After Hours Phone: (619)
795-5983

 Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

PEDIATRICS

JONES, SETAREH

Provider ID: 185267

Provider Gender: Female

License Number: A110010

NPI: 1033441316


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No

La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

 165 S 1ST ST
EL CAJON, CA 92019

 Phone: (619) 312-0347

 After Hours Phone: (619)
312-0347

 Website: www.lamaestra.org

Email:


aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

D2. Directorio de atención primaria

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

PEDIATRICS


JONES, SETAREH

Provider ID: 185267

Provider Gender: Female


License Number: A110010


NPI: 1033441316

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC INC

 *165 S 1ST ST*
EL CAJON, CA 92019

 *Phone: (619) 312-0347*

 *After Hours Phone: (619) 312-0347*

 *Website: www.lamaestra.org*


Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

PEDIATRICS

KODSI, ALICIA

Provider ID: 418340

Provider Gender: Female

License Number: A147976

NPI: 1932514353


 *Provider English Spoken: Y*
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

 *525 E MAIN ST*
EL CAJON, CA 92020

 *Phone: (619) 515-2498*

 *After Hours Phone: (619) 515-2498*

 *Website: www.fhcsd.org*

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:30AM-5:30PM

PEDIATRICS

KODSI, ALICIA

Provider ID: 418340

Provider Gender: Female

License Number: A147976

NPI: 1932514353


 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

 *525 E MAIN ST*
EL CAJON, CA 92020

 *Phone: (619) 515-2498*

 *After Hours Phone: (619) 515-2498*


 *Website: www.fhcsd.org*

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:30AM-5:30PM

PEDIATRICS

NAGNUR, PRITI

Provider ID: 206354

Provider Gender: Female

License Number: A170055

NPI: 1316289929


 *Provider English Spoken: Y*
 *Provider Language(s)*


Spoken: Hindi, Kannada
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

CHASE AVENUE FAMILY HEALTH CTRS INC

 *1111 W CHASE AVE*
EL CAJON, CA 92020

 *Phone: (619) 515-2499*

 *After Hours Phone: (619) 515-2499*


 *Website: www.fhcsd.org*

Email: jaquelininc@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

D2. Directorio de atención primaria

PEDIATRICS

NAGNUR, PRITI

Provider ID: 206354

Provider Gender: Female

License Number: A170055

NPI: 1316289929

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi, Kannada


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San Diego

CHASE AVENUE FAMILY
HEALTH CTRS INC

 1111 W CHASE AVE
EL CAJON, CA 92020

 Phone: (619) 515-2499

 After Hours Phone: (619)
515-2499

 Website: www.fhcsd.org


Email: jaquelininc@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

NAIK, SHILPA

Provider ID: 546498

Provider Gender: Female

NPI: 1902156904

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT


HOSPITAL, Sharp Grossmont
Hospital

Board Certified Specialty: No


Rady Childrens Health Network N

SHILPA NAIK

 844 JACKMAN ST
EL CAJON, CA 92020

 Phone: (619) 442-2560

Fax: (619) 442-7836

 After Hours Phone: (619)
442-2560

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

NGUYEN, VI

Provider ID: 546509

Provider Gender: Female

NPI: 1053540534

Provider English Spoken: Y

Cultural Competency: N


Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No

Rady Childrens Health Network

VI T NGUYEN

 844 JACKMAN ST
EL CAJON, CA 92020

 Phone: (619) 442-2560

Fax: (619) 442-7836

 After Hours Phone: (619)
442-2560

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

PINTO, ANITA

Provider ID: 546215

Provider Gender: Female

NPI: 1477663722

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SHARP MARY BIRCH HOSP

FOR WOMEN AND

NEWBORNS, RADY


CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No

Rady Childrens Health Network

ANITA PINTO

 844 JACKMAN ST
EL CAJON, CA 92020

 Phone: (619) 442-2560

Fax: (619) 442-7836

 After Hours Phone: (619)
442-2560

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

D2. Directorio de atención primaria

PEDIATRICS

RODRIGUEZ, ALDO

Provider ID: 569910

Provider Gender: Male

License Number: A134995

NPI: 1508209651

Provider English Spoken: Y

Provider Language(s)
Spoken: Portuguese,
Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH EL

CAJON

 875 EL CAJON BLVD
EL CAJON, CA 92020

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

RODRIGUEZ, ALDO

Provider ID: 569910

Provider Gender: Male

License Number: A134995

NPI: 1508209651

Provider English Spoken: Y

Provider Language(s)
Spoken: Portuguese,

Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH EL

CAJON

 875 EL CAJON BLVD
EL CAJON, CA 92020

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT

ALYAS, ALISIA

Provider ID: 418501

Provider Gender: Female

License Number: PA58466

NPI: 1437768017

Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No


La Maestra Family Clinic

LA MAESTRA CHC EL CAJON

BROADWAY

 1032 BROADWAY
EL CAJON, CA 92021

 Phone: (619) 795-5991

 After Hours Phone: (619)
795-5991

 Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

ALYAS, ALISIA

Provider ID: 418501

Provider Gender: Female

License Number: PA58466

NPI: 1437768017

Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No


La Maestra Family Clinic


LA MAESTRA CHC EL CAJON

BROADWAY

 1032 BROADWAY
EL CAJON, CA 92021

 Phone: (619) 795-5991

 After Hours Phone: (619)
795-5991

 Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

ALYAS, ALISIA

Provider ID: 185267

Provider Gender: Female

License Number: PA58466

NPI: 1437768017

Provider English Spoken: Y

D2. Directorio de atención primaria

Cultural Competency: N
Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

165 S 1ST ST

EL CAJON, CA 92019

Phone: (619) 312-0347

After Hours Phone: (619)
312-0347

Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

ALYAS, ALISIA

Provider ID: 185267

Provider Gender: Female

License Number: PA58466

NPI: 1437768017

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

165 S 1ST ST

EL CAJON, CA 92019

Phone: (619) 312-0347

After Hours Phone: (619)
312-0347

Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

ARMENTA, JORGE

Provider ID: 185267

Provider Gender: Male

License Number: PA13694

NPI: 1346382611

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

165 S 1ST ST

EL CAJON, CA 92019

Phone: (619) 312-0347

After Hours Phone: (619)
312-0347

Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

PHYSICIANS ASSISTANT

ARMENTA, JORGE

Provider ID: 185267

Provider Gender: Male

License Number: PA13694

NPI: 1346382611

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

165 S 1ST ST

EL CAJON, CA 92019

Phone: (619) 312-0347

After Hours Phone: (619)
312-0347

Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

PHYSICIANS ASSISTANT

CONDEZ, ESEL

Provider ID: 418340

Provider Gender: Male

License Number: PA53129

NPI: 1073978680

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San
Diego



FAMILY HLTH CTR SAN


DIEGO-EL CAJON

525 E MAIN ST

EL CAJON, CA 92020

D2. Directorio de atención primaria


 Phone: (619) 515-2498
 After Hours Phone: (619) 515-2498

 Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM

PHYSICIANS ASSISTANT

CONDEZ, EDSEL

Provider ID: 418340

Provider Gender: Male

License Number: PA53129


NPI: 1073978680


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN
DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (619) 515-2498


 After Hours Phone: (619) 515-2498

 Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

SA 8:30AM-5:30PM

PHYSICIANS ASSISTANT



MERCER, KELLY

Provider ID: 418501

Provider Gender: Female

License Number: PA21625

NPI: 1154609790


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic

Cultural Competency: N


Board Certified Specialty: No
La Maestra Family Clinic

LA MAESTRA CHC EL CAJON
BROADWAY

 1032 BROADWAY
EL CAJON, CA 92021

 Phone: (619) 795-5991

 After Hours Phone: (619) 795-5991

 Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

MERCER, KELLY

Provider ID: 418501

Provider Gender: Female

License Number: PA21625


NPI: 1154609790


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic


Cultural Competency: N

Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA CHC EL CAJON
BROADWAY

 1032 BROADWAY
EL CAJON, CA 92021

 Phone: (619) 795-5991

 After Hours Phone: (619) 795-5991

 Website: www.lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

MERCER, KELLY

Provider ID: 185267

Provider Gender: Female

License Number: PA21625

NPI: 1154609790


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic


Cultural Competency: N


Board Certified Specialty: No
La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

 165 S 1ST ST
EL CAJON, CA 92019

 Phone: (619) 312-0347

 After Hours Phone: (619) 312-0347

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

D2. Directorio de atención primaria

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): Provider ID: 206354

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

PHYSICIANS ASSISTANT

MERCER, KELLY

Provider ID: 185267

Provider Gender: Female

License Number: PA21625

NPI: 1154609790

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic


Cultural Competency: N


Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

 165 S 1ST ST
EL CAJON, CA 92019

 Phone: (619) 312-0347

 After Hours Phone: (619)
312-0347

 Website: www.lamaestra.org

Email:


aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

PHYSICIANS ASSISTANT

PATEL, SHREYA

Provider Gender: Female

License Number: PA18719

NPI: 1447468137

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San
Diego

CHASE AVENUE FAMILY
HEALTH CTRS INC

 1111 W CHASE AVE
EL CAJON, CA 92020

 Phone: (619) 515-2499

 After Hours Phone: (619)
515-2499

 Website: www.fhcsd.org

Email: jaquelininc@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

PATEL, SHREYA

Provider ID: 206354

Provider Gender: Female

License Number: PA18719

NPI: 1447468137

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San
Diego

CHASE AVENUE FAMILY
HEALTH CTRS INC

 1111 W CHASE AVE
EL CAJON, CA 92020

 Phone: (619) 515-2499

 After Hours Phone: (619)
515-2499

 Website: www.fhcsd.org

Email: jaquelininc@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

ROSENBLATT, SHERILYN

Provider ID: 569910

Provider Gender: Female

License Number: PA22872

NPI: 1114041621

Provider English Spoken: Y

Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL


Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH EL
CAJON

 875 EL CAJON BLVD
EL CAJON, CA 92020

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

D2. Directorio de atención primaria

American Sign Language (ASL): *Cultural Competency: N*
N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM


PHYSICIANS ASSISTANT **ROSENBLATT, SHERILYN**

Provider ID: 569910
Provider Gender: Female
License Number: PA22872
NPI: 1114041621

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL CAJON

 *875 EL CAJON BLVD*
EL CAJON, CA 92020
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*
 *Website: www.syhealth.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT **TURNER, ERIC**


Provider ID: 206354
Provider Gender: Male
License Number: PA55067
NPI: 1669756128

Provider English Spoken: Y

Board Certified Specialty: No
Family Health Centers of San Diego
CHASE AVENUE FAMILY HEALTH CTRS INC

 *1111 W CHASE AVE*
EL CAJON, CA 92020
 *Phone: (619) 515-2499*
 *After Hours Phone: (619) 515-2499*
 *Website: www.fhcsd.org*
Email: jaquelin@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N





 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT **TURNER, ERIC**


Provider ID: 206354
Provider Gender: Male
License Number: PA55067
NPI: 1669756128

Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
CHASE AVENUE FAMILY HEALTH CTRS INC

 *1111 W CHASE AVE*
EL CAJON, CA 92020
 *Phone: (619) 515-2499*
 *After Hours Phone: (619) 515-2499*
 *Website: www.fhcsd.org*
Email: jaquelin@fhcsd.org

 *1111 W CHASE AVE*
EL CAJON, CA 92020
 *Phone: (619) 515-2499*
 *After Hours Phone: (619) 515-2499*
 *Website: www.fhcsd.org*
Email: jaquelin@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:30AM-5:30PM


PHYSICIANS ASSISTANT **TURNER, SHEREENA**


Provider ID: 418340
Provider Gender: Female
License Number: PA20396
NPI: 1992934988

Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO-EL CAJON

 *525 E MAIN ST*
EL CAJON, CA 92020
 *Phone: (619) 515-2498*
 *After Hours Phone: (619) 515-2498*

 *Website: www.fhcsd.org*
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT **TURNER, SHEREENA**

Provider ID: 418340

D2. Directorio de atención primaria

Provider Gender: Female
License Number: PA20396
NPI: 1992934988
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SAN
DIEGO-EL CAJON
 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619)
515-2498
 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

PODIATRIST

JUAREZ, LETICIA


Provider ID: 418340
Provider Gender: Female
License Number: DPM5661
NPI: 1508393778
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SAN

DIEGO-EL CAJON
 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2400
 After Hours Phone: (619)
515-2400
 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

PODIATRIST

JUAREZ, LETICIA

Provider ID: 418340
Provider Gender: Female
License Number: DPM5661
NPI: 1508393778
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SAN
DIEGO-EL CAJON
 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2400
 After Hours Phone: (619)
515-2400
 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

PODIATRIST

LE, DIANA

Provider ID: 418340
Provider Gender: Female
License Number: DPM5734
NPI: 1184112864
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: ANAHEIM
REGIONAL MEDICAL CTR
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SAN
DIEGO-EL CAJON
 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619)
515-2498
 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM

PODIATRIST


LE, DIANA


Provider ID: 418340
Provider Gender: Female

D2. Directorio de atención primaria

License Number: DPM5734

NPI: 1184112864

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N


Hospital Affiliation: ANAHEIM
REGIONAL MEDICAL CTR


Board Certified Specialty: No
Family Health Centers of San
Diego


FAMILY HLTH CTR SAN

DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (619) 515-2498


 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM

REGISTERED PHYSICAL THERAPIST

CUMMINGS, GEORGE


Provider ID: 418340

Provider Gender: Male

License Number: PT295173

NPI: 1497236384

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

REGISTERED PHYSICAL THERAPIST


CUMMINGS, GEORGE

Provider ID: 418340

Provider Gender: Male

License Number: PT295173

NPI: 1497236384

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San
Diego


FAMILY HLTH CTR SAN

DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)
515-2498

 Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

REGISTERED PHYSICAL THERAPIST

DASCENZO, EMILY

Provider ID: 569910

Provider Gender: Female


License Number: PT40025


NPI: 1952982761


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH EL
CAJON

 875 EL CAJON BLVD
EL CAJON, CA 92020

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

REGISTERED PHYSICAL THERAPIST

DASCENZO, EMILY

Provider ID: 569910

Provider Gender: Female

License Number: PT40025


NPI: 1952982761

 Provider English Spoken: Y

D2. Directorio de atención primaria






Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL
CAJON


 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
Hours: M-F 8:00AM-5:00PM

REGISTERED PHYSICAL **THERAPIST**


GUTIERREZ, JUSTINE

Provider ID: 418340
Provider Gender: Female
License Number: PT292482
NPI: 1851834873
 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HLTH CTR SAN
DIEGO-EL CAJON
 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619)
515-2498
 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
Hours: M-F 8:30AM-5:30PM

REGISTERED PHYSICAL **THERAPIST**

GUTIERREZ, JUSTINE


Provider ID: 418340
Provider Gender: Female
License Number: PT292482
NPI: 1851834873
 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HLTH CTR SAN
DIEGO-EL CAJON




 525 E MAIN ST
EL CAJON, CA 92020
 Phone: (619) 515-2498
 After Hours Phone: (619)
515-2498
 Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
Hours: M-F 8:30AM-5:30PM

REGISTERED PHYSICAL **THERAPIST**

KUIOKA, TROY






Provider ID: 569910
Provider Gender: Male

License Number: PT42665
NPI: 1912640053
 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL
CAJON

 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
Hours: M-F 8:00AM-5:00PM

REGISTERED PHYSICAL **THERAPIST**

KUIOKA, TROY

Provider ID: 569910
Provider Gender: Male
License Number: PT42665
NPI: 1912640053
 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH EL
CAJON
 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org

D2. Directorio de atención primaria

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): NPI: 1043736879

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

REGISTERED PHYSICAL THERAPIST

MIGNEA, DAVID

Provider ID: 418340

Provider Gender: Male

License Number: PT293536


NPI: 1043736879


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300


 Website: www.fhcsd.org
Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

REGISTERED PHYSICAL THERAPIST

MIGNEA, DAVID

Provider ID: 418340

Provider Gender: Male

License Number: PT293536


NPI: 1043736879


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO-EL CAJON

 525 E MAIN ST
EL CAJON, CA 92020

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300


 Website: www.fhcsd.org

Email: janellek@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

ENCINITAS

PEDIATRICS

BRION, SONJA

Provider ID: 386639

Provider Gender: Female

NPI: 1306817317

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL

Board Certified Specialty: No

Rady Childrens Health Network
SONJA K BRION

 499 N EL CAMINO REAL
STE B100

ENCINITAS, CA 92024

 Phone: (760) 436-4511

Fax: (760) 436-5106

 After Hours Phone: (760) 436-4511

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

CLEMENTINO, NANCY

Provider ID: 386643

Provider Gender: Female

NPI: 1619948619

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, RADY


CHILDRENS HOSPITAL SAN

DIEGO, SCRIPPS MEMORIAL


HOSPITAL ENCINITAS

Board Certified Specialty: No


Rady Childrens Health Network
NANCY A CLEMENTINO

 499 N EL CAMINO REAL
STE B100

ENCINITAS, CA 92024

 Phone: (760) 436-4511

Fax: (760) 436-5106

 After Hours Phone: (760)

D2. Directorio de atención primaria

436-4511
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

MENDENHALL, ANNA

Provider ID: 386635
Provider Gender: Female
NPI: 1639140650
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
SCRIPPS MEMORIAL
HOSPITAL
Board Certified Specialty: No
Rady Childrens Health Network
ANNA K MENDENHALL

499 N EL CAMINO REAL
STE B100
ENCINITAS, CA 92024
Phone: (760) 436-4511
Fax: (760) 436-5106
After Hours Phone: (760)
436-4511
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

TERRY, AMANDA

Provider ID: 386739
Provider Gender: Female
NPI: 1861770885
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, SCRIPPS
MEMORIAL HOSPITAL, RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS, UCSF
BENIOFF CHILDREN'S
HOSPITAL OAKLAND
Board Certified Specialty: No
Rady Childrens Health Network
AMANDA R TERRY

499 N EL CAMINO REAL
STE B100
ENCINITAS, CA 92024
Phone: (760) 436-4511
Fax: (760) 436-5106
After Hours Phone: (760)
436-4511

Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

TOLBA, KAMEI

Provider ID: 386624
Provider Gender: Male

NPI: 1144221763
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, RADY CHILDRENS
HOSPITAL SAN DIEGO,
SCRIPPS MEMORIAL
HOSPITAL
Board Certified Specialty: No
Rady Childrens Health Network
KAMEI B TOLBA

499 N EL CAMINO REAL
STE B100
ENCINITAS, CA 92024

Phone: (760) 436-4511
Fax: (760) 436-5106

After Hours Phone: (760)
436-4511

Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

ESCONDIDO

CERTIFIED NURSE

PRACTITIONER




CARNEY, AMY


Provider ID: 206271
Provider Gender: Female
License Number: NP8169
NPI: 1164445227

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR
MEDICAL CENTER


D2. Directorio de atención primaria

Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY

 728 E VALLEY PKWY
ESCONDIDO, CA 92025
 Phone: (760) 737-6900
 After Hours Phone: (760)
737-6900

 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N


 *Accessibility: CONTACT*
PROVIDER
Hours: M-TU 8:00AM-5:00PM
W 9:00AM-5:00PM
TH-F 8:00AM-5:00PM

CERTIFIED NURSE




PRACTITIONER



CARNEY, AMY

Provider ID: 206271
Provider Gender: Female
License Number: NP8169
NPI: 1164445227

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: PALOMAR
MEDICAL CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY

 728 E VALLEY PKWY
ESCONDIDO, CA 92025
 Phone: (760) 737-6900
 After Hours Phone: (760)


737-6900
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
Hours: M-TU 8:00AM-5:00PM
W 9:00AM-5:00PM
TH-F 8:00AM-5:00PM

CERTIFIED NURSE


PRACTITIONER

KAHL, NICHOLAS

Provider ID: 588941
Provider Gender: Male
License Number: NP95006360
NPI: 1821306598

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
ESCONDIDO FAMILY
MEDICINE

 704 E GRAND AVE
ESCONDIDO, CA 92025
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100

 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\120
American Sign Language (ASL):
N


 *Accessibility: CONTACT*
PROVIDER

CERTIFIED NURSE


PRACTITIONER

KAHL, NICHOLAS

Provider ID: 588941
Provider Gender: Male
License Number: NP95006360
NPI: 1821306598

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
ESCONDIDO FAMILY
MEDICINE

 704 E GRAND AVE
ESCONDIDO, CA 92025
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100

 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\120
American Sign Language (ASL):
N


 *Accessibility: CONTACT*
PROVIDER

CERTIFIED NURSE

PRACTITIONER

MITCHELL, CATHY

Provider ID: 424775
Provider Gender: Female
License Number: NP4799
NPI: 1356365365

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE PEDIATRICS
AND PRENATAL

 426 N DATE ST
ESCONDIDO, CA 92025


D2. Directorio de atención primaria






 Phone: (760) 690-5900
 After Hours Phone: (760) 690-5900
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

MITCHELL, CATHY



Provider ID: 424775
Provider Gender: Female
License Number: NP4799
NPI: 1356365365
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE PEDIATRICS
AND PRENATAL






 426 N DATE ST
ESCONDIDO, CA 92025
 Phone: (760) 690-5900
 After Hours Phone: (760) 690-5900
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

TODD, MIKAYLA



Provider ID: 588941
Provider Gender: Female
License Number: NP95005999
NPI: 1316478092
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
ESCONDIDO FAMILY
MEDICINE

 704 E GRAND AVE
ESCONDIDO, CA 92025
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\120
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER






CERTIFIED NURSE

PRACTITIONER

TODD, MIKAYLA


Provider ID: 588941
Provider Gender: Female
License Number: NP95005999
NPI: 1316478092
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP






SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE

 704 E GRAND AVE
ESCONDIDO, CA 92025
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\120
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

CHIROPRACTOR

ROBINSON, DEAN

Provider ID: 206270
Provider Gender: Male
License Number: DC12036
NPI: 1851320337
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE ESCONDIDO

 460 N ELM ST
ESCONDIDO, CA 92025
 Phone: (760) 520-8100
 After Hours Phone: (760) 520-8100
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

CHIROPRACTOR

D2. Directorio de atención primaria

ROBINSON, DEAN

Provider ID: 206270

Provider Gender: Male

License Number: DC12036

NPI: 1851320337


Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP


NEIGHBORHOOD

HEALTHCARE ESCONDIDO

 460 N ELM ST
ESCONDIDO, CA 92025


 Phone: (760) 520-8100

 After Hours Phone: (760)
520-8100

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

ZECHA, RONALD

Provider ID: 206270

Provider Gender: Male

License Number: DC28605

NPI: 1427252121

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP


NEIGHBORHOOD

HEALTHCARE ESCONDIDO

 460 N ELM ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8100

 After Hours Phone: (760)
520-8100

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

CHIROPRACTOR

ZECHA, RONALD

Provider ID: 206270

Provider Gender: Male

License Number: DC28605

NPI: 1427252121

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE ESCONDIDO

 460 N ELM ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8100

 After Hours Phone: (760)
520-8100

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

FAMILY PRACTICE

ARRIETA, NOEMI

Provider ID: 588941

Provider Gender: Female

License Number: 20A11153

NPI: 1912223496

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL


Board Certified Specialty: No
IHP of Southern Cal-PHP


SAN YSIDRO HEALTH


ESCONDIDO FAMILY

MEDICINE

 704 E GRAND AVE
ESCONDIDO, CA 92025

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: N/A
Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

ARRIETA, NOEMI

Provider ID: 588941

Provider Gender: Female

License Number: 20A11153

NPI: 1912223496

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish



Cultural Competency: N


Hospital Affiliation: SCRIPPS


D2. Directorio de atención primaria

MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
ESCONDIDO FAMILY
MEDICINE

 704 E GRAND AVE
ESCONDIDO, CA 92025
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100


 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\120
American Sign Language (ASL):
N




 Accessibility: CONTACT
PROVIDER


FAMILY PRACTICE


AVILA, MICHAEL

Provider ID: 206270
Provider Gender: Male
License Number: A159727
NPI: 1962936450

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE ESCONDIDO

 460 N ELM ST
ESCONDIDO, CA 92025
 Phone: (760) 520-8100
 After Hours Phone: (760)
520-8100


 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N




 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM


FAMILY PRACTICE


AVILA, MICHAEL

Provider ID: 206270
Provider Gender: Male
License Number: A159727
NPI: 1962936450

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE ESCONDIDO


 460 N ELM ST
ESCONDIDO, CA 92025
 Phone: (760) 520-8100
 After Hours Phone: (760)
520-8100

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM




FAMILY PRACTICE


CASTANER, ZALYA


Provider ID: 206271
Provider Gender: Female
License Number: A139490
NPI: 1487072179
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR

MEDICAL CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY

 728 E VALLEY PKWY
ESCONDIDO, CA 92025
 Phone: (760) 737-6900
 After Hours Phone: (760)
737-6900


 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Hours: M-W 8:00AM-8:00PM
TH-F 8:00AM-5:00PM




FAMILY PRACTICE

CASTANER, ZALYA



Provider ID: 206271
Provider Gender: Female
License Number: A139490
NPI: 1487072179

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR
MEDICAL CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY


 728 E VALLEY PKWY
ESCONDIDO, CA 92025
 Phone: (760) 737-6900
 After Hours Phone: (760)
737-6900

D2. Directorio de atención primaria






 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-W 8:00AM-8:00PM
TH-F 8:00AM-5:00PM

FAMILY PRACTICE

CASTANER, ZALYA

Provider ID: 206270
Provider Gender: Female
License Number: A139490
NPI: 1487072179
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR
MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD


HEALTHCARE ESCONDIDO






 460 N ELM ST
ESCONDIDO, CA 92025
 Phone: (760) 520-8100
 After Hours Phone: (760)
520-8100
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

CASTANER, ZALYA


Provider ID: 206270
Provider Gender: Female

License Number: A139490
NPI: 1487072179
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR
MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE ESCONDIDO



 460 N ELM ST
ESCONDIDO, CA 92025
 Phone: (760) 520-8100
 After Hours Phone: (760)
520-8100
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

COBIAN, VANESSA


Provider ID: 206271
Provider Gender: Female
License Number: A145349
NPI: 1134513039
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY






 728 E VALLEY PKWY
ESCONDIDO, CA 92025
 Phone: (760) 737-6900
 After Hours Phone: (760)
737-6900

 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-W 8:00AM-8:00PM
TH-F 8:00AM-5:00PM

FAMILY PRACTICE

COBIAN, VANESSA

Provider ID: 206271
Provider Gender: Female
License Number: A145349
NPI: 1134513039
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY

 728 E VALLEY PKWY
ESCONDIDO, CA 92025
 Phone: (760) 737-6900
 After Hours Phone: (760)
737-6900
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-W 8:00AM-8:00PM
TH-F 8:00AM-5:00PM

FAMILY PRACTICE

COX, VICTORIA

Provider ID: 588941

D2. Directorio de atención primaria

Provider Gender: Female

License Number: C171064

NPI: 1093087819

 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP


SAN YSIDRO HEALTH

ESCONDIDO FAMILY

MEDICINE

 704 E GRAND AVE
ESCONDIDO, CA 92025

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

COX, VICTORIA

Provider ID: 588941

Provider Gender: Female

License Number: C171064

NPI: 1093087819

 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP


SAN YSIDRO HEALTH

ESCONDIDO FAMILY

MEDICINE

 704 E GRAND AVE
ESCONDIDO, CA 92025

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE



FERRAILOLO, NATALIE

Provider ID: 206270

Provider Gender: Female

License Number: A152372

NPI: 1306290143

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP


NEIGHBORHOOD

HEALTHCARE ESCONDIDO

 460 N ELM ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8100

 After Hours Phone: (760)
520-8100

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

FAMILY PRACTICE

FERRAILOLO, NATALIE

Provider ID: 206270

Provider Gender: Female

License Number: A152372

NPI: 1306290143

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE ESCONDIDO

 460 N ELM ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8100

 After Hours Phone: (760)
520-8100

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

FAMILY PRACTICE

HAMILTON, LISA MARIE

Provider ID: 652372

Provider Gender: Female

License Number: 20A14772

NPI: 1235576059


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San

Diego


ESCONDIDO FAMILY HEALTH
CENTER

 128 N BROADWAY
ESCONDIDO, CA 92025

 Phone: (760) 546-2858

D2. Directorio de atención primaria

 After Hours Phone: (760) 546-2858

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): Cultural Competency: N

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

HAMILTON, LISA MARIE

Provider ID: 652372

Provider Gender: Female

License Number: 20A14772


NPI: 1235576059


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

ESCONDIDO FAMILY HEALTH CENTER

 128 N BROADWAY
ESCONDIDO, CA 92025

 Phone: (760) 546-2858


 After Hours Phone: (760) 546-2858

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): Cultural Competency: N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


KAUR, JATINDER


Provider ID: 206270

Provider Gender: Female

License Number: A120771

NPI: 1912141391

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hindi, Punjabi,
Urdu

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE ESCONDIDO

 460 N ELM ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8100

 After Hours Phone: (760) 520-8100

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

FAMILY PRACTICE


KAUR, JATINDER


Provider ID: 206270

Provider Gender: Female

License Number: A120771

NPI: 1912141391

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hindi, Punjabi,
Urdu

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE ESCONDIDO

 460 N ELM ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8100

 After Hours Phone: (760) 520-8100

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

FAMILY PRACTICE

LAI, AMARA

Provider ID: 206271

Provider Gender: Female

License Number: A120348

NPI: 1790912855

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR MEDICAL CENTER

Board Certified Specialty: No


IHP of Southern Cal-PHP


NEIGHBORHOOD

HEALTHCARE VALLEY

PARKWAY

 728 E VALLEY PKWY
ESCONDIDO, CA 92025

 Phone: (760) 737-6900

 After Hours Phone: (760) 737-6900

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT

D2. Directorio de atención primaria

PROVIDER
Hours: M-TU 8:00AM-5:00PM
W 9:00AM-5:00PM
TH-F 8:00AM-5:00PM

FAMILY PRACTICE

LAI, AMARA

Provider ID: 206271
Provider Gender: Female
License Number: A120348
NPI: 1790912855
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR
MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY

728 E VALLEY PKWY
ESCONDIDO, CA 92025
 Phone: (760) 737-6900
 After Hours Phone: (760)
737-6900
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-TU 8:00AM-5:00PM
W 9:00AM-5:00PM
TH-F 8:00AM-5:00PM

FAMILY PRACTICE

MATSHE, ZENZIWE

Provider ID: 665448

Provider Gender: Female
NPI: 1285256073
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Community Care IPA LLC
ZENZIWE MATSHE
 460 N ELM ST
ESCONDIDO, CA 92025
 Phone: (760) 520-8100
Fax: (760) 466-1373
 After Hours Phone: (760)
520-8100
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

MCHENRY, KATHRYN

Provider ID: 206270
Provider Gender: Female
License Number: 20A14292
NPI: 1326458373
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE ESCONDIDO
 460 N ELM ST
ESCONDIDO, CA 92025
 Phone: (760) 520-8100
 After Hours Phone: (760)
520-8100
 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

FAMILY PRACTICE

MCHENRY, KATHRYN

Provider ID: 206270
Provider Gender: Female
License Number: 20A14292
NPI: 1326458373
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE ESCONDIDO
 460 N ELM ST
ESCONDIDO, CA 92025
 Phone: (760) 520-8100
 After Hours Phone: (760)
520-8100
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

FAMILY PRACTICE

NAKAMURA, MELANIE

Provider ID: 206270

D2. Directorio de atención primaria

Provider Gender: Female

License Number: A107557

NPI: 1104022672

☐ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE ESCONDIDO

📍 460 N ELM ST

ESCONDIDO, CA 92025

☎ Phone: (760) 520-8100

🕒 After Hours Phone: (760)
520-8100

🌐 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-0:00PM

FAMILY PRACTICE

NAKAMURA, MELANIE

Provider ID: 206270

Provider Gender: Female

License Number: A107557

NPI: 1104022672

☐ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE ESCONDIDO

📍 460 N ELM ST

ESCONDIDO, CA 92025

☎ Phone: (760) 520-8100

🕒 After Hours Phone: (760)
520-8100

🌐 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-0:00PM

FAMILY PRACTICE

PATEL, JITENBHAI

Provider ID: 206270

Provider Gender: Male

License Number: A94128

NPI: 1902921406

☐ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE ESCONDIDO

📍 460 N ELM ST

ESCONDIDO, CA 92025

☎ Phone: (760) 520-8100

🕒 After Hours Phone: (760)
520-8100

🌐 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

PATEL, JITENBHAI

Provider ID: 206271

Provider Gender: Male

License Number: A94128

NPI: 1902921406

☐ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE VALLEY

PARKWAY

📍 728 E VALLEY PKWY

ESCONDIDO, CA 92025

☎ Phone: (760) 737-6900

🕒 After Hours Phone: (760)
737-6900

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

PATEL, JITENBHAI

Provider ID: 206270

Provider Gender: Male

License Number: A94128

NPI: 1902921406

☐ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE ESCONDIDO

📍 460 N ELM ST

ESCONDIDO, CA 92025

☎ Phone: (760) 520-8100

🕒 After Hours Phone: (760)
520-8100

🌐 Website: www.ihpsocal.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

D2. Directorio de atención primaria

N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

PATEL, JITENBHAI

Provider ID: 206271

Provider Gender: Male

License Number: A94128


NPI: 1902921406


Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY

 *728 E VALLEY PKWY*
ESCONDIDO, CA 92025

 *Phone: (760) 737-6900*

 *After Hours Phone: (760)*
737-6900

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

RAO, USHA

Provider ID: 588941

Provider Gender: Female

License Number: A148750

NPI: 1184019911

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi, Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS


MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH
ESCONDIDO FAMILY
MEDICINE

 *704 E GRAND AVE*
ESCONDIDO, CA 92025

 *Phone: (619) 662-4100*

 *After Hours Phone: (619)*
662-4100

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

RAO, USHA

Provider ID: 588941

Provider Gender: Female

License Number: A148750

NPI: 1184019911

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi, Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS


MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH
ESCONDIDO FAMILY
MEDICINE

 *704 E GRAND AVE*
ESCONDIDO, CA 92025

 *Phone: (619) 662-4100*

 *After Hours Phone: (619)*
662-4100

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

RASHCOVSKY SCHIFF, KARIN

Provider ID: 206270

Provider Gender: Female

License Number: A82173

NPI: 1699706333

Provider English Spoken: Y

Provider Language(s)
Spoken: French


Cultural Competency: N


Hospital Affiliation: PALOMAR
MEDICAL CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP

NEIGHBORHOOD
HEALTHCARE ESCONDIDO

 *460 N ELM ST*
ESCONDIDO, CA 92025

 *Phone: (760) 520-8100*

 *After Hours Phone: (760)*
520-8100

 *Website: www.ihpsocal.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE






RASHCOVSKY SCHIFF, KARIN

Provider ID: 206270


Provider Gender: Female


D2. Directorio de atención primaria

License Number: A82173
NPI: 1699706333
 Provider English Spoken: Y
 Provider Language(s)
Spoken: French
Cultural Competency: N
Hospital Affiliation: PALOMAR
MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE ESCONDIDO

 460 N ELM ST
ESCONDIDO, CA 92025
 Phone: (760) 520-8100
 After Hours Phone: (760)
520-8100
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER



FAMILY PRACTICE **RODARTE, GABRIEL**

Provider ID: 206266
Provider Gender: Male
License Number: A87906
NPI: 1184649212
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE PEDS AND
PRENATAL
 425 N DATE ST

ESCONDIDO, CA 92025
 Phone: (760) 520-8340
 After Hours Phone: (760)
520-8340
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM






FAMILY PRACTICE **RODARTE, GABRIEL**

Provider ID: 206266
Provider Gender: Male
License Number: A87906
NPI: 1184649212
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE PEDS AND
PRENATAL

 425 N DATE ST
ESCONDIDO, CA 92025
 Phone: (760) 520-8340
 After Hours Phone: (760)
520-8340
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE **SANDHU, BASANT**

Provider ID: 206271
Provider Gender: Male
License Number: A140398
NPI: 1265795744
 Provider English Spoken: Y
 Provider Language(s)
Spoken: German, Hindi,
Punjabi, Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY




 728 E VALLEY PKWY
ESCONDIDO, CA 92025
 Phone: (760) 737-6900
 After Hours Phone: (760)
737-6900
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-W 8:00AM-8:00PM
TH-F 8:00AM-5:00PM


FAMILY PRACTICE **SANDHU, BASANT**

Provider ID: 206271
Provider Gender: Male
License Number: A140398
NPI: 1265795744
 Provider English Spoken: Y
 Provider Language(s)
Spoken: German, Hindi,
Punjabi, Spanish

D2. Directorio de atención primaria


Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY

 728 E VALLEY PKWY
ESCONDIDO, CA 92025
 Phone: (760) 737-6900
 After Hours Phone: (760)
737-6900

 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-W 8:00AM-8:00PM
TH-F 8:00AM-5:00PM

FAMILY PRACTICE


SCHULTZ, JAMES


Provider ID: 206271

Provider Gender: Male

License Number: G61829

NPI: 1356376164

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Farsi, Greek,
Spanish


Cultural Competency: N


Hospital Affiliation:

SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
PALOMAR MEDICAL CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD

HEALTHCARE VALLEY
PARKWAY

 728 E VALLEY PKWY
ESCONDIDO, CA 92025
 Phone: (760) 737-6900
 After Hours Phone: (760)
737-6900

 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE


SCHULTZ, JAMES


Provider ID: 206270

Provider Gender: Male

License Number: G61829

NPI: 1356376164

 *Provider English Spoken: Y*




 *Provider Language(s)*
Spoken: Farsi, Greek,
Spanish

Cultural Competency: N

Hospital Affiliation:

SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
PALOMAR MEDICAL CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD

HEALTHCARE ESCONDIDO
 460 N ELM ST
ESCONDIDO, CA 92025
 Phone: (760) 520-8100
 After Hours Phone: (760)
520-8100

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

SCHULTZ, JAMES


Provider ID: 206271

Provider Gender: Male

License Number: G61829

NPI: 1356376164

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Farsi, Greek,
Spanish




Cultural Competency: N


Hospital Affiliation:

SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
PALOMAR MEDICAL CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD

HEALTHCARE VALLEY
PARKWAY

 728 E VALLEY PKWY
ESCONDIDO, CA 92025
 Phone: (760) 737-6900
 After Hours Phone: (760)
737-6900

 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

D2. Directorio de atención primaria

FAMILY PRACTICE


SCHULTZ, JAMES


Provider ID: 206270

Provider Gender: Male

License Number: G61829

NPI: 1356376164

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi, Greek,
Spanish

Cultural Competency: N

Hospital Affiliation:

SOUTHWEST HEALTHCARE

INLAND VALLEY HOSPITAL,

SOUTHWEST HEALTHCARE

RANCHO SPRINGS HOSPITAL,

PALOMAR MEDICAL CENTER


Board Certified Specialty: No


IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE ESCONDIDO

 460 N ELM ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8100

 After Hours Phone: (760)
520-8100

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


TANTOD, KULIN

Provider ID: 206270

Provider Gender: Male

License Number: A109655

NPI: 1902058928

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE ESCONDIDO

 460 N ELM ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8100

 After Hours Phone: (760)
520-8100

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE


TANTOD, KULIN

Provider ID: 206270

Provider Gender: Male

License Number: A109655

NPI: 1902058928

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE ESCONDIDO

 460 N ELM ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8100

 After Hours Phone: (760)
520-8100

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

THOMPSON, CHERYL

Provider ID: 206270

Provider Gender: Female

License Number: A102687

NPI: 1548429863

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE ESCONDIDO

 460 N ELM ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8100

 After Hours Phone: (760)
520-8100

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-0:00PM

FAMILY PRACTICE

THOMPSON, CHERYL


Provider ID: 206270

Provider Gender: Female

D2. Directorio de atención primaria

License Number: A102687

NPI: 1548429863

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


NEIGHBORHOOD

HEALTHCARE ESCONDIDO

 460 N ELM ST

ESCONDIDO, CA 92025

 Phone: (760) 520-8100

 After Hours Phone: (760)
520-8100

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM


SA 8:00AM-0:00PM

FQHC

ESCONDIDO FAMILY HEALTH CENTER,

Provider ID: 652372

NPI: 1417640491

 Provider English Spoken: Y


Cultural Competency: N


Family Health Centers of San
Diego

ESCONDIDO FAMILY HEALTH
CENTER

 128 N BROADWAY

ESCONDIDO, CA 92025

 Phone: (619) 515-2474

 After Hours Phone: (619)
515-2474

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER

FQHC

ESCONDIDO FAMILY HEALTH CENTER,

Provider ID: 652372

NPI: 1417640491

 Provider English Spoken: Y


Cultural Competency: N


Family Health Centers of San
Diego

ESCONDIDO FAMILY HEALTH
CENTER

 128 N BROADWAY

ESCONDIDO, CA 92025

 Phone: (619) 515-2474

 After Hours Phone: (619)
515-2474

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER

FQHC

NEIGHBORHOOD HEALTHCARE ESCONDIDO,

Provider ID: 206270

NPI: 1598703647

 Provider English Spoken: Y

Cultural Competency: N


IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE ESCONDIDO

 460 N ELM ST

ESCONDIDO, CA 92025

 Phone: (760) 520-8100

Fax: (360) 466-2745

 After Hours Phone: (760)
520-8100


 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC

NEIGHBORHOOD HEALTHCARE ESCONDIDO,

Provider ID: 206270

NPI: 1598703647

 Provider English Spoken: Y

Cultural Competency: N


IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE ESCONDIDO

 460 N ELM ST

ESCONDIDO, CA 92025

 Phone: (760) 520-8100

Fax: (360) 466-2745

 After Hours Phone: (760)
520-8100


 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC

NEIGHBORHOOD

D2. Directorio de atención primaria

HEALTHCARE PEDIATRICS AND PRENATAL,

Provider ID: 424775

NPI: 1437335353

☐ Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE PEDIATRICS
AND PRENATAL

📍 426 N DATE ST
ESCONDIDO, CA 92025

☎ Phone: (760) 690-5900

Fax: (360) 462-2747

🕒 After Hours Phone: (760)
690-5900

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC

NEIGHBORHOOD

HEALTHCARE PEDIATRICS AND PRENATAL,

Provider ID: 424775

NPI: 1437335353

☐ Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE PEDIATRICS
AND PRENATAL

📍 426 N DATE ST
ESCONDIDO, CA 92025

☎ Phone: (760) 690-5900

Fax: (360) 462-2747

🕒 After Hours Phone: (760)
690-5900

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC

NEIGHBORHOOD

HEALTHCARE PEDIATRICS AND PRENATAL,

Provider ID: 206266

NPI: 1265618185

☐ Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE PEDIATRICS
AND PRENATAL

📍 425 N DATE ST
ESCONDIDO, CA 92025

☎ Phone: (760) 520-8340

Fax: (360) 462-2752

🕒 After Hours Phone: (760)
520-8340

🌐 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC

NEIGHBORHOOD

HEALTHCARE PEDIATRICS AND PRENATAL,

PRENATAL,

Provider ID: 206266

NPI: 1265618185

☐ Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE PEDIATRICS
AND PRENATAL

📍 425 N DATE ST
ESCONDIDO, CA 92025

☎ Phone: (760) 520-8340

Fax: (360) 462-2752

🕒 After Hours Phone: (760)
520-8340

🌐 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC

NEIGHBORHOOD

HEALTHCARE VALLEY

PARKWAY,

Provider ID: 206271

NPI: 1720264641

☐ Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE VALLEY
PARKWAY



📍 728 E VALLEY PKWY
ESCONDIDO, CA 92025

☎ Phone: (760) 737-6900

Fax: (360) 462-2748


🕒 After Hours Phone: (760)

D2. Directorio de atención primaria


737-6900
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-TU 8:00AM-5:00PM
W 9:00AM-5:00PM
TH-F 8:00AM-5:00PM

FQHC

NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY,


Provider ID: 206271
NPI: 1720264641
 Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY

 728 E VALLEY PKWY
ESCONDIDO, CA 92025

 Phone: (760) 737-6900

Fax: (360) 462-2748

 After Hours Phone: (760)
737-6900

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TU 8:00AM-5:00PM

W 9:00AM-5:00PM


TH-F 8:00AM-5:00PM

FQHC

SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE,

Provider ID: 588941

NPI: 1801438239

 Provider English Spoken: Y

Cultural Competency: N


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

ESCONDIDO FAMILY

MEDICINE

 704 E GRAND AVE
ESCONDIDO, CA 92025

 Phone: (619) 662-4100

Fax: (760) 745-7847

 After Hours Phone: (619)
662-4100

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

FQHC

SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE,

Provider ID: 588941

NPI: 1801438239

 Provider English Spoken: Y

Cultural Competency: N


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH


ESCONDIDO FAMILY

MEDICINE

 704 E GRAND AVE
ESCONDIDO, CA 92025

 Phone: (619) 662-4100

Fax: (760) 745-7847


 After Hours Phone: (619)
662-4100

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

AGUERO, AMETHYST

Provider ID: 652372

Provider Gender: Female

License Number: 20A19473

NPI: 1568021913

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

ESCONDIDO FAMILY HEALTH
CENTER

 128 N BROADWAY
ESCONDIDO, CA 92025

 Phone: (760) 546-2858

 After Hours Phone: (760)
546-2858

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

AGUERO, AMETHYST

D2. Directorio de atención primaria

Provider ID: 652372

Provider Gender: Female

License Number: 20A19473

NPI: 1568021913

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego

ESCONDIDO FAMILY HEALTH CENTER

 128 N BROADWAY

ESCONDIDO, CA 92025

 Phone: (760) 546-2858

 After Hours Phone: (760) 546-2858


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

CARRERA, JORGE

Provider ID: 588941

Provider Gender: Male

License Number: G58033

NPI: 1184728586

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS

Board Certified Specialty: No

IHP of Southern Cal-PHP


SAN YSIDRO HEALTH


ESCONDIDO FAMILY

MEDICINE

 704 E GRAND AVE

ESCONDIDO, CA 92025

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

CARRERA, JORGE

Provider ID: 588941

Provider Gender: Male

License Number: G58033

NPI: 1184728586

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS

Board Certified Specialty: No

IHP of Southern Cal-PHP


SAN YSIDRO HEALTH


ESCONDIDO FAMILY

MEDICINE

 704 E GRAND AVE

ESCONDIDO, CA 92025

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

CHEN, MARGARET

Provider ID: 206270

Provider Gender: Female

License Number: A61751

NPI: 1659305084

Provider English Spoken: Y

Provider Language(s)

Spoken: Greek, Spanish

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


NEIGHBORHOOD

HEALTHCARE ESCONDIDO

 460 N ELM ST

ESCONDIDO, CA 92025

 Phone: (760) 520-8100

 After Hours Phone: (760) 520-8100

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-0:00PM

INTERNAL MEDICINE


CHEN, MARGARET


Provider ID: 235296

Provider Gender: Female

D2. Directorio de atención primaria

NPI: 1659305084

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Greek, Spanish


Cultural Competency: N

Board Certified Specialty: No

Community Care IPA LLC

MARGARET K CHEN

 460 N ELM ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8100

Fax: (360) 462-2745

 After Hours Phone: (760)
520-8100

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-0:00PM

INTERNAL MEDICINE


CHEN, MARGARET


Provider ID: 206270

Provider Gender: Female

License Number: A61751

NPI: 1659305084

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Greek, Spanish

Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE ESCONDIDO

 460 N ELM ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8100

 After Hours Phone: (760)

520-8100

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-0:00PM

INTERNAL MEDICINE


VETTICADEN, SANTOSH

Provider ID: 206270

Provider Gender: Male

License Number: C53062

NPI: 1679102461

 Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP


NEIGHBORHOOD

HEALTHCARE ESCONDIDO

 460 N ELM ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8100


 After Hours Phone: (760)
520-8100

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-0:00PM

INTERNAL MEDICINE

VETTICADEN, SANTOSH

Provider ID: 206270

Provider Gender: Male

License Number: C53062

NPI: 1679102461

 Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE ESCONDIDO

 460 N ELM ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8100


 After Hours Phone: (760)
520-8100

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-0:00PM

PEDIATRICS

AGUILAR, EDITA


Provider ID: 424775

Provider Gender: Female

License Number: A56054

NPI: 1467407411

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP


NEIGHBORHOOD


HEALTHCARE PEDIATRICS


AND PRENATAL

 426 N DATE ST
ESCONDIDO, CA 92025

D2. Directorio de atención primaria

 Phone: (760) 690-5900


 After Hours Phone: (760) 690-5900

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

PEDIATRICS


AGUILAR, EDITA


Provider ID: 206266

Provider Gender: Female

License Number: A56054

NPI: 1467407411

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


NEIGHBORHOOD

HEALTHCARE PEDS AND

PRENATAL

 425 N DATE ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8340


 After Hours Phone: (760) 520-8340

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

PEDIATRICS


AGUILAR, EDITA


Provider ID: 206266

Provider Gender: Female

License Number: A56054

NPI: 1467407411

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


NEIGHBORHOOD

HEALTHCARE PEDS AND

PRENATAL

 425 N DATE ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8340

 After Hours Phone: (760) 520-8340

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

PEDIATRICS


AGUILAR, EDITA


Provider ID: 424775

Provider Gender: Female

License Number: A56054

NPI: 1467407411

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP


NEIGHBORHOOD


HEALTHCARE PEDIATRICS

AND PRENATAL

 426 N DATE ST

ESCONDIDO, CA 92025

 Phone: (760) 690-5900

 After Hours Phone: (760) 690-5900

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

PEDIATRICS

ALDANA, NANCY


Provider ID: 424775

Provider Gender: Female

License Number: A62467

NPI: 1558371963

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, RADY

CHILDRENS HOSPITAL SAN

DIEGO, SCRIPPS MEMORIAL

HOSPITAL ENCINITAS

Board Certified Specialty: No


IHP of Southern Cal-PHP


NEIGHBORHOOD

HEALTHCARE PEDIATRICS

AND PRENATAL

 426 N DATE ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8340

 After Hours Phone: (760) 520-8340

 Website: N/A


Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL):

D2. Directorio de atención primaria

N

 **Accessibility:** CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM




PEDIATRICS


ALDANA, NANCY

Provider ID: 424775
Provider Gender: Female
License Number: A62467
NPI: 1558371963


Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N

Hospital Affiliation: TRI CITY MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Board Certified Specialty: No IHP of Southern Cal-PHP NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL

 426 N DATE ST
ESCONDIDO, CA 92025
 **Phone:** (760) 520-8340
 **After Hours Phone:** (760) 520-8340

 **Website:** N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL):

N

 **Accessibility:** CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM




PEDIATRICS

CHOW, BYRON

Provider ID: 206270
Provider Gender: Male
License Number: A78116
NPI: 1619907607

Provider English Spoken: Y
 Provider Language(s) Spoken: French, Spanish
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER
Board Certified Specialty: No IHP of Southern Cal-PHP NEIGHBORHOOD HEALTHCARE ESCONDIDO

 460 N ELM ST
ESCONDIDO, CA 92025
 **Phone:** (760) 520-8100
 **After Hours Phone:** (760) 520-8100

 **Website:** www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

N
 **Accessibility:** CONTACT PROVIDER

PEDIATRICS

CHOW, BYRON




Provider ID: 206270
Provider Gender: Male
License Number: A78116
NPI: 1619907607


Provider English Spoken: Y
 Provider Language(s) Spoken: French, Spanish
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN

DIEGO, PALOMAR MEDICAL CENTER

Board Certified Specialty: No IHP of Southern Cal-PHP NEIGHBORHOOD HEALTHCARE ESCONDIDO

 460 N ELM ST
ESCONDIDO, CA 92025
 **Phone:** (760) 520-8100
 **After Hours Phone:** (760) 520-8100

 **Website:** www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

N

 **Accessibility:** CONTACT PROVIDER

PEDIATRICS



COHEN, CARA

Provider ID: 661879
Provider Gender: Female
NPI: 1215021274

Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N

Hospital Affiliation: PALOMAR HEALTH, RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND

Board Certified Specialty: No Rady Childrens Health Network CARA E COHEN

 625 CITRACADO PKWY STE 100
ESCONDIDO, CA 92025
 **Phone:** (760) 746-2641

D2. Directorio de atención primaria

Fax: (760) 740-2178

☎ After Hours Phone: (760) 746-2641

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

COULLAHAN, JESSICA

Provider ID: 661887

Provider Gender: Female

NPI: 1750579108

☐ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER

Board Certified Specialty: No
Rady Childrens Health Network
JESSICA M COULLAHAN

📍 625 CITRACADO PKWY STE 100

ESCONDIDO, CA 92025

☎ Phone: (760) 746-2641

Fax: (760) 740-2178

☎ After Hours Phone: (760) 746-2641

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:30AM-0:00PM

PEDIATRICS

CURET, ZULMA

Provider ID: 206270

Provider Gender: Female

License Number: A119661

NPI: 1841561107

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD

HEALTHCARE ESCONDIDO

📍 460 N ELM ST
ESCONDIDO, CA 92025

☎ Phone: (760) 520-8100

☎ After Hours Phone: (760) 520-8100

🌐 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

PEDIATRICS

CURET, ZULMA

Provider ID: 206270

Provider Gender: Female

License Number: A119661

NPI: 1841561107

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD

HEALTHCARE ESCONDIDO

📍 460 N ELM ST
ESCONDIDO, CA 92025

☎ Phone: (760) 520-8100

☎ After Hours Phone: (760) 520-8100

🌐 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

PEDIATRICS

DOSHI, NEELIMA

Provider ID: 640252

Provider Gender: Female

NPI: 1417921578

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Hindi, Spanish

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified Specialty: No
Community Care IPA LLC
NEELIMA G DOSHI



📍 426 N DATE ST
ESCONDIDO, CA 92025

☎ Phone: (760) 520-8340

Fax: (360) 462-2752


☎ After Hours Phone: (760)

D2. Directorio de atención primaria

520-8340
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER








PEDIATRICS

DOSHI, NEELIMA

Provider ID: 424775
Provider Gender: Female
License Number: A67626
NPI: 1417921578
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Hindi, Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE PEDIATRICS
AND PRENATAL
 426 N DATE ST
ESCONDIDO, CA 92025
 Phone: (760) 690-5900
 After Hours Phone: (760)
690-5900
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER



PEDIATRICS





DOSHI, NEELIMA

Provider ID: 424775
Provider Gender: Female
License Number: A67626
NPI: 1417921578
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Hindi, Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE PEDIATRICS
AND PRENATAL
 426 N DATE ST
ESCONDIDO, CA 92025
 Phone: (760) 690-5900
 After Hours Phone: (760)
690-5900
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PEDIATRICS






SONG, JOYCE

Provider ID: 661892
Provider Gender: Female
NPI: 1417510694
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Rady Childrens Health Network
JOYCE Y SONG
 625 CITRACADO PKWY STE

100
ESCONDIDO, CA 92025
 Phone: (760) 746-2641
Fax: (760) 740-2178
 After Hours Phone: (760)
746-2641
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

STRAZICICH, KARLA

Provider ID: 206270
Provider Gender: Female
License Number: A45413
NPI: 1134154958
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR
MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE ESCONDIDO
 460 N ELM ST
ESCONDIDO, CA 92025
 Phone: (760) 520-8100
 After Hours Phone: (760)
520-8100
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT

D2. Directorio de atención primaria

<p><i>PROVIDER</i></p> <p><u>PEDIATRICS</u></p> <p>STRAZICICH, KARLA</p> <p>Provider ID: 206270</p> <p>Provider Gender: Female</p> <p>License Number: A45413</p> <p>NPI: 1134154958</p> <p><input type="checkbox"/> Provider English Spoken: Y</p> <p><input type="checkbox"/> Provider Language(s) Spoken: Spanish</p> <p>Cultural Competency: N</p> <p>Hospital Affiliation: PALOMAR MEDICAL CENTER</p> <p>Board Certified Specialty: No</p> <p>IHP of Southern Cal-PHP NEIGHBORHOOD HEALTHCARE ESCONDIDO</p> <p><input type="checkbox"/> 460 N ELM ST ESCONDIDO, CA 92025</p> <p><input type="checkbox"/> Phone: (760) 520-8100</p> <p><input type="checkbox"/> After Hours Phone: (760) 520-8100</p> <p><input type="checkbox"/> Website: www.ihpsocal.org</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\150</p> <p>American Sign Language (ASL): N</p> <p><input type="checkbox"/> Accessibility: CONTACT PROVIDER</p> <p><u>PEDIATRICS</u></p> <p>TELLECHEA-SANCHEZ, SELMIRA</p> <p>Provider ID: 424775</p> <p>Provider Gender: Female</p> <p>License Number: G83438</p> <p>NPI: 1730288747</p> <p><input type="checkbox"/> Provider English Spoken: Y</p> <p><input type="checkbox"/> Provider Language(s) Spoken: Spanish</p> <p>Cultural Competency: N</p> <p>Board Certified Specialty: No</p> <p>IHP of Southern Cal-PHP NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL</p> <p><input type="checkbox"/> 426 N DATE ST ESCONDIDO, CA 92025</p> <p><input type="checkbox"/> Phone: (760) 690-5900</p> <p><input type="checkbox"/> After Hours Phone: (760) 690-5900</p> <p><input type="checkbox"/> Website: N/A</p> <p>Medi-Cal Open Panel: Yes</p>	<p>Cultural Competency: N</p> <p>Board Certified Specialty: No</p> <p>IHP of Southern Cal-PHP NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL</p> <p><input type="checkbox"/> 426 N DATE ST ESCONDIDO, CA 92025</p> <p><input type="checkbox"/> Phone: (760) 690-5900</p> <p><input type="checkbox"/> After Hours Phone: (760) 690-5900</p> <p><input type="checkbox"/> Website: N/A</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\21</p> <p>American Sign Language (ASL): N</p> <p><input type="checkbox"/> Accessibility: CONTACT PROVIDER</p> <p><u>PEDIATRICS</u></p> <p>TELLECHEA-SANCHEZ, SELMIRA</p> <p>Provider ID: 424775</p> <p>Provider Gender: Female</p> <p>License Number: G83438</p> <p>NPI: 1730288747</p> <p><input type="checkbox"/> Provider English Spoken: Y</p> <p><input type="checkbox"/> Provider Language(s) Spoken: Spanish</p> <p>Cultural Competency: N</p> <p>Board Certified Specialty: No</p> <p>IHP of Southern Cal-PHP NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL</p> <p><input type="checkbox"/> 426 N DATE ST ESCONDIDO, CA 92025</p> <p><input type="checkbox"/> Phone: (760) 690-5900</p> <p><input type="checkbox"/> After Hours Phone: (760) 690-5900</p> <p><input type="checkbox"/> Website: N/A</p> <p>Medi-Cal Open Panel: Yes</p>	<p>Min/Max Age: 0\21</p> <p>American Sign Language (ASL): N</p> <p><input type="checkbox"/> Accessibility: CONTACT PROVIDER</p> <p><u>PEDIATRICS</u></p> <p>ZAND, FARIBA</p> <p>Provider ID: 87737</p> <p>Provider Gender: Female</p> <p>NPI: 1356373674</p> <p><input type="checkbox"/> Provider English Spoken: Y</p> <p><input type="checkbox"/> Provider Language(s) Spoken: Farsi, Persian, Spanish</p> <p>Cultural Competency: N</p> <p>Hospital Affiliation: MERCY GENERAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, UCSD MEDICAL CTR</p> <p>Board Certified Specialty: No</p> <p>Rady Childrens Health Network FARIBA ZAND</p> <p><input type="checkbox"/> 240 W MISSION AVE STE A ESCONDIDO, CA 92025</p> <p><input type="checkbox"/> Phone: (760) 747-5400</p> <p>Fax: (760) 747-2286</p> <p><input type="checkbox"/> After Hours Phone: (760) 747-5400</p> <p><input type="checkbox"/> Website: N/A</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\19</p> <p>American Sign Language (ASL): N</p> <p><input type="checkbox"/> Accessibility: CONTACT PROVIDER</p> <p>Hours: M-F 8:00AM-5:00PM</p>
--	---	---

D2. Directorio de atención primaria

PHYSICIANS ASSISTANT

BAISLEY, SHAWN

Provider ID: 588941

Provider Gender: Male

License Number: PA52347


NPI: 1376936120


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH
ESCONDIDO FAMILY
MEDICINE

 704 E GRAND AVE
ESCONDIDO, CA 92025

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

BAISLEY, SHAWN

Provider ID: 588941

Provider Gender: Male

License Number: PA52347

NPI: 1376936120

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH
ESCONDIDO FAMILY
MEDICINE

 704 E GRAND AVE
ESCONDIDO, CA 92025



Phone: (619) 662-4100



After Hours Phone: (619)
662-4100



Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

SHARPE, NORMA

Provider ID: 588941

Provider Gender: Female

License Number: PA20490


NPI: 1619100237


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH
ESCONDIDO FAMILY
MEDICINE

 704 E GRAND AVE
ESCONDIDO, CA 92025

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

SHARPE, NORMA

Provider ID: 588941

Provider Gender: Female

License Number: PA20490


NPI: 1619100237


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH
ESCONDIDO FAMILY
MEDICINE

 704 E GRAND AVE
ESCONDIDO, CA 92025

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PODIATRIST

NEGRON, RICARDO

Provider ID: 206271

Provider Gender: Male

License Number: DPM5260

NPI: 1932548393

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N





Hospital Affiliation: Providence
St Joseph Hospital

Board Certified Specialty: No
IHP of Southern Cal-PHP

NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY



 728 E VALLEY PKWY
ESCONDIDO, CA 92025



D2. Directorio de atención primaria



 Phone: (760) 737-6900
 After Hours Phone: (760) 737-6900
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

PODIATRIST

NEGRON, RICARDO

Provider ID: 206271
Provider Gender: Male
License Number: DPM5260
NPI: 1932548393
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: Providence
St Joseph Hospital
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY

 728 E VALLEY PKWY
ESCONDIDO, CA 92025
 Phone: (760) 737-6900
 After Hours Phone: (760) 737-6900

 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER



FALLBROOK

CERTIFIED NURSE

PRACTITIONER



EVERETT, ELIZABETH

Provider ID: 624122
Provider Gender: Female
License Number: NP95025094
NPI: 1942952767

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Sign Language

Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC

 321 E ALVARADO ST
FALLBROOK, CA 92028

 Phone: (760) 723-6200
 After Hours Phone: (760) 723-6200

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER



Hours: M 8:00AM-4:00PM
TU 8:00AM-0:30PM
W-TH 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER



EVERETT, ELIZABETH

Provider ID: 624122
Provider Gender: Female
License Number: NP95025094
NPI: 1942952767

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Sign Language
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC

 321 E ALVARADO ST
FALLBROOK, CA 92028

 Phone: (760) 723-6200
 After Hours Phone: (760) 723-6200

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER



Hours: M 8:00AM-4:00PM
TU 8:00AM-0:30PM
W-TH 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER



EVERETT, ELIZABETH

Provider ID: 624122
Provider Gender: Female
License Number: NP95025094
NPI: 1942952767

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Sign Language

Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC

 321 E ALVARADO ST
FALLBROOK, CA 92028

 Phone: (760) 723-6200
 After Hours Phone: (760) 723-6200

 Website: www.vistacommunityclinic.org

D2. Directorio de atención primaria

nityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M 8:00AM-4:00PM

TU 8:00AM-0:30PM

W-TH 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

EVERETT, ELIZABETH

Provider ID: 624122

Provider Gender: Female

License Number: NP95025094

NPI: 1942952767

Provider English Spoken: Y

Provider Language(s)

Spoken: Sign Language


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 321 E ALVARADO ST
FALLBROOK, CA 92028

 Phone: (760) 723-6200

 After Hours Phone: (760)
723-6200

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M 8:00AM-4:00PM

TU 8:00AM-0:30PM

W-TH 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

EVERETT, ELIZABETH

Provider ID: 624122

Provider Gender: Female

License Number: NP95025094

NPI: 1942952767

Provider English Spoken: Y

Provider Language(s)

Spoken: Sign Language


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 321 E ALVARADO ST
FALLBROOK, CA 92028

 Phone: (760) 723-6200

 After Hours Phone: (760)
723-6200

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M 8:00AM-4:00PM

TU 8:00AM-0:30PM

W-TH 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

EVERETT, ELIZABETH

Provider ID: 624122

Provider Gender: Female

License Number: NP95025094

NPI: 1942952767

Provider English Spoken: Y

Provider Language(s)


Spoken: Sign Language


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 321 E ALVARADO ST
FALLBROOK, CA 92028

 Phone: (760) 723-6200

 After Hours Phone: (760)
723-6200

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M 8:00AM-4:00PM

TU 8:00AM-0:30PM

W-TH 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

KELLEHER, BRIDGET

Provider ID: 624122

Provider Gender: Female

License Number: NP95003447

NPI: 1245695006

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY


MEDICAL CTR

Board Certified Specialty: No



IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 321 E ALVARADO ST
FALLBROOK, CA 92028

 Phone: (760) 723-6200




D2. Directorio de atención primaria





 After Hours Phone: (760) 723-6200
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

KELLEHER, BRIDGET

Provider ID: 624122
Provider Gender: Female
License Number: NP95003447
NPI: 1245695006
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
Board Certified Specialty: No IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
 321 E ALVARADO ST
FALLBROOK, CA 92028



 Phone: (760) 723-6200
 After Hours Phone: (760) 723-6200
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE






PRACTITIONER

KELLEHER, BRIDGET

Provider ID: 624122
Provider Gender: Female
License Number: NP95003447
NPI: 1245695006

 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N

Hospital Affiliation: TRI CITY MEDICAL CTR
Board Certified Specialty: No IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC



 321 E ALVARADO ST
FALLBROOK, CA 92028
 Phone: (760) 723-6200
 After Hours Phone: (760) 723-6200
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

KELLEHER, BRIDGET






Provider ID: 624122
Provider Gender: Female
License Number: NP95003447
NPI: 1245695006

 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR

Board Certified Specialty: No IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC



 321 E ALVARADO ST
FALLBROOK, CA 92028
 Phone: (760) 723-6200
 After Hours Phone: (760) 723-6200
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

KELLEHER, BRIDGET

Provider ID: 624122
Provider Gender: Female
License Number: NP95003447
NPI: 1245695006

 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N

Hospital Affiliation: TRI CITY MEDICAL CTR

Board Certified Specialty: No IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC

 321 E ALVARADO ST
FALLBROOK, CA 92028
 Phone: (760) 723-6200
 After Hours Phone: (760) 723-6200
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes

D2. Directorio de atención primaria

Min/Max Age: 0\999

American Sign Language (ASL): NPI: 1801497284

N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER


KELLEHER, BRIDGET

Provider ID: 624122

Provider Gender: Female

License Number: NP95003447

NPI: 1245695006

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: TRI CITY
MEDICAL CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 321 E ALVARADO ST
FALLBROOK, CA 92028

 Phone: (760) 723-6200

 After Hours Phone: (760)
723-6200

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): License Number: NP95015717

N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER


RACKHAM, KELLY

Provider ID: 624122

Provider Gender: Male

License Number: NP95015717

NPI: 1801497284

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 321 E ALVARADO ST
FALLBROOK, CA 92028

 Phone: (760) 723-6200

 After Hours Phone: (760)
723-6200

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M 8:00AM-4:00PM

TU 8:00AM-0:30PM

W-TH 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

RACKHAM, KELLY


Provider ID: 624122

Provider Gender: Male

License Number: NP95015717

NPI: 1801497284

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 321 E ALVARADO ST

FALLBROOK, CA 92028

 Phone: (760) 723-6200

 After Hours Phone: (760)
723-6200

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M 8:00AM-4:00PM

TU 8:00AM-0:30PM

W-TH 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER


RACKHAM, KELLY

Provider ID: 624122

Provider Gender: Male

License Number: NP95015717

NPI: 1801497284

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 321 E ALVARADO ST
FALLBROOK, CA 92028

 Phone: (760) 723-6200

 After Hours Phone: (760)
723-6200

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

D2. Directorio de atención primaria

PROVIDER
Hours: M 8:00AM-4:00PM
TU 8:00AM-0:30PM
W-TH 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER




RACKHAM, KELLY

Provider ID: 624122
Provider Gender: Male
License Number: NP95015717
NPI: 1801497284

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 321 E ALVARADO ST
FALLBROOK, CA 92028
 Phone: (760) 723-6200
 After Hours Phone: (760)
723-6200

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-4:00PM

TU 8:00AM-0:30PM

W-TH 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

RACKHAM, KELLY

Provider ID: 624122




Provider Gender: Male

License Number: NP95015717
NPI: 1801497284

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 321 E ALVARADO ST
FALLBROOK, CA 92028
 Phone: (760) 723-6200
 After Hours Phone: (760)
723-6200

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-4:00PM

TU 8:00AM-0:30PM

W-TH 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

RACKHAM, KELLY

Provider ID: 624122

Provider Gender: Male

License Number: NP95015717

NPI: 1801497284

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 321 E ALVARADO ST


FALLBROOK, CA 92028
 Phone: (760) 723-6200
 After Hours Phone: (760)
723-6200
 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-4:00PM

TU 8:00AM-0:30PM

W-TH 8:00AM-5:00PM

FQHC

VISTA COMMUNITY CLINIC,

Provider ID: 624122


NPI: 1649662719


Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 321 E ALVARADO ST
FALLBROOK, CA 92028

 Phone: (760) 723-6200

 After Hours Phone: (760)
723-6200

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-4:00PM

TU 8:00AM-0:30PM

W-TH 8:00AM-5:00PM

FQHC

D2. Directorio de atención primaria

VISTA COMMUNITY CLINIC,

Provider ID: 624122


NPI: 1316501562


 Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 321 E ALVARADO ST
FALLBROOK, CA 92028

 Phone: (760) 723-6200

 After Hours Phone: (760)
723-6200

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-4:00PM

TU 8:00AM-0:30PM

W-TH 8:00AM-5:00PM

FQHC

VISTA COMMUNITY CLINIC,

Provider ID: 624122


NPI: 1316501562


 Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 321 E ALVARADO ST
FALLBROOK, CA 92028

 Phone: (760) 723-6200

 After Hours Phone: (760)
723-6200

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-4:00PM

TU 8:00AM-0:30PM

W-TH 8:00AM-5:00PM

FQHC

VISTA COMMUNITY CLINIC,

Provider ID: 624122


NPI: 1649662719


 Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 321 E ALVARADO ST
FALLBROOK, CA 92028

 Phone: (760) 723-6200

 After Hours Phone: (760)
723-6200

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-4:00PM

TU 8:00AM-0:30PM

W-TH 8:00AM-5:00PM

FQHC

VISTA COMMUNITY CLINIC,

Provider ID: 624122

NPI: 1851300123


 Provider English Spoken: Y
Cultural Competency: N


IHP of Southern Cal-PHP


VISTA COMMUNITY CLINIC

 321 E ALVARADO ST

FALLBROOK, CA 92028

 Phone: (760) 723-6200

 After Hours Phone: (760)
723-6200

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-4:00PM

TU 8:00AM-0:30PM

W-TH 8:00AM-5:00PM

FQHC

VISTA COMMUNITY CLINIC,

Provider ID: 624122


NPI: 1851300123


 Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 321 E ALVARADO ST
FALLBROOK, CA 92028

 Phone: (760) 723-6200

 After Hours Phone: (760)
723-6200

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-4:00PM

TU 8:00AM-0:30PM

W-TH 8:00AM-5:00PM

PEDIATRICS

D2. Directorio de atención primaria

DELRE, AMANDA

Provider ID: 238960

Provider Gender: Female

NPI: 1548499957

 Provider English Spoken: Y
 Cultural Competency: N


Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No

Rady Childrens Health Network
AMANDA M DELRE

 1107 S MISSION RD
FALLBROOK, CA 92028

 Phone: (760) 451-0070

Fax: (760) 451-1499


 After Hours Phone: (760)
451-0070

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM


PEDIATRICS

LINARES, YENDI

Provider ID: 538068

Provider Gender: Female

NPI: 1336674886

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:


CHILDRENS HOSP OF LOS
ANGELES, SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No

Rady Childrens Health Network N


YENDI N LINARES

 1107 S MISSION RD
FALLBROOK, CA 92028

 Phone: (760) 451-0070

Fax: (760) 451-1499

 After Hours Phone: (760)
451-0070

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM


PEDIATRICS

ROBINSON, DAISY

Provider ID: 230579

Provider Gender: Female

NPI: 1659389740

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No


Rady Childrens Health Network
DAISY A ROBINSON

 321 E ALVARADO ST
FALLBROOK, CA 92028

 Phone: (760) 723-6200

Fax: (760) 414-3892

 After Hours Phone: (760)
723-6200

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-4:00PM

IMPERIAL BEACH

FAMILY PRACTICE

JOHNSON, DANIEL

Provider ID: 179678

Provider Gender: Male

License Number: 20A9393

NPI: 1245311216

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA


Board Certified Specialty: No

IHP of Southern Cal-PHP

IMPERIAL BEACH HEALTH
CENTER

 949 PALM AVE
IMPERIAL BEACH, CA 91932

 Phone: (619) 429-3733

 After Hours Phone: (619)
429-3733

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:30AM-9:00PM

F 8:30AM-5:00PM

SA 8:30AM-2:00PM

D2. Directorio de atención primaria

FAMILY PRACTICE

JOHNSON, DANIEL

Provider ID: 179678

Provider Gender: Male

License Number: 20A9393

NPI: 1245311216

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA


Board Certified Specialty: No


IHP of Southern Cal-PHP


IMPERIAL BEACH HEALTH

CENTER

 949 PALM AVE
IMPERIAL BEACH, CA 91932

 Phone: (619) 429-3733


 After Hours Phone: (619)
429-3733

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:30AM-9:00PM

F 8:30AM-5:00PM

SA 8:30AM-2:00PM

FQHC

IMPERIAL BEACH HEALTH CENTER,

Provider ID: 179678


NPI: 1790718351

Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

IMPERIAL BEACH HEALTH CENTER

 949 PALM AVE
IMPERIAL BEACH, CA 91932

 Phone: (619) 429-3733

Fax: (619) 628-5550

 After Hours Phone: (619)
429-3733

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC

IMPERIAL BEACH HEALTH CENTER,

Provider ID: 179678

NPI: 1790718351


Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

IMPERIAL BEACH HEALTH

CENTER

 949 PALM AVE
IMPERIAL BEACH, CA 91932

 Phone: (619) 429-3733

Fax: (619) 628-5550

 After Hours Phone: (619)
429-3733


 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE

RYAN, DANA

Provider ID: 179678

Provider Gender: Female

License Number: A66830

NPI: 1780609990

Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

IMPERIAL BEACH HEALTH

CENTER

 949 PALM AVE
IMPERIAL BEACH, CA 91932

 Phone: (619) 429-3733


 After Hours Phone: (619)
429-3733

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

RYAN, DANA

Provider ID: 179678

Provider Gender: Female

License Number: A66830

NPI: 1780609990

Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

IMPERIAL BEACH HEALTH

CENTER

 949 PALM AVE
IMPERIAL BEACH, CA 91932

 Phone: (619) 429-3733

D2. Directorio de atención primaria

☎ After Hours Phone: (619) 429-3733

🌐 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

PEDIATRICS

DOKICH, SRETENKA

Provider ID: 179678

Provider Gender: Female

License Number: A51447

NPI: 1154409035

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Serbian, Spanish
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No

IHP of Southern Cal-PHP

IMPERIAL BEACH HEALTH

CENTER

📍 949 PALM AVE
IMPERIAL BEACH, CA 91932

☎ Phone: (619) 429-3733

☎ After Hours Phone: (619) 429-3733

🌐 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

PEDIATRICS

DOKICH, SRETENKA

Provider ID: 179678

Provider Gender: Female

License Number: A51447

NPI: 1154409035

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Serbian, Spanish
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No

IHP of Southern Cal-PHP

IMPERIAL BEACH HEALTH

CENTER

📍 949 PALM AVE
IMPERIAL BEACH, CA 91932

☎ Phone: (619) 429-3733

☎ After Hours Phone: (619) 429-3733

🌐 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

LA JOLLA

PEDIATRICS

GAINOR, GRETCHEN

Provider ID: 537752

Provider Gender: Female

NPI: 1174504757

☑ Provider English Spoken: Y

Cultural Competency: N
Board Certified Specialty: No
Rady Childrens Health Network
GRETCHEN C GAINOR

📍 7300 GIRARD AVE STE 106
LA JOLLA, CA 92037

☎ Phone: (858) 459-4351

Fax: (858) 459-4399

☎ After Hours Phone: (858) 459-4351

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

PEDIATRICS

GANDHI, SHEETAL

Provider ID: 282029

Provider Gender: Female

NPI: 1700858859

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL

Board Certified Specialty: No

Rady Childrens Health Network
SHEETAL N GANDHI

📍 4150 REGENTS PARK ROW
STE 355

LA JOLLA, CA 92037

☎ Phone: (858) 457-2043

Fax: (858) 457-2092

☎ After Hours Phone: (858) 457-2043

🌐 Website: N/A


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):


D2. Directorio de atención primaria

N


 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

HUNTER, WENDY

Provider ID: 377597
Provider Gender: Female
NPI: 1053515551
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No
Rady Childrens Health Network
WENDY L HUNTER

 7300 GIRARD AVE STE 106
LA JOLLA, CA 92037

 *Phone: (858) 459-4351*

Fax: (858) 459-4399

 *After Hours Phone: (858) 459-4351*


 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):


N


 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM


PEDIATRICS


PARSONS, GENEVIEVE

Provider ID: 24122
Provider Gender: Female
NPI: 1699700914
 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL

Board Certified Specialty: No
Rady Childrens Health Network
GENEVIEVE N PARSONS

 7300 GIRARD AVE STE 106
LA JOLLA, CA 92037

 *Phone: (858) 459-4351*

Fax: (858) 459-4399

 *After Hours Phone: (858) 459-4351*

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19


American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*


Hours: M-F 8:00AM-5:00PM


PEDIATRICS

ROBERTS, KENDALL

Provider ID: 48933
Provider Gender: Male
NPI: 1265762033
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No
Rady Childrens Health Network

KENDALL R ROBERTS

 4150 REGENTS PARK ROW
STE 355
LA JOLLA, CA 92037

 *Phone: (858) 457-2043*

Fax: (858) 457-2092

 *After Hours Phone: (858) 457-2043*

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):


N

 *Accessibility: CONTACT PROVIDER*


Hours: M-F 8:00AM-5:00PM


PEDIATRICS

TUNG, VIVIAN

Provider ID: 11291
Provider Gender: Female
NPI: 1285665133
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL

Board Certified Specialty: No
Rady Childrens Health Network
VIVIAN V TUNG

 7300 GIRARD AVE STE 106
LA JOLLA, CA 92037

 *Phone: (858) 459-4351*

Fax: (858) 459-4399

 *After Hours Phone: (858) 459-4351*

 *Website: N/A*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

D2. Directorio de atención primaria

N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM

LA MESA

CERTIFIED NURSE


PRACTITIONER


WARD, KATHERINE


Provider ID: 613887

Provider Gender: Female


NPI: 1477223576

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
Rady Childrens Health Network
KATHERINE J WARD

 8881 FLETCHER PKWY STE 205
LA MESA, CA 91942

 *Phone: (619) 464-6434*

Fax: (619) 464-5109

 *After Hours Phone: (619) 464-6434*

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-6:00PM
SA 11:30AM-3:30PM

CERTIFIED NURSE


PRACTITIONER


WARD, KATHERINE


Provider ID: 613881

Provider Gender: Female

NPI: 1477223576

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
Rady Childrens Health Network
KATHERINE J WARD

 8881 FLETCHER PKWY STE 200
LA MESA, CA 91942

 *Phone: (619) 464-6434*

Fax: (619) 464-5109


 *After Hours Phone: (619) 464-6434*

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-6:00PM
SA 11:30AM-3:30PM


FAMILY PRACTICE

PATEL, HEMANSHU

Provider ID: 664660


Provider Gender: Male

NPI: 1255777439

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: BARSTOW COMMUNITY HOSPITAL, DESERT VALLEY HOSPITAL, Providence St Mary Medical Center, VICTOR VALLEY GLOBAL MED CTR

Board Certified Specialty: No
Community Care IPA LLC
HEMANSHU R PATEL

 7339 EL CAJON BLVD STE I
LA MESA, CA 91942

 *Phone: (619) 698-0606*

Fax: (619) 332-5149

 *After Hours Phone: (619) 698-0606*

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*

Hours: M-F 9:00AM-5:30PM


PEDIATRICS

ALSHEIKH, HUDA

Provider ID: 435468

Provider Gender: Female


NPI: 1487746855


 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Arabic*

Cultural Competency: N

Board Certified Specialty: Yes

Rady Childrens Health Network
HUDA Y ALSHEIKH

 8881 FLETCHER PKWY STE 200
LA MESA, CA 91942

 *Phone: (619) 464-6434*

Fax: (619) 464-5109

 *After Hours Phone: (619) 464-6434*

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*

Hours: M-TU 7:30AM-6:00PM

W-F 7:30AM-6:30PM

SA 8:30AM-5:00PM

D2. Directorio de atención primaria

PEDIATRICS

ALSHEIKH, HUDA

Provider ID: 451191

Provider Gender: Female

NPI: 1487746855

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Board Certified Specialty: No

Rady Childrens Health Network

HUDA Y ALSHEIKH

8881 FLETCHER PKWY STE
205

LA MESA, CA 91942

Phone: (619) 464-6434

Fax: (619) 464-5109

After Hours Phone: (619)
464-6434

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TU 7:30AM-6:00PM

W-F 7:30AM-6:30PM

SA 8:30AM-5:00PM

PEDIATRICS

CLAY, CORRIE

Provider ID: 536652

Provider Gender: Female

NPI: 1437207750

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, GROSSMONT

HOSPITAL, SHARP MARY

BIRCH HOSP FOR WOMEN

AND NEWBORNS

Board Certified Specialty: No

Rady Childrens Health Network

CORRIE T CLAY

8881 FLETCHER PKWY STE
200

LA MESA, CA 91942

Phone: (619) 464-6434

Fax: (619) 464-5109

After Hours Phone: (619)
464-6434

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-6:00PM

SA 11:30AM-3:30PM

PEDIATRICS

EMPIE, KRISTEN

Provider ID: 648986

Provider Gender: Female

NPI: 1093343105

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

Rady Childrens Health Network

KRISTEN L EMPIE

8881 FLETCHER PKWY STE
200

LA MESA, CA 91942

Phone: (619) 464-6434

Fax: (619) 464-5109

After Hours Phone: (619)
464-6434

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-6:00PM

SA 11:30AM-3:30PM

PEDIATRICS

EMPIE, KRISTEN

Provider ID: 648987

Provider Gender: Female

NPI: 1093343105

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

Rady Childrens Health Network

KRISTEN L EMPIE

8881 FLETCHER PKWY STE
205

LA MESA, CA 91942

Phone: (619) 464-6434

Fax: (619) 464-5109

After Hours Phone: (619)
464-6434

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-6:00PM

SA 11:30AM-3:30PM

PEDIATRICS

GIANFORTUNE, RACHEL

Provider ID: 433091

Provider Gender: Female

NPI: 1912193301

Provider English Spoken: Y

Provider Language(s)

D2. Directorio de atención primaria

Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SHARP MEMORIAL HOSPITAL, GROSSMONT HOSPITAL

Board Certified Specialty: No

Rady Childrens Health Network
RACHEL M GIANFORTUNE

8881 FLETCHER PKWY STE 200

LA MESA, CA 91942

Phone: (619) 464-6434

Fax: (619) 464-5109

After Hours Phone: (619) 464-6434

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

GIANFORTUNE, RACHEL

Provider ID: 450501

Provider Gender: Female

NPI: 1912193301

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SHARP MEMORIAL HOSPITAL, GROSSMONT HOSPITAL

Board Certified Specialty: No

Rady Childrens Health Network

RACHEL M GIANFORTUNE

8881 FLETCHER PKWY STE 205

LA MESA, CA 91942

Phone: (619) 464-6434

After Hours Phone: (619) 464-6434

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

IMUS, PAUL

Provider ID: 239590

Provider Gender: Male

NPI: 1104116680

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, GROSSMONT HOSPITAL

Board Certified Specialty: No

Rady Childrens Health Network
PAUL M IMUS

8881 FLETCHER PKWY STE 200

LA MESA, CA 91942

Phone: (619) 401-0404

Fax: (619) 401-0522

After Hours Phone: (619) 401-0404

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 9:00AM-5:00PM

PEDIATRICS

MOFFATT, KYRRA

Provider ID: 275099

Provider Gender: Female

NPI: 1194922419

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS

Board Certified Specialty: No

Rady Childrens Health Network
KYRRA MOFFATT

8881 FLETCHER PKWY STE 200

LA MESA, CA 91942

Phone: (619) 401-0404

Fax: (619) 401-0522

After Hours Phone: (619) 401-0404

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

D2. Directorio de atención primaria

PEDIATRICS

MOLINOS, NICOLE

Provider ID: 538098

Provider Gender: Female

NPI: 1538685524

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: Yes

Rady Childrens Health Network

NICOLE P MOLINOS

6942 UNIVERSITY AVE STE
A
LA MESA, CA 91942

Phone: (619) 698-2184

Fax: (619) 698-2084

After Hours Phone: (619)
698-2184

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

PEDIATRICS

RONQUILLO, RINA

Provider ID: 377359

Provider Gender: Female

NPI: 1407047749

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL, RADY

CHILDRENS HOSPITAL SAN

DIEGO, SHARP MARY BIRCH

HOSP FOR WOMEN AND

NEWBORNS, SHARP

MEMORIAL HOSPITAL

Board Certified Specialty: No

Rady Childrens Health Network

RINA R RONQUILLO

8881 FLETCHER PKWY STE
200

LA MESA, CA 91942

Phone: (619) 464-6434

Fax: (619) 464-5109

After Hours Phone: (619)
464-6434

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

PEDIATRICS

SHORT, RICHARD

Provider ID: 60736

Provider Gender: Male

NPI: 1568552727

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL, RADY

CHILDRENS HOSPITAL SAN

DIEGO, SHARP MARY BIRCH

HOSP FOR WOMEN AND

NEWBORNS

Board Certified Specialty: Yes

Rady Childrens Health Network

RICHARD L SHORT

8881 FLETCHER PKWY STE

200

LA MESA, CA 91942

Phone: (619) 464-6434

Fax: (619) 464-5109

After Hours Phone: (619)
464-6434

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-6:00PM

SA 11:30AM-3:30PM

LAKESIDE

CHIROPRACTOR

PAGE, BIANCA

Provider ID: 353843

Provider Gender: Female

License Number: DC33688

NPI: 1649787607

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE LAKESIDE

10039 VINE ST

LAKESIDE, CA 92040

Phone: (858) 218-3000

After Hours Phone: (858)
218-3000

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

D2. Directorio de atención primaria

Hours: M-F 8:00AM-5:00PM

CHIROPRACTOR

PAGE, BIANCA

Provider ID: 353843

Provider Gender: Female

License Number: DC33688


NPI: 1649787607

Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP


NEIGHBORHOOD

HEALTHCARE LAKESIDE

 10039 VINE ST

LAKESIDE, CA 92040

 Phone: (858) 218-3000

 After Hours Phone: (858)
218-3000

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

FERRAILOLO, NATALIE

Provider ID: 353843

Provider Gender: Female

License Number: A152372

NPI: 1306290143

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP


NEIGHBORHOOD

HEALTHCARE LAKESIDE

 10039 VINE ST

LAKESIDE, CA 92040

 Phone: (858) 218-3000

 After Hours Phone: (858)
218-3000


 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

FERRAILOLO, NATALIE

Provider ID: 353843

Provider Gender: Female

License Number: A152372

NPI: 1306290143

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP


NEIGHBORHOOD

HEALTHCARE LAKESIDE

 10039 VINE ST

LAKESIDE, CA 92040

 Phone: (858) 218-3000

 After Hours Phone: (858)
218-3000


 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

LIU-BARBARO, DOROTHY

Provider ID: 353843

Provider Gender: Female

License Number: A115342

NPI: 1851602270

Provider English Spoken: Y


Provider Language(s)
Spoken: Chinese, Mandarin,
Spanish

Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP


NEIGHBORHOOD

HEALTHCARE LAKESIDE

 10039 VINE ST

LAKESIDE, CA 92040

 Phone: (619) 440-2751

 After Hours Phone: (619)
440-2751


 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

LIU-BARBARO, DOROTHY

Provider ID: 353843

Provider Gender: Female

License Number: A115342

NPI: 1851602270

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese, Mandarin,
Spanish

Cultural Competency: N


D2. Directorio de atención primaria

Board Certified Specialty: No


IHP of Southern Cal-PHP


NEIGHBORHOOD

HEALTHCARE LAKESIDE

 10039 VINE ST

LAKESIDE, CA 92040

 Phone: (619) 440-2751

 After Hours Phone: (619)
440-2751

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

Hours: M-F 8:00AM-5:00PM

FQHC

NEIGHBORHOOD

HEALTHCARE LAKESIDE,

Provider ID: 353843

NPI: 1932384120


 *Provider English Spoken: Y*

Cultural Competency: N


IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE LAKESIDE

 10039 VINE ST

LAKESIDE, CA 92040

 Phone: (858) 218-3000

Fax: (360) 462-2744

 After Hours Phone: (858)
218-3000

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

Hours: M-F 8:00AM-5:00PM

FQHC

NEIGHBORHOOD

HEALTHCARE LAKESIDE,

Provider ID: 353843

NPI: 1932384120


 *Provider English Spoken: Y*

Cultural Competency: N


IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE LAKESIDE

 10039 VINE ST

LAKESIDE, CA 92040

 Phone: (858) 218-3000

Fax: (360) 462-2744

 After Hours Phone: (858)
218-3000

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

Hours: M-F 8:00AM-5:00PM

GENERAL PRACTICE


MANNINO, ELIZABETH


Provider ID: 353843

Provider Gender: Female

License Number: A43914

NPI: 1548290463

 *Provider English Spoken: Y*

 *Provider Language(s)*

Spoken: Italian, Spanish


Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


NEIGHBORHOOD

HEALTHCARE LAKESIDE

 10039 VINE ST

LAKESIDE, CA 92040

 Phone: (858) 218-3000

 After Hours Phone: (858)
218-3000

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

Hours: M-F 8:00AM-5:00PM

GENERAL PRACTICE

MANNINO, ELIZABETH

Provider ID: 353843

Provider Gender: Female

License Number: A43914

NPI: 1548290463

 *Provider English Spoken: Y*

 *Provider Language(s)*

Spoken: Italian, Spanish


Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


NEIGHBORHOOD

HEALTHCARE LAKESIDE

 10039 VINE ST

LAKESIDE, CA 92040

 Phone: (858) 218-3000

 After Hours Phone: (858)
218-3000


 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE

D2. Directorio de atención primaria

MCFARLAND, NATHAN

Provider ID: 353843

Provider Gender: Male

License Number: A75411

NPI: 1265462196

Provider English Spoken: Y

Provider Language(s)
Spoken: Italian, Spanish


Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


NEIGHBORHOOD

HEALTHCARE LAKESIDE

 10039 VINE ST

LAKESIDE, CA 92040

 Phone: (858) 218-3000

 After Hours Phone: (858)
218-3000

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE

MCFARLAND, NATHAN

Provider ID: 353843

Provider Gender: Male

License Number: A75411

NPI: 1265462196

Provider English Spoken: Y

Provider Language(s)
Spoken: Italian, Spanish


Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


NEIGHBORHOOD

HEALTHCARE LAKESIDE

 10039 VINE ST

LAKESIDE, CA 92040

 Phone: (858) 218-3000

 After Hours Phone: (858)
218-3000

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

LEMON GROVE

CERTIFIED NURSE

PRACTITIONER

ALLEN, KATHERINE

Provider ID: 419139

Provider Gender: Female

License Number: NP95009933

NPI: 1831557024

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San


Diego


LEMON GROVE FAMILY

HEALTH CENTER

 7592 BROADWAY

LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619)
515-2550

 Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

ALLEN, KATHERINE

Provider ID: 419139

Provider Gender: Female

License Number: NP95009933

NPI: 1831557024

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San


Diego


LEMON GROVE FAMILY

HEALTH CENTER

 7592 BROADWAY

LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619)
515-2550

 Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

ARVIZU, PALOMA

Provider ID: 419139


Provider Gender: Female


License Number: NP95008782


NPI: 1689139396


Provider English Spoken: Y

D2. Directorio de atención primaria

 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
LEMON GROVE FAMILY HEALTH CENTER



 7592 BROADWAY
LEMON GROVE, CA 91945
 *Phone: (619) 515-2550*
 *After Hours Phone: (619) 515-2550*

 *Website: N/A*
Email: valeriade@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N




 *Accessibility: CONTACT PROVIDER*
Hours: M-F 9:00AM-5:00PM


CERTIFIED NURSE PRACTITIONER

ARVIZU, PALOMA
Provider ID: 419139
Provider Gender: Female
License Number: NP95008782
NPI: 1689139396

 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
LEMON GROVE FAMILY HEALTH CENTER



 7592 BROADWAY
LEMON GROVE, CA 91945

 *Phone: (619) 515-2550*
 *After Hours Phone: (619) 515-2550*
 *Website: N/A*
Email: valeriade@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*
Hours: M-F 9:00AM-5:00PM


CERTIFIED NURSE PRACTITIONER

SMITH, SHARON
Provider ID: 419139
Provider Gender: Female
License Number: RN428876
NPI: 1780603597

 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

LEMON GROVE FAMILY HEALTH CENTER

 7592 BROADWAY
LEMON GROVE, CA 91945
 *Phone: (619) 515-2550*
 *After Hours Phone: (619) 515-2550*



 *Website: N/A*
Email: valeriade@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

 *Accessibility: CONTACT*



PROVIDER


CERTIFIED NURSE PRACTITIONER


SMITH, SHARON
Provider ID: 419139
Provider Gender: Female
License Number: NP15444
NPI: 1780603597

 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

LEMON GROVE FAMILY HEALTH CENTER

 7592 BROADWAY
LEMON GROVE, CA 91945
 *Phone: (619) 515-2550*
 *After Hours Phone: (619) 515-2550*

 *Website: N/A*
Email: valeriade@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER

SMITH, SHARON
Provider ID: 419139
Provider Gender: Female
License Number: RN428876
NPI: 1780603597






 *Provider English Spoken: Y*
 *Provider Language(s)*



D2. Directorio de atención primaria

Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
LEMON GROVE FAMILY HEALTH CENTER
 7592 BROADWAY
LEMON GROVE, CA 91945
 Phone: (619) 515-2550
 After Hours Phone: (619) 515-2550
 Website: N/A
Email: valeriade@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER


SMITH, SHARON

Provider ID: 419139
Provider Gender: Female
License Number: NP15444
NPI: 1780603597
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
LEMON GROVE FAMILY HEALTH CENTER
 7592 BROADWAY
LEMON GROVE, CA 91945
 Phone: (619) 515-2550
 After Hours Phone: (619)

515-2550
 Website: N/A
Email: valeriade@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

TOTH, JESSICA

Provider ID: 419139
Provider Gender: Female
License Number: NP95001050
NPI: 1578993788
 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
LEMON GROVE FAMILY HEALTH CENTER

 7592 BROADWAY
LEMON GROVE, CA 91945
 Phone: (619) 515-2550
 After Hours Phone: (619) 515-2550
 Website: N/A
Email: valeriade@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER



CERTIFIED NURSE PRACTITIONER

TOTH, JESSICA

Provider ID: 419139
Provider Gender: Female
License Number: NP95001050
NPI: 1578993788
 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
LEMON GROVE FAMILY HEALTH CENTER
 7592 BROADWAY
LEMON GROVE, CA 91945
 Phone: (619) 515-2550
 After Hours Phone: (619) 515-2550
 Website: N/A
Email: valeriade@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER


CERTIFIED NURSE PRACTITIONER


WILLIAMS, TAKISHA

Provider ID: 419139
Provider Gender: Female
License Number: NP95013978
NPI: 1881727386
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
LEMON GROVE FAMILY HEALTH CENTER

D2. Directorio de atención primaria

 7592 BROADWAY
LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619)
515-2550


 Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER


WILLIAMS, TAKISHA

Provider ID: 419139

Provider Gender: Female

License Number: NP95013978

NPI: 1881727386

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego

LEMON GROVE FAMILY
HEALTH CENTER

 7592 BROADWAY
LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619)
515-2550

 Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

FAMILY PRACTICE

DORN, TIA

Provider ID: 419139

Provider Gender: Female

License Number: C172318


NPI: 1285074740


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

LEMON GROVE FAMILY
HEALTH CENTER

 7592 BROADWAY
LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619)
515-2550

 Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

FAMILY PRACTICE

DORN, TIA

Provider ID: 419139

Provider Gender: Female

License Number: C172318


NPI: 1285074740


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

LEMON GROVE FAMILY
HEALTH CENTER

 7592 BROADWAY
LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619)
515-2550


 Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

FAMILY PRACTICE

KIM, YUHEE

Provider ID: 419139

Provider Gender: Female

License Number: A107323

NPI: 1629289400

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Korean


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San
Diego

LEMON GROVE FAMILY
HEALTH CENTER

 7592 BROADWAY
LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619)
515-2550

 Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

D2. Directorio de atención primaria

<p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><u>FAMILY PRACTICE</u></p> <p>KIM, YUHEE</p> <p><i>Provider ID: 419139</i></p> <p><i>Provider Gender: Female</i></p> <p><i>License Number: A107323</i></p> <p><i>NPI: 1629289400</i></p> <p><input type="checkbox"/> <i>Provider English Spoken: Y</i></p> <p><input type="checkbox"/> <i>Provider Language(s) Spoken: Korean</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Board Certified Specialty: No</i></p> <p><i>Family Health Centers of San Diego</i></p> <p>LEMON GROVE FAMILY HEALTH CENTER</p> <p> 7592 BROADWAY LEMON GROVE, CA 91945</p> <p> <i>Phone: (619) 515-2550</i></p> <p> <i>After Hours Phone: (619) 515-2550</i></p> <p> <i>Website: N/A</i></p> <p><i>Email: valeriade@fhcsd.org</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p> <p><i>Min/Max Age: 0\150</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><u>FQHC</u></p> <p>LEMON GROVE FAMILY HEALTH CENTER,</p> <p><i>Provider ID: 419139</i></p> <p><i>NPI: 1427282466</i></p> <p><input type="checkbox"/> <i>Provider English Spoken: Y</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Family Health Centers of San Diego</i></p> <p>LEMON GROVE FAMILY HEALTH CENTER</p> <p> 7592 BROADWAY LEMON GROVE, CA 91945</p> <p> <i>Phone: (619) 515-2550</i></p> <p><i>Fax: (619) 825-9577</i></p> <p> <i>After Hours Phone: (619) 515-2550</i></p> <p> <i>Website: N/A</i></p> <p><i>Email: valeriade@fhcsd.org</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p> <p><i>Min/Max Age: 0\150</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p>	<p><i>Diego</i></p> <p>LEMON GROVE FAMILY HEALTH CENTER</p> <p> 7592 BROADWAY LEMON GROVE, CA 91945</p> <p> <i>Phone: (619) 515-2550</i></p> <p><i>Fax: (619) 825-9577</i></p> <p> <i>After Hours Phone: (619) 515-2550</i></p> <p> <i>Website: N/A</i></p> <p><i>Email: valeriade@fhcsd.org</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p> <p><i>Min/Max Age: 0\150</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Hours: M-F 9:00AM-5:00PM</i></p> <p><u>FQHC</u></p> <p>LEMON GROVE FAMILY HEALTH CENTER,</p> <p><i>Provider ID: 419139</i></p> <p><i>NPI: 1427282466</i></p> <p><input type="checkbox"/> <i>Provider English Spoken: Y</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Family Health Centers of San Diego</i></p> <p>LEMON GROVE FAMILY HEALTH CENTER</p> <p> 7592 BROADWAY LEMON GROVE, CA 91945</p> <p> <i>Phone: (619) 515-2550</i></p> <p><i>Fax: (619) 825-9577</i></p> <p> <i>After Hours Phone: (619) 515-2550</i></p> <p> <i>Website: N/A</i></p> <p><i>Email: valeriade@fhcsd.org</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p> <p><i>Min/Max Age: 0\150</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p>	<p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Hours: M-F 9:00AM-5:00PM</i></p> <p><u>INTERNAL MEDICINE</u></p> <p>GALLARES, DANIEL</p> <p><i>Provider ID: 419139</i></p> <p><i>Provider Gender: Male</i></p> <p><i>License Number: A165925</i></p> <p><i>NPI: 1245689488</i></p> <p><input type="checkbox"/> <i>Provider English Spoken: Y</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Board Certified Specialty: No</i></p> <p><i>Family Health Centers of San Diego</i></p> <p>LEMON GROVE FAMILY HEALTH CENTER</p> <p> 7592 BROADWAY LEMON GROVE, CA 91945</p> <p> <i>Phone: (619) 515-2550</i></p> <p> <i>After Hours Phone: (619) 515-2550</i></p> <p> <i>Website: N/A</i></p> <p><i>Email: valeriade@fhcsd.org</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p> <p><i>Min/Max Age: 0\150</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><u>INTERNAL MEDICINE</u></p> <p>GALLARES, DANIEL</p> <p><i>Provider ID: 419139</i></p> <p><i>Provider Gender: Male</i></p> <p><i>License Number: A165925</i></p> <p><i>NPI: 1245689488</i></p> <p><input type="checkbox"/> <i>Provider English Spoken: Y</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Board Certified Specialty: No</i></p>
---	--	---

D2. Directorio de atención primaria

Family Health Centers of San Diego

LEMON GROVE FAMILY HEALTH CENTER

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2550

After Hours Phone: (619) 515-2550

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

MAHDAI, SUZAN

Provider ID: 419139

Provider Gender: Female

License Number: A154838

NPI: 1598015679

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

LEMON GROVE FAMILY HEALTH CENTER

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2550

After Hours Phone: (619) 515-2550

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 9:00AM-5:00PM

INTERNAL MEDICINE

MAHDAI, SUZAN

Provider ID: 419139

Provider Gender: Female

License Number: A154838

NPI: 1598015679

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

LEMON GROVE FAMILY HEALTH CENTER

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2550

After Hours Phone: (619) 515-2550

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 9:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI

Provider ID: 419139

Provider Gender: Female

License Number: 20A14919

NPI: 1619397031

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
Family Health Centers of San Diego

LEMON GROVE FAMILY HEALTH CENTER

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2500

After Hours Phone: (619) 515-2500

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI

Provider ID: 419139

Provider Gender: Female

License Number: 20A14919

NPI: 1619397031

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
Family Health Centers of San Diego

D2. Directorio de atención primaria

LEMON GROVE FAMILY HEALTH CENTER

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2500

After Hours Phone: (619) 515-2500

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

Provider ID: 419139

Provider Gender: Female

License Number: A68463

NPI: 1376663831

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SHARP MARY

BIRCH HOSP FOR WOMEN

AND NEWBORNS

Board Certified Specialty: No

Family Health Centers of San Diego

LEMON GROVE FAMILY

HEALTH CENTER

7592 BROADWAY

LEMON GROVE, CA 91945

Phone: (619) 515-2550

After Hours Phone: (619) 515-2550

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

Provider ID: 419139

Provider Gender: Female

License Number: A68463

NPI: 1376663831

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SHARP MARY

BIRCH HOSP FOR WOMEN

AND NEWBORNS

Board Certified Specialty: No

Family Health Centers of San Diego

LEMON GROVE FAMILY

HEALTH CENTER

7592 BROADWAY

LEMON GROVE, CA 91945

Phone: (619) 515-2550

After Hours Phone: (619) 515-2550

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

Provider ID: 419139

Provider Gender: Male

License Number: A113001

NPI: 1225231582

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,

GROSSMONT HOSPITAL, TRI

CITY MEDICAL CTR

Board Certified Specialty: No

Family Health Centers of San Diego

LEMON GROVE FAMILY

HEALTH CENTER

7592 BROADWAY

LEMON GROVE, CA 91945

Phone: (619) 515-2550

After Hours Phone: (619) 515-2550

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

D2. Directorio de atención primaria

OBSTETRICS / GYNECOLOGY


CARTER, KHALIL

Provider ID: 419139

Provider Gender: Male

License Number: A113001

NPI: 1225231582

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS


MERCY HOSPITAL,
GROSSMONT HOSPITAL, TRI
CITY MEDICAL CTR

Board Certified Specialty: No
Family Health Centers of San
Diego

LEMON GROVE FAMILY
HEALTH CENTER

 7592 BROADWAY
LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619)
515-2550

 Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY


CHAKRABARTI, PRIYA

Provider ID: 419139

Provider Gender: Female

License Number: A163464

NPI: 1326531401

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL, Sharp


Grossmont Hospital

Board Certified Specialty: No
Family Health Centers of San
Diego

LEMON GROVE FAMILY
HEALTH CENTER

 7592 BROADWAY
LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619)
515-2550

 Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

OBSTETRICS / GYNECOLOGY


CHAKRABARTI, PRIYA

Provider ID: 419139

Provider Gender: Female

License Number: A163464

NPI: 1326531401

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp


Grossmont Hospital


Board Certified Specialty: No
Family Health Centers of San

Diego

LEMON GROVE FAMILY
HEALTH CENTER

 7592 BROADWAY
LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619)
515-2550

 Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS

Provider ID: 419139

Provider Gender: Male

License Number: A108228


NPI: 1629277322


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

LEMON GROVE FAMILY
HEALTH CENTER

 7592 BROADWAY
LEMON GROVE, CA 91945

 Phone: (619) 515-2550

 After Hours Phone: (619)
515-2550

 Website: N/A

Email: valeriade@fhcsd.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

D2. Directorio de atención primaria

N

 *Accessibility: CONTACT PROVIDER*

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS

Provider ID: 419139

Provider Gender: Male

License Number: A108228


NPI: 1629277322


 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

LEMON GROVE FAMILY HEALTH CENTER

 *7592 BROADWAY
LEMON GROVE, CA 91945*

 *Phone: (619) 515-2550*

 *After Hours Phone: (619) 515-2550*

 *Website: N/A*


Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

OBSTETRICS / GYNECOLOGY


DORUELO, ASHLEY


Provider ID: 419139

Provider Gender: Female

License Number: A178499

NPI: 1033613732

 *Provider English Spoken: Y*

 *Provider Language(s)*

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp


Grossmont Hospital


Board Certified Specialty: No

Family Health Centers of San Diego

LEMON GROVE FAMILY HEALTH CENTER

 *7592 BROADWAY
LEMON GROVE, CA 91945*

 *Phone: (619) 515-2550*

 *After Hours Phone: (619) 515-2550*

 *Website: N/A*

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

OBSTETRICS / GYNECOLOGY


DORUELO, ASHLEY


Provider ID: 419139

Provider Gender: Female

License Number: A178499

NPI: 1033613732

 *Provider English Spoken: Y*

 *Provider Language(s)*

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp

Grossmont Hospital


Board Certified Specialty: No


Family Health Centers of San Diego

LEMON GROVE FAMILY HEALTH CENTER

 *7592 BROADWAY*

LEMON GROVE, CA 91945

 *Phone: (619) 515-2550*

 *After Hours Phone: (619) 515-2550*

 *Website: N/A*

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

OBSTETRICS / GYNECOLOGY

FOLCHTORRES-AGUIAR,

BEATRIZ


Provider ID: 419139

Provider Gender: Female

License Number: A148014

NPI: 1457794752

 *Provider English Spoken: Y*

 *Provider Language(s)*

Spoken: Spanish, Yue Chinese

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,

SCRIPPS MERCY HOSPITAL,

Sharp Grossmont Hospital,

SCRIPPS MERCY HOSPITAL

CHULA VISTA

Board Certified Specialty: No

Family Health Centers of San


Diego


LEMON GROVE FAMILY

HEALTH CENTER


 *7592 BROADWAY*

LEMON GROVE, CA 91945


 *Phone: (619) 515-2550*

 *After Hours Phone: (619) 515-2550*

D2. Directorio de atención primaria

 Website: N/A
Email: valeriade@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150



American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY


FOLCHTORRES-AGUIAR, BEATRIZ

Provider ID: 419139
Provider Gender: Female
License Number: A148014
NPI: 1457794752

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Yue Chinese

Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
Sharp Grossmont Hospital,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
Family Health Centers of San Diego
LEMON GROVE FAMILY
HEALTH CENTER

 7592 BROADWAY
LEMON GROVE, CA 91945
 Phone: (619) 515-2550
 After Hours Phone: (619)
515-2550

 Website: N/A
Email: valeriade@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150



American Sign Language (ASL): Provider Gender: Female
N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN


Provider ID: 419139
Provider Gender: Female
License Number: C174771
NPI: 1053392035

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, Sharp
Grossmont Hospital
Board Certified Specialty: No
Family Health Centers of San Diego

LEMON GROVE FAMILY
HEALTH CENTER

 7592 BROADWAY
LEMON GROVE, CA 91945
 Phone: (619) 515-2550
 After Hours Phone: (619)
515-2550

 Website: N/A
Email: valeriade@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N



 Accessibility: CONTACT PROVIDER

Hours: M-F 9:00AM-5:00PM

OBSTETRICS / GYNECOLOGY




HANLEY, LAUREN


Provider ID: 419139

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, Sharp
Grossmont Hospital
Board Certified Specialty: No
Family Health Centers of San Diego

LEMON GROVE FAMILY
HEALTH CENTER

 7592 BROADWAY
LEMON GROVE, CA 91945
 Phone: (619) 515-2550
 After Hours Phone: (619)
515-2550

 Website: N/A
Email: valeriade@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

N



 Accessibility: CONTACT PROVIDER

Hours: M-F 9:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA

Provider ID: 419139
Provider Gender: Female
License Number: A72005
NPI: 1649208711

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SHARP

D2. Directorio de atención primaria

CORONADO HOSP AND
HEALTHCARE CTR, SCRIPPS
MERCY HOSPITAL,
GROSSMONT HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego

LEMON GROVE FAMILY
HEALTH CENTER

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2550

After Hours Phone: (619)
515-2550

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA

Provider ID: 419139

Provider Gender: Female

License Number: A72005

NPI: 1649208711

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND
HEALTHCARE CTR, SCRIPPS
MERCY HOSPITAL,
GROSSMONT HOSPITAL

Board Certified Specialty: No
Family Health Centers of San
Diego

LEMON GROVE FAMILY
HEALTH CENTER

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2550

After Hours Phone: (619)
515-2550

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON

Provider ID: 419139

Provider Gender: Female

License Number: A116680

NPI: 1700073962

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No
Family Health Centers of San
Diego

LEMON GROVE FAMILY
HEALTH CENTER

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2550

After Hours Phone: (619)
515-2550

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON

Provider ID: 419139

Provider Gender: Female

License Number: A116680

NPI: 1700073962

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No
Family Health Centers of San
Diego

LEMON GROVE FAMILY
HEALTH CENTER

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2550

After Hours Phone: (619)
515-2550

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT

D2. Directorio de atención primaria

PROVIDER	 Provider Language(s) Spoken: Hindi	 Phone: (619) 515-2550  After Hours Phone: (619) 515-2550  Website: N/A Email: valeriade@fhcsd.org Medi-Cal Open Panel: Yes Min/Max Age: 0\150 American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Hours: M-F 9:00AM-5:00PM	LEMONGROVE, CA 91945
<u>OBSTETRICS / GYNECOLOGY</u> SAPRA, SONIA Provider ID: 419139 Provider Gender: Female License Number: A164859 NPI: 1952751711  Provider English Spoken: Y  Provider Language(s) Spoken: Hindi Cultural Competency: N Hospital Affiliation: SCRIPPS MERCY HOSPITAL Board Certified Specialty: No Family Health Centers of San Diego LEMONGROVE FAMILY HEALTH CENTER  7592 BROADWAY LEMONGROVE, CA 91945  Phone: (619) 515-2550  After Hours Phone: (619) 515-2550  Website: N/A Email: valeriade@fhcsd.org Medi-Cal Open Panel: Yes Min/Max Age: 0\150 American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Hours: M-F 9:00AM-5:00PM	 Cultural Competency: N Hospital Affiliation: SCRIPPS MERCY HOSPITAL Board Certified Specialty: No Family Health Centers of San Diego LEMONGROVE FAMILY HEALTH CENTER  7592 BROADWAY LEMONGROVE, CA 91945  Phone: (619) 515-2550  After Hours Phone: (619) 515-2550  Website: N/A Email: valeriade@fhcsd.org Medi-Cal Open Panel: Yes Min/Max Age: 0\150 American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Hours: M-F 9:00AM-5:00PM	<u>OBSTETRICS / GYNECOLOGY</u> STABEN, REBECCA Provider ID: 419139 Provider Gender: Female License Number: 20A13958 NPI: 1932269198  Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: Sharp Grossmont Hospital Board Certified Specialty: No Family Health Centers of San Diego LEMONGROVE FAMILY HEALTH CENTER  7592 BROADWAY LEMONGROVE, CA 91945  Phone: (619) 515-2550  After Hours Phone: (619) 515-2550  Website: N/A Email: valeriade@fhcsd.org Medi-Cal Open Panel: Yes Min/Max Age: 0\150 American Sign Language (ASL): N  Accessibility: CONTACT	<u>OBSTETRICS / GYNECOLOGY</u> SAPRA, SONIA Provider ID: 419139 Provider Gender: Female License Number: A164859 NPI: 1952751711  Provider English Spoken: Y  7592 BROADWAY

D2. Directorio de atención primaria

PROVIDER
Hours: M-F 9:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

WINESBURG, JENNIFER

Provider ID: 419139

Provider Gender: Female

License Number: 20A11535

NPI: 1811162456

Provider English Spoken: Y

*Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

*Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP*

*CORONADO HOSP AND
HEALTHCARE CTR,*

GROSSMONT HOSPITAL,

DESERT REGIONAL MED CTR

*Board Certified Specialty: No
Family Health Centers of San
Diego*

*LEMON GROVE FAMILY
HEALTH CENTER*

*7592 BROADWAY
LEMON GROVE, CA 91945*

Phone: (619) 515-2500

*After Hours Phone: (619)
515-2500*

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

*Accessibility: CONTACT
PROVIDER*

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

WINESBURG, JENNIFER

Provider ID: 419139

Provider Gender: Female

License Number: 20A11535

NPI: 1811162456

Provider English Spoken: Y

*Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

*Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP*

*CORONADO HOSP AND
HEALTHCARE CTR,*

GROSSMONT HOSPITAL,

DESERT REGIONAL MED CTR

*Board Certified Specialty: No
Family Health Centers of San
Diego*

*LEMON GROVE FAMILY
HEALTH CENTER*

*7592 BROADWAY
LEMON GROVE, CA 91945*

Phone: (619) 515-2500

*After Hours Phone: (619)
515-2500*

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

*American Sign Language (ASL):
N*

*Accessibility: CONTACT
PROVIDER*

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 419139

Provider Gender: Male

License Number: G78814

NPI: 1699790634

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

*GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,*

*SHARP CORONADO HOSP
AND HEALTHCARE CTR,*

*SCRIPPS MERCY HOSPITAL
CHULA VISTA*

*Board Certified Specialty: No
Family Health Centers of San
Diego*

*LEMON GROVE FAMILY
HEALTH CENTER*

*7592 BROADWAY
LEMON GROVE, CA 91945*

Phone: (619) 515-2500

*After Hours Phone: (619)
515-2500*

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

*American Sign Language (ASL):
N*

*Accessibility: CONTACT
PROVIDER*

Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 419139

Provider Gender: Male

License Number: G78814

NPI: 1699790634

Provider English Spoken: Y

*Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

Hospital Affiliation:

D2. Directorio de atención primaria

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No
Family Health Centers of San
Diego

LEMON GROVE FAMILY
HEALTH CENTER

7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2500
After Hours Phone: (619)
515-2500

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

JACKSON, DANA

Provider ID: 419139

Provider Gender: Female

License Number: 20A14119

NPI: 1689060063

Provider English Spoken: Y

Provider Language(s)
Spoken: Portuguese,
Spanish

Cultural Competency: N

Hospital Affiliation:

MARINHEALTH AND

MARINHEALTH MEDICAL
CENTER, SCRIPPS MERCY

HOSPITAL

Board Certified Specialty: No
Family Health Centers of San
Diego

LEMON GROVE FAMILY
HEALTH CENTER

7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2550
After Hours Phone: (619)
515-2550

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

JACKSON, DANA

Provider ID: 419139

Provider Gender: Female

License Number: 20A14119

NPI: 1689060063

Provider English Spoken: Y

Provider Language(s)
Spoken: Portuguese,
Spanish

Cultural Competency: N

Hospital Affiliation:

MARINHEALTH AND

MARINHEALTH MEDICAL
CENTER, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No
Family Health Centers of San
Diego

LEMON GROVE FAMILY
HEALTH CENTER

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2550

After Hours Phone: (619)
515-2550

Website: N/A

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

SLEIMAN, JOSEPH

Provider ID: 419139

Provider Gender: Male

License Number: A102060

NPI: 1093976748

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic, French,
Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL

Board Certified Specialty: No
Family Health Centers of San
Diego

LEMON GROVE FAMILY
HEALTH CENTER

7592 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 515-2550

After Hours Phone: (619)
515-2550

Website: N/A

Email: valeriade@fhcsd.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

D2. Directorio de atención primaria

N

 *Accessibility: CONTACT PROVIDER*

PEDIATRICS



SLEIMAN, JOSEPH

Provider ID: 419139

Provider Gender: Male

License Number: A102060

NPI: 1093976748

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Arabic, French, Spanish*


Cultural Competency: N


Hospital Affiliation: SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No
Family Health Centers of San Diego

LEMON GROVE FAMILY HEALTH CENTER

 *7592 BROADWAY
LEMON GROVE, CA 91945*

 *Phone: (619) 515-2550*

 *After Hours Phone: (619) 515-2550*

 *Website: N/A*

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

PHYSICIANS ASSISTANT

FLEMING, DAVID

Provider ID: 419139

Provider Gender: Male

License Number: PA12416


NPI: 1932329505


 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

LEMON GROVE FAMILY HEALTH CENTER

 *7592 BROADWAY
LEMON GROVE, CA 91945*

 *Phone: (619) 515-2550*

 *After Hours Phone: (619) 515-2550*

 *Website: N/A*

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

PHYSICIANS ASSISTANT

FLEMING, DAVID

Provider ID: 419139

Provider Gender: Male

License Number: PA12416


NPI: 1932329505


 *Provider English Spoken: Y*
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

LEMON GROVE FAMILY HEALTH CENTER

 *7592 BROADWAY
LEMON GROVE, CA 91945*

 *Phone: (619) 515-2550*

 *After Hours Phone: (619) 515-2550*

 *Website: N/A*

Email: valeriade@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

NATIONAL CITY

CERTIFIED NURSE

PRACTITIONER


AQUINO, FELINO


Provider ID: 417102

Provider Gender: Male

License Number: NP22974

NPI: 1356684781

 *Provider English Spoken: Y*


 *Provider Language(s) Spoken: Tagalog*


Cultural Competency: N


Board Certified Specialty: No
Operation Samahan

OPERATION SAMAHAN - NATIONAL C

 *2743 HIGHLAND AVE
NATIONAL CITY, CA 91950*

 *Phone: (844) 200-2426*

 *After Hours Phone: (844) 200-2426*

 *Website: www.operationsamahan.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-TH 8:00AM-6:00PM

F 8:00AM-5:00PM

D2. Directorio de atención primaria

CERTIFIED NURSE

PRACTITIONER

AQUINO, FELINO

Provider ID: 418302

Provider Gender: Male

License Number: NP22974

NPI: 1356684781

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog


Cultural Competency: N


Board Certified Specialty: No
Operation Samahan


OPERATION SAMAHAN

GRANGER SCHOOL BASED

 2101 GRANGER AVE
NATIONAL CITY, CA 91950

 Phone: (844) 200-2426

 After Hours Phone: (844)
200-2426

 Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

AQUINO, FELINO

Provider ID: 417102

Provider Gender: Male

License Number: NP22974

NPI: 1356684781

Provider English Spoken: Y


Provider Language(s)
Spoken: Tagalog


Cultural Competency: N


Board Certified Specialty: No
Operation Samahan

OPERATION SAMAHAN -
NATIONAL C

 2743 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (844) 200-2426

 After Hours Phone: (844)
200-2426

 Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-6:00PM
F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

AQUINO, FELINO

Provider ID: 418302

Provider Gender: Male

License Number: NP22974

NPI: 1356684781

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog


Cultural Competency: N


Board Certified Specialty: No
Operation Samahan


OPERATION SAMAHAN

GRANGER SCHOOL BASED

 2101 GRANGER AVE
NATIONAL CITY, CA 91950

 Phone: (844) 200-2426

 After Hours Phone: (844)
200-2426

 Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

DHARKAR-SURBER, SAPNA

Provider ID: 185270

Provider Gender: Female

License Number: NP95013257

NPI: 1538707765

Provider English Spoken: Y

Provider Language(s)
Spoken: Marathi, Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL


Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC

INC

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (619) 434-7308

Fax: (619) 434-7310

 After Hours Phone: (619)
434-7308

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

D2. Directorio de atención primaria

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE

PRACTITIONER


DHARKAR-SURBER, SAPNA


Provider ID: 185270

Provider Gender: Female

License Number: NP95013257

NPI: 1538707765

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Marathi, Spanish*

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL


Board Certified Specialty: No

La Maestra Family Clinic


LA MAESTRA FAMILY CLINIC

INC

 *217 HIGHLAND AVE
NATIONAL CITY, CA 91950*

 *Phone: (619) 434-7308*

Fax: (619) 434-7310

 *After Hours Phone: (619)
434-7308*

 *Website: www.lamaestra.org*

Email:


aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE

PRACTITIONER


LIM, IMELDA


Provider ID: 417102

Provider Gender: Female

License Number: NP95000203

NPI: 1093130395

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Tagalog*

Cultural Competency: N


Board Certified Specialty: No


Operation Samahan


OPERATION SAMAHAN -

NATIONAL C

 *2743 HIGHLAND AVE
NATIONAL CITY, CA 91950*

 *Phone: (844) 200-2426*

 *After Hours Phone: (844)
200-2426*

 *Website: www.operationsa
mahan.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-TH 8:00AM-6:00PM

F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER


LIM, IMELDA


Provider ID: 418302

Provider Gender: Female

License Number: NP95000203

NPI: 1093130395

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Tagalog*

Cultural Competency: N


Board Certified Specialty: No


Operation Samahan


OPERATION SAMAHAN

GRANGER SCHOOL BASED

 *2101 GRANGER AVE
NATIONAL CITY, CA 91950*

 *Phone: (844) 200-2426*

 *After Hours Phone: (844)
200-2426*

 *Website: www.operationsa
mahan.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

LIM, IMELDA

Provider ID: 418302

Provider Gender: Female

License Number: NP95000203

NPI: 1093130395

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Tagalog*

Cultural Competency: N


Board Certified Specialty: No


Operation Samahan


OPERATION SAMAHAN

GRANGER SCHOOL BASED

 *2101 GRANGER AVE
NATIONAL CITY, CA 91950*

 *Phone: (844) 200-2426*

 *After Hours Phone: (844)
200-2426*

 *Website: www.operationsa
mahan.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

D2. Directorio de atención primaria

American Sign Language (ASL): Provider Gender: Female
N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE PRACTITIONER

LIM, IMELDA

Provider ID: 417102
Provider Gender: Female
License Number: NP95000203
NPI: 1093130395
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Board Certified Specialty: No
Operation Samahan
OPERATION SAMAHAN - NATIONAL C

2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426

Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-6:00PM
F 8:00AM-5:00PM

CERTIFIED NURSE PRACTITIONER

LUM, YUIN-WAH

Provider ID: 418930

License Number: NP95010663
NPI: 1942764477

Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HEALTH CTR SD
NATIONAL CITY

1000 EUCLID AVE
NATIONAL CITY, CA 91950
Phone: (619) 515-2399
After Hours Phone: (619) 515-2399

Website: www.fhcsd.org
Email: lucinaj@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

LUM, YUIN-WAH

Provider ID: 418930
Provider Gender: Female
License Number: NP95010663
NPI: 1942764477

Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HEALTH CTR SD
NATIONAL CITY

1000 EUCLID AVE
NATIONAL CITY, CA 91950
Phone: (619) 515-2399

After Hours Phone: (619) 515-2399

Website: www.fhcsd.org
Email: lucinaj@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

NEVAREZ, IRENE

Provider ID: 185270
Provider Gender: Female
License Number: NP95009891
NPI: 1003166646

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL CTR

Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC INC

217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 564-8765
After Hours Phone: (619) 564-8765

Website: www.lamaestra.org

Email: aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

D2. Directorio de atención primaria

American Sign Language (ASL): **PRACTITIONER**

N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER


NEVAREZ, IRENE

Provider ID: 185270

Provider Gender: Female

License Number: NP95009891

NPI: 1003166646

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Board Certified Specialty: No


La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (619) 564-8765

 After Hours Phone: (619)
564-8765

 Website: www.lamaestra.org

Email:


aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE


OCHOA, ERLINDA

Provider ID: 185270

Provider Gender: Female

License Number: NP4430

NPI: 1346437464

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (619) 434-7308

 After Hours Phone: (619)
434-7308

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE

PRACTITIONER


OCHOA, ERLINDA


Provider ID: 185270

Provider Gender: Female

License Number: NP4430

NPI: 1346437464

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No


La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (619) 434-7308

 After Hours Phone: (619)
434-7308

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

REAL, MARIA


Provider ID: 185270

Provider Gender: Female

License Number: NP17328

NPI: 1548450471

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Catalan, German,
Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC

D2. Directorio de atención primaria

INC

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Phone: (619) 434-7308

After Hours Phone: (619)
434-7308

Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

REAL, MARIA

Provider ID: 185270

Provider Gender: Female

License Number: NP17328

NPI: 1548450471

Provider English Spoken: Y

Provider Language(s)
Spoken: Catalan, German,
Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC

INC

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Phone: (619) 434-7308

After Hours Phone: (619)
434-7308

Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

REID, EMILY

Provider ID: 185270

Provider Gender: Female

License Number: NP95002766

NPI: 1083081467

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC

INC

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Phone: (619) 434-7308

After Hours Phone: (619)
434-7308

Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

REID, EMILY

Provider ID: 185270

Provider Gender: Female

License Number: NP95002766

NPI: 1083081467

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC

INC

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Phone: (619) 434-7308

After Hours Phone: (619)
434-7308

Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

VERDUZCO GONZALEZ, AURORA



Provider ID: 185270

Provider Gender: Female


License Number: NP95001961

NPI: 1932452323

D2. Directorio de atención primaria

 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Spanish*
Cultural Competency: N
Board Certified Specialty: No
La Maestra Family Clinic
**LA MAESTRA FAMILY CLINIC
INC**



 217 HIGHLAND AVE
NATIONAL CITY, CA 91950
 *Phone: (619) 434-7308*
 *After Hours Phone: (619)
434-7308*
 *Website: www.lamaestra.org*
Email:
aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150





American Sign Language (ASL):
N
 *Accessibility: CONTACT
PROVIDER*
Hours: M-F 8:00AM-5:30PM


CERTIFIED NURSE PRACTITIONER

VERDUZCO GONZALEZ, AURORA

Provider ID: 185270
Provider Gender: Female
License Number: NP95001961
NPI: 1932452323

 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Spanish*
Cultural Competency: N
Board Certified Specialty: No
La Maestra Family Clinic
**LA MAESTRA FAMILY CLINIC
INC**


 217 HIGHLAND AVE
NATIONAL CITY, CA 91950
 *Phone: (619) 434-7308*
 *After Hours Phone: (619)
434-7308*
 *Website: www.lamaestra.org*
Email:





aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 *Accessibility: CONTACT
PROVIDER*
Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE PRACTITIONER

VILLANUEVADEGUTIE, BERENICE


Provider ID: 185270
Provider Gender: Female
License Number: NP95002188
NPI: 1952795536

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
La Maestra Family Clinic
**LA MAESTRA FAMILY CLINIC
INC**

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950
 *Phone: (619) 434-7308*
 *After Hours Phone: (619)
434-7308*
 *Website: www.lamaestra.org*
Email:

aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150


American Sign Language (ASL):
N




 *Accessibility: CONTACT
PROVIDER*
Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE PRACTITIONER


VILLANUEVADEGUTIE, BERENICE

Provider ID: 185270
Provider Gender: Female
License Number: NP95002188
NPI: 1952795536

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
La Maestra Family Clinic
**LA MAESTRA FAMILY CLINIC
INC**

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950
 *Phone: (619) 434-7308*
 *After Hours Phone: (619)
434-7308*
 *Website: www.lamaestra.org*
Email:

aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 *Accessibility: CONTACT
PROVIDER*
Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE PRACTITIONER

WILLIAMS, BREAHA *Provider ID: 185270*

D2. Directorio de atención primaria

Provider Gender: Female
License Number: NP95001840
NPI: 1063884864
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 434-7308
After Hours Phone: (619)
434-7308
Website: www.lamaestra.org
Email:

aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE PRACTITIONER

WILLIAMS, BREAHA

Provider ID: 185270
Provider Gender: Female
License Number: NP95001840
NPI: 1063884864

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 434-7308
After Hours Phone: (619)
434-7308
Website: www.lamaestra.org
Email:

aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:30PM

CHIROPRACTOR

HOURIHAN, KEITH

Provider ID: 185270
Provider Gender: Male
License Number: DC29314
NPI: 1306916994

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 434-7308
After Hours Phone: (619)
434-7308
Website: www.lamaestra.org
Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: TH 8:00AM-2:00PM

CHIROPRACTOR

HOURIHAN, KEITH

Provider ID: 185270
Provider Gender: Male
License Number: DC29314
NPI: 1306916994

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 434-7308
After Hours Phone: (619)
434-7308
Website: www.lamaestra.org
Email:

aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: TH 8:00AM-2:00PM

FAMILY PRACTICE **ALGHAMDI, ASMA**

D2. Directorio de atención primaria

Provider ID: 227418

Provider Gender: Female

License Number: A167529


NPI: 1316310840


Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH
PARADISE HILLS

 2400 E 8TH ST STE A
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/paradise-hills-family-clinic

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

ALGHAMDI, ASMA

Provider ID: 227418

Provider Gender: Female

License Number: A167529


NPI: 1316310840

Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH
PARADISE HILLS

 2400 E 8TH ST STE A
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/paradise-hills-family-clinic

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

ANDAYA, MIKHAEL

Provider ID: 418930

Provider Gender: Male

License Number: A176878

NPI: 1780189209

Provider English Spoken: Y

Provider Language(s)


Spoken: Tagalog


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HEALTH CTR SD
NATIONAL CITY

 1000 EUCLID AVE
NATIONAL CITY, CA 91950

 Phone: (619) 515-2399

 After Hours Phone: (619)
515-2399

 Website: www.fhcsd.org
Email: lucinaj@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

ANDAYA, MIKHAEL

Provider ID: 418930

Provider Gender: Male

License Number: A176878

NPI: 1780189209

Provider English Spoken: Y

Provider Language(s)


Spoken: Tagalog


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HEALTH CTR SD
NATIONAL CITY

 1000 EUCLID AVE
NATIONAL CITY, CA 91950

 Phone: (619) 515-2399

 After Hours Phone: (619)
515-2399

 Website: www.fhcsd.org
Email: lucinaj@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

BAEZ, BEATRICE

Provider ID: 417102

Provider Gender: Female

License Number: A74777

NPI: 1245372507

Provider English Spoken: Y

Provider Language(s)





Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Operation Samahan

D2. Directorio de atención primaria


OPERATION SAMAHAN - NATIONAL C

 2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
 Phone: (844) 200-2426
 After Hours Phone: (844)
200-2426
 Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TU 8:30AM-5:30PM
W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM

FAMILY PRACTICE


BAEZ, BEATRICE

Provider ID: 417102

Provider Gender: Female

License Number: A74777

NPI: 1245372507

 Provider English Spoken: Y





 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

Operation Samahan

OPERATION SAMAHAN - NATIONAL C

 2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
 Phone: (844) 200-2426
 After Hours Phone: (844)
200-2426
 Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TU 8:30AM-5:30PM
W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM

FAMILY PRACTICE


CAMPBELL, BRIANNA

Provider ID: 227418

Provider Gender: Female

License Number: A157488

NPI: 1316479892

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: CHULA
VISTA COMM HOSP


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH

PARADISE HILLS

 2400 E 8TH ST STE A
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/paradise-hills-family-clinic

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

CAMPBELL, BRIANNA

Provider Gender: Female

License Number: A157488

NPI: 1316479892

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: CHULA
VISTA COMM HOSP


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH

PARADISE HILLS

 2400 E 8TH ST STE A
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/paradise-hills-family-clinic

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

CANLAS, AVELINO


Provider ID: 417102

Provider Gender: Male

License Number: A74854

NPI: 1275682528

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Tagalog


Cultural Competency: N

Hospital Affiliation: PARADISE
VALLEY HOSPITAL


D2. Directorio de atención primaria

Board Certified Specialty: No
Operation Samahan
OPERATION SAMAHAN -
NATIONAL C

 2743 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (844) 200-2426

 After Hours Phone: (844)
200-2426

 Website: [www.operationsa
mahan.org](http://www.operationsa
mahan.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-6:00PM
F 8:00AM-5:00PM

FAMILY PRACTICE


CANLAS, AVELINO


Provider ID: 417102

Provider Gender: Male

License Number: A74854

NPI: 1275682528

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Tagalog


Cultural Competency: N

Hospital Affiliation: PARADISE
VALLEY HOSPITAL

Board Certified Specialty: No
Operation Samahan
OPERATION SAMAHAN -
NATIONAL C

 2743 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (844) 200-2426

 After Hours Phone: (844)
200-2426

 Website: [www.operationsa
mahan.org](http://www.operationsa
mahan.org)

mahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-6:00PM
F 8:00AM-5:00PM

FAMILY PRACTICE


CARRIEDO-CENICEROS, MARIA

Provider ID: 227412

Provider Gender: Female

License Number: A78373

NPI: 1295746618


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
NATIONAL CITY

 1136 D AVE
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: [syhealth.org/clinic
s/national- city- family- clin
ic- 1](http://syhealth.org/clinic
s/national- city- family- clin
ic- 1)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

CARRIEDO-CENICEROS, MARIA

Provider ID: 227412

Provider Gender: Female

License Number: A78373

NPI: 1295746618


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
NATIONAL CITY

 1136 D AVE
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: [syhealth.org/clinic
s/national- city- family- clin
ic- 1](http://syhealth.org/clinic
s/national- city- family- clin
ic- 1)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

CEVALLOS, JAMES

Provider ID: 227412

Provider Gender: Male

License Number: A55469

NPI: 1720181829

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA

D2. Directorio de atención primaria

VISTA

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

NATIONAL CITY

1136 D AVE
NATIONAL CITY, CA 91950

Phone: (619) 662-4100

Fax: (619) 474-3722

After Hours Phone: (619)
662-4100

Website: syhealth.org/clinics/national-city-family-clinic-1

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

CEVALLOS, JAMES

Provider ID: 227412

Provider Gender: Male

License Number: A55469

NPI: 1720181829

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

NATIONAL CITY

1136 D AVE
NATIONAL CITY, CA 91950

Phone: (619) 662-4100

Fax: (619) 474-3722

After Hours Phone: (619)
662-4100

Website: syhealth.org/clinics/national-city-family-clinic-1

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

DILLON, MAYRA

Provider ID: 227412

Provider Gender: Female

License Number: A112571

NPI: 1629232715

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

NATIONAL CITY

1136 D AVE
NATIONAL CITY, CA 91950

Phone: (619) 662-4100

Fax: (619) 336-2323

After Hours Phone: (619)
662-4100

Website: syhealth.org/clinics/national-city-family-clinic-1

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

DILLON, MAYRA

Provider ID: 227412

Provider Gender: Female

License Number: A112571

NPI: 1629232715

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

NATIONAL CITY

1136 D AVE
NATIONAL CITY, CA 91950

Phone: (619) 662-4100

Fax: (619) 336-2323

After Hours Phone: (619)
662-4100

Website: syhealth.org/clinics/national-city-family-clinic-1

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

LANUZA, MARK

D2. Directorio de atención primaria

Provider ID: 418930

Provider Gender: Male

License Number: 20A18460

NPI: 1992230593


Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego

FAMILY HEALTH CTR SD
NATIONAL CITY

 1000 EUCLID AVE
NATIONAL CITY, CA 91950

 Phone: (619) 515-2399

 After Hours Phone: (619)
515-2399


 Website: www.fhcsd.org
Email: lucinaj@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-3:30PM

TU 10:30AM-5:30PM

W 8:30AM-3:30PM

TH 10:30AM-5:30PM

F 8:30AM-3:30PM

FAMILY PRACTICE

LANUZA, MARK

Provider ID: 418930

Provider Gender: Male

License Number: 20A18460

NPI: 1992230593

Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San

Diego

FAMILY HEALTH CTR SD
NATIONAL CITY

 1000 EUCLID AVE
NATIONAL CITY, CA 91950

 Phone: (619) 515-2399

 After Hours Phone: (619)
515-2399

 Website: www.fhcsd.org
Email: lucinaj@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-3:30PM

TU 10:30AM-5:30PM

W 8:30AM-3:30PM

TH 10:30AM-5:30PM

F 8:30AM-3:30PM

FAMILY PRACTICE

LAW, KAREN

Provider ID: 227418

Provider Gender: Female

License Number: A138534

NPI: 1205253150

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: CHULA
VISTA COMM HOSP


Board Certified Specialty: No

IHP of Southern Cal-PHP


SAN YSIDRO HEALTH

PARADISE HILLS

 2400 E 8TH ST STE A
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/paradise-hills-family-clinic

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

LAW, KAREN

Provider ID: 227418

Provider Gender: Female

License Number: A138534

NPI: 1205253150

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: CHULA
VISTA COMM HOSP


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH

PARADISE HILLS

 2400 E 8TH ST STE A
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/paradise-hills-family-clinic

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

D2. Directorio de atención primaria

FAMILY PRACTICE

LEUTE, ERIC

Provider ID: 227418

Provider Gender: Male

License Number: A80832

NPI: 1720171507

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

PARADISE HILLS

2400 E 8TH ST STE A
NATIONAL CITY, CA 91950

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: syhealth.org/clinics/paradise-hills-family-clinic

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

LEUTE, ERIC

Provider ID: 227418

Provider Gender: Male

License Number: A80832

NPI: 1720171507

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

PARADISE HILLS

2400 E 8TH ST STE A
NATIONAL CITY, CA 91950

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: syhealth.org/clinics/paradise-hills-family-clinic

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

MEDINA, ALEXANDER

Provider ID: 361428

Provider Gender: Male

License Number: A133539

NPI: 1467714436

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SOUTH
BAY

330 E 8TH ST
NATIONAL CITY, CA 91950

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org

Email:

dinah.pierce@syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

MEDINA, ALEXANDER

Provider ID: 361428

Provider Gender: Male

License Number: A133539

NPI: 1467714436

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SOUTH

BAY

330 E 8TH ST
NATIONAL CITY, CA 91950

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org

Email:

dinah.pierce@syhealth.org

D2. Directorio de atención primaria

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


MOHAMEDI, NADIA

Provider ID: 227418

Provider Gender: Female

License Number: A146819

NPI: 1477947364

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH

PARADISE HILLS

 2400 E 8TH ST STE A
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/paradise-hills-family-clinic

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE


MOHAMEDI, NADIA

Provider ID: 227418

Provider Gender: Female

License Number: A146819

NPI: 1477947364

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH

PARADISE HILLS

 2400 E 8TH ST STE A
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/paradise-hills-family-clinic

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE


NAVARRO, VANESSAMARIA


Provider ID: 227418

Provider Gender: Female

License Number: A113624

NPI: 1952563421

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Filipino, Spanish,
Tagalog

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SHARP CHULA VISTA

MED CTR


Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH


PARADISE HILLS

 2400 E 8TH ST STE A
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

Fax: (619) 259-2807

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/paradise-hills-family-clinic

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

NAVARRO, VANESSAMARIA


Provider ID: 227418

Provider Gender: Female

License Number: A113624

NPI: 1952563421

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Filipino, Spanish,
Tagalog

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SHARP CHULA VISTA

MED CTR


Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

PARADISE HILLS


 2400 E 8TH ST STE A
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

Fax: (619) 259-2807

D2. Directorio de atención primaria


 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/paradise-hills-family-clinic

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


NIKZAD, JASON

Provider ID: 361428

Provider Gender: Male

License Number: 20A12653

NPI: 1508121674

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Farsi, Spanish


Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SOUTH
BAY

 330 E 8TH ST
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


 Website: www.syhealth.org
Email:

dinah.pierce@syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


NIKZAD, JASON

Provider ID: 361428

Provider Gender: Male

License Number: 20A12653

NPI: 1508121674

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Farsi, Spanish


Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SOUTH
BAY

 330 E 8TH ST
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org
Email:

dinah.pierce@syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


NOLASCO, JOANNA


Provider ID: 227412

Provider Gender: Female

License Number: A138919

NPI: 1154749315

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH

NATIONAL CITY

 1136 D AVE
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/national-city-family-clinic-1

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

NOLASCO, JOANNA

Provider ID: 227412

Provider Gender: Female

License Number: A138919

NPI: 1154749315

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH

NATIONAL CITY


 1136 D AVE
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


 Website: syhealth.org/clinics/national-city-family-clinic





D2. Directorio de atención primaria


ic-1
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

OCEGUEDA, JOSHUA


Provider ID: 227412
Provider Gender: Male
License Number: A165184
NPI: 1336643345
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
NATIONAL CITY





 1136 D AVE
NATIONAL CITY, CA 91950
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: syhealth.org/clinics/national-city-family-clinic-1

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM


FAMILY PRACTICE

OCEGUEDA, JOSHUA

Provider ID: 227412
Provider Gender: Male
License Number: A165184
NPI: 1336643345
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
NATIONAL CITY



 1136 D AVE
NATIONAL CITY, CA 91950
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: syhealth.org/clinics/national-city-family-clinic-1

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE





RICHARDSON, DANIELLE


Provider ID: 227418
Provider Gender: Female
License Number: A127555
NPI: 1609142892
 Provider English Spoken: Y
 Provider Language(s) Spoken: French, Portuguese, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL

ENCINITAS

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH



PARADISE HILLS

 2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: syhealth.org/clinics/paradise-hills-family-clinic




Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


RICHARDSON, DANIELLE

Provider ID: 227418
Provider Gender: Female
License Number: A127555
NPI: 1609142892
 Provider English Spoken: Y
 Provider Language(s) Spoken: French, Portuguese, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
ENCINITAS

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
PARADISE HILLS



 2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
 Phone: (619) 662-4100
 After Hours Phone: (619)



D2. Directorio de atención primaria


662-4100
 Website: syhealth.org/clinics/paradise-hills-family-clinic
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER


FAMILY PRACTICE

ROBERTS, POMAI

Provider ID: 227412
Provider Gender: Female
License Number: A103218
NPI: 1023278314
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
NATIONAL CITY



 1136 D AVE
NATIONAL CITY, CA 91950
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100

 Website: syhealth.org/clinics/national-city-family-clinic-1


Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE


ROBERTS, POMAI

Provider ID: 227412
Provider Gender: Female
License Number: A103218
NPI: 1023278314
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
NATIONAL CITY

 1136 D AVE
NATIONAL CITY, CA 91950
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100

 Website: syhealth.org/clinics/national-city-family-clinic-1



Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE


SCHUMAKER, EDWARD

Provider ID: 185270
Provider Gender: Male
License Number: 20A6433
NPI: 1184616872
 Provider English Spoken: Y
 Provider Language(s)

Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC INC
 217 HIGHLAND AVE
NATIONAL CITY, CA 91950
 Phone: (619) 434-7308
 After Hours Phone: (619) 434-7308



 Website: www.lamaestra.org

Email:
aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):




N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

SCHUMAKER, EDWARD

Provider ID: 185270
Provider Gender: Male
License Number: 20A6433
NPI: 1184616872
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC INC

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950
 Phone: (619) 434-7308
 After Hours Phone: (619) 434-7308


 Website: www.lamaestra.org

D2. Directorio de atención primaria

g
Email:
aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER








FAMILY PRACTICE

SNOOK, BRIAN

Provider ID: 227418
Provider Gender: Male
License Number: 20A11518
NPI: 1295977353
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
PARADISE HILLS
 2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
 Phone: (619) 662-4100
Fax: (619) 259-2806
 After Hours Phone: (619)
662-4100
 Website: syhealth.org/clinics/paradise-hills-family-clinic
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER



FAMILY PRACTICE

SNOOK, BRIAN





Provider ID: 227418
Provider Gender: Male
License Number: 20A11518
NPI: 1295977353
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
PARADISE HILLS
 2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
 Phone: (619) 662-4100
Fax: (619) 259-2806
 After Hours Phone: (619)
662-4100
 Website: syhealth.org/clinics/paradise-hills-family-clinic
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

STONES, RACHEL







Provider ID: 185270
Provider Gender: Female
License Number: A167184
NPI: 1720583040
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC INC

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950
 Phone: (619) 280-4213
 After Hours Phone: (619)
280-4213
 Website: www.lamaestra.org
g
Email:
aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: TH 8:00AM-2:00PM

FAMILY PRACTICE

STONES, RACHEL

Provider ID: 185270
Provider Gender: Female
License Number: A167184
NPI: 1720583040
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC
 217 HIGHLAND AVE
NATIONAL CITY, CA 91950
 Phone: (619) 280-4213
 After Hours Phone: (619)
280-4213
 Website: www.lamaestra.org
g
Email:
aschmaltz@lamaestra.org

D2. Directorio de atención primaria

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): Provider ID: 227418

N

 Accessibility: CONTACT PROVIDER

Hours: TH 8:00AM-2:00PM

FAMILY PRACTICE

VELASQUEZ, SHARON

Provider ID: 227418

Provider Gender: Female

License Number: A71304

NPI: 1972732584

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA


Board Certified Specialty: No

IHP of Southern Cal-PHP


SAN YSIDRO HEALTH


PARADISE HILLS

 2400 E 8TH ST STE A
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

Fax: (619) 259-2807

 After Hours Phone: (619)
662-4100


 Website: syhealth.org/clinics/paradise-hills-family-clinic

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): Provider ID: 418930

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

VELASQUEZ, SHARON

Provider Gender: Female

License Number: A71304

NPI: 1972732584

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA


Board Certified Specialty: No

IHP of Southern Cal-PHP


SAN YSIDRO HEALTH


PARADISE HILLS

 2400 E 8TH ST STE A
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

Fax: (619) 259-2807

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/paradise-hills-family-clinic

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FQHC

FAMILY HEALTH CTR SD

NATIONAL CITY,

Provider ID: 418930

NPI: 1417409228

Provider English Spoken: Y

Cultural Competency: N


Family Health Centers of San

Diego

FAMILY HEALTH CTR SD

NATIONAL CITY

 1000 EUCLID AVE
NATIONAL CITY, CA 91950

 Phone: (619) 515-2399

Fax: (619) 269-0053

 After Hours Phone: (619)
515-2399

 Website: www.fhcsd.org

Email: lucinaj@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M 8:30AM-3:30PM

TU 10:30AM-5:30PM

W 8:30AM-3:30PM

TH 10:30AM-5:30PM

F 8:30AM-3:30PM

FQHC

FAMILY HEALTH CTR SD

NATIONAL CITY,

Provider ID: 418930

NPI: 1417409228

Provider English Spoken: Y


Cultural Competency: N

Family Health Centers of San
Diego

FAMILY HEALTH CTR SD

NATIONAL CITY

 1000 EUCLID AVE
NATIONAL CITY, CA 91950

 Phone: (619) 515-2399

Fax: (619) 269-0053

 After Hours Phone: (619)
515-2399

 Website: www.fhcsd.org

D2. Directorio de atención primaria

Email: lucinaj@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER


Hours: M 8:30AM-3:30PM
TU 10:30AM-5:30PM
W 8:30AM-3:30PM
TH 10:30AM-5:30PM
F 8:30AM-3:30PM

FQHC

LA MAESTRA FAMILY CLINIC INC,

Provider ID: 185270
NPI: 1336353721

 Provider English Spoken: Y
Cultural Competency: N
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC INC

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950
 Phone: (619) 434-7308
Fax: (619) 434-7310


 After Hours Phone: (619) 434-7308

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: TH 8:00AM-2:00PM


FQHC

LA MAESTRA FAMILY CLINIC INC,

Provider ID: 185270
NPI: 1336353721

 Provider English Spoken: Y
Cultural Competency: N

La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC INC

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950
 Phone: (619) 434-7308
Fax: (619) 434-7310

 After Hours Phone: (619) 434-7308

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER

Hours: TH 8:00AM-2:00PM



FQHC

OPERATION SAMAHAN - NATIONAL C,


Provider ID: 417102
NPI: 1801907449


 Provider English Spoken: Y
Cultural Competency: N

Operation Samahan
OPERATION SAMAHAN - NATIONAL C

 2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
 Phone: (844) 200-2426


Fax: (619) 474-3919

 After Hours Phone: (844) 200-2426

 Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-6:00PM
F 8:00AM-5:00PM



FQHC

OPERATION SAMAHAN - NATIONAL C,


Provider ID: 417102
NPI: 1801907449

 Provider English Spoken: Y
Cultural Competency: N

Operation Samahan
OPERATION SAMAHAN - NATIONAL C


 2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
 Phone: (844) 200-2426
Fax: (619) 474-3919

 After Hours Phone: (844) 200-2426

 Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-6:00PM
F 8:00AM-5:00PM

D2. Directorio de atención primaria

FQHC

OPERATION SAMAHAN

GRANGER SCHOOL BASED,

Provider ID: 418302

NPI: 1205134517


 Provider English Spoken: Y
Cultural Competency: N

Operation Samahan

OPERATION SAMAHAN


GRANGER SCHOOL BASED

 2101 GRANGER AVE
NATIONAL CITY, CA 91950

 Phone: (844) 200-2426

Fax: (619) 434-8999

 After Hours Phone: (844)
200-2426

 Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC

OPERATION SAMAHAN

GRANGER SCHOOL BASED,

Provider ID: 418302

NPI: 1205134517


 Provider English Spoken: Y
Cultural Competency: N

Operation Samahan

OPERATION SAMAHAN

GRANGER SCHOOL BASED


 2101 GRANGER AVE
NATIONAL CITY, CA 91950

 Phone: (844) 200-2426

Fax: (619) 434-8999

 After Hours Phone: (844)

200-2426

 Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC

SAN YSIDRO HEALTH

NATIONAL CITY,

Provider ID: 227412

NPI: 1003869363


 Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH


NATIONAL CITY

 1136 D AVE
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

Fax: (619) 474-3722

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/national-city-family-clinic-1

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC

SAN YSIDRO HEALTH

NATIONAL CITY,

Provider ID: 227412

NPI: 1003869363


 Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH


NATIONAL CITY

 1136 D AVE
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

Fax: (619) 474-3722

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/national-city-family-clinic-1

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC

SAN YSIDRO HEALTH

PARADISE HILLS,

Provider ID: 227418

NPI: 1598907487


 Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH


PARADISE HILLS

 2400 E 8TH ST STE A
NATIONAL CITY, CA 91950


 Phone: (619) 662-4100

Fax: (619) 259-2807

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/paradise-hills-family-clinic




D2. Directorio de atención primaria

nic
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FQHC

SAN YSIDRO HEALTH PARADISE HILLS,






Provider ID: 227418
NPI: 1598907487
 Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH PARADISE HILLS
 2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
 Phone: (619) 662-4100
Fax: (619) 259-2807


 After Hours Phone: (619) 662-4100
 Website: syhealth.org/clinics/paradise-hills-family-clinic
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FQHC

SAN YSIDRO HEALTH SOUTH BAY,






Provider ID: 361428
NPI: 1851757215

 Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SOUTH BAY
 330 E 8TH ST
NATIONAL CITY, CA 91950
 Phone: (619) 662-4100
Fax: (619) 434-3514
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org
Email:


dinah.pierce@syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FQHC

SAN YSIDRO HEALTH SOUTH BAY,

Provider ID: 361428
NPI: 1851757215
 Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SOUTH BAY
 330 E 8TH ST
NATIONAL CITY, CA 91950
 Phone: (619) 662-4100
Fax: (619) 434-3514
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org
Email:

dinah.pierce@syhealth.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

HEPATOLOGY

GISH, ROBERT

Provider ID: 185270
Provider Gender: Male
License Number: G45632
NPI: 1548281322
 Provider English Spoken: Y
 Provider Language(s) Spoken: Dutch, French, Spanish, Vietnamese
Cultural Competency: N
Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC INC

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950
 Phone: (619) 434-7308
 After Hours Phone: (619) 434-7308
 Website: www.lamaestra.org
Email: aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM

HEPATOLOGY

D2. Directorio de atención primaria


GISH, ROBERT


Provider ID: 185270

Provider Gender: Male

License Number: G45632

NPI: 1548281322

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Dutch, French,
Spanish, Vietnamese


Cultural Competency: N


Board Certified Specialty: No


La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (619) 434-7308

 After Hours Phone: (619)
434-7308

 Website: www.lamaestra.org


Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM


INTERNAL MEDICINE


BRAVERMAN, IRA

Provider ID: 10635

Provider Gender: Male

NPI: 1124039755

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Tagalog
Cultural Competency: N

Hospital Affiliation: PARADISE

VALLEY HOSPITAL


Board Certified Specialty: Yes

Imperial Health Holdings


Medical Group-SD

IRA R BRAVERMAN

 610 EUCLID AVE STE 201
NATIONAL CITY, CA 91950

 Phone: (619) 267-8181

Fax: (619) 479-6750

 After Hours Phone: (619)
267-8181

 Website: N/A

Email: SIEAB@AOL.COM

Medi-Cal Open Panel: Yes

Min/Max Age: 18\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM


INTERNAL MEDICINE


HEKMAT, RAZI

Provider ID: 78388

Provider Gender: Male

NPI: 1871501205

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PARADISE

VALLEY HOSPITAL


Board Certified Specialty: No

Imperial Health Holdings

Medical Group-SD

RAZI D HEKMAT

 610 EUCLID AVE STE 201
NATIONAL CITY, CA 91950

 Phone: (619) 267-8181

Fax: (619) 479-6750

 After Hours Phone: (619)

267-8181

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

INTERNAL MEDICINE


LAMANTIA, MICHELE

Provider ID: 227412

Provider Gender: Female

License Number: G71855

NPI: 1124176102

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH

NATIONAL CITY

 1136 D AVE
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/national-city-family-clinic-1

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

LAMANTIA, MICHELE

Provider ID: 361428

D2. Directorio de atención primaria

Provider Gender: Female

License Number: G71855

NPI: 1124176102

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SOUTH
BAY

 330 E 8TH ST

NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org

Email:


dinah.pierce@syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

LAMANTIA, MICHELE

Provider ID: 361428

Provider Gender: Female

License Number: G71855

NPI: 1124176102

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SOUTH
BAY

 330 E 8TH ST

NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org

Email:

dinah.pierce@syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

LAMANTIA, MICHELE

Provider ID: 227412

Provider Gender: Female

License Number: G71855

NPI: 1124176102

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH


NATIONAL CITY

 1136 D AVE

NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/national-city-family-clinic-1

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

ROUEL, WADI

Provider ID: 185270

Provider Gender: Male

License Number: C55979

NPI: 1740254713

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic, Assyrian,
Spanish, Syriac

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL, GROSSMONT

HOSPITAL


Board Certified Specialty: No


La Maestra Family Clinic


LA MAESTRA FAMILY CLINIC
INC

 217 HIGHLAND AVE

NATIONAL CITY, CA 91950

 Phone: (619) 434-7308

 After Hours Phone: (619)
434-7308

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

INTERNAL MEDICINE

ROUEL, WADI

Provider ID: 185270

D2. Directorio de atención primaria

Provider Gender: Male

License Number: C55979

NPI: 1740254713

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Arabic, Assyrian,
Spanish, Syriac

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL, GROSSMONT

HOSPITAL

Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC

INC

📍 217 HIGHLAND AVE
NATIONAL CITY, CA 91950

☎ Phone: (619) 434-7308

🕒 After Hours Phone: (619)
434-7308

🌐 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

NEUROLOGY

CANTU-REYNA, GUILLERMO

Provider ID: 185270

Provider Gender: Male

License Number: A41375

NPI: 1447389101

☐ Provider English Spoken: Y

☐ Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR

Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC

INC

📍 217 HIGHLAND AVE
NATIONAL CITY, CA 91950

☎ Phone: (619) 798-3977

🕒 After Hours Phone: (619)
798-3977

🌐 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

NEUROLOGY

CANTU-REYNA, GUILLERMO

Provider ID: 185270

Provider Gender: Male

License Number: A41375

NPI: 1447389101

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR

Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC

INC

📍 217 HIGHLAND AVE
NATIONAL CITY, CA 91950

☎ Phone: (619) 798-3977

🕒 After Hours Phone: (619)
798-3977

🌐 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

ASLIAN, AZITA

Provider ID: 227418

Provider Gender: Female

License Number: A118227

NPI: 1851667661

☐ Provider English Spoken: Y

☐ Provider Language(s)

Spoken: Faroese, Fataleka

Cultural Competency: N

Hospital Affiliation: Hemet

Global Medical Center, Menifee

Global Medical Center,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

PARADISE HILLS

📍 2400 E 8TH ST STE A
NATIONAL CITY, CA 91950

☎ Phone: (619) 662-4100

🕒 After Hours Phone: (619)
662-4100

🌐 Website: syhealth.org/clinic

D2. Directorio de atención primaria


<i>s/paradise- hills- family- clinic</i>	 <i>Accessibility: CONTACT PROVIDER</i>	<i>Provider ID: 30132</i>
<i>Medi-Cal Open Panel: Yes</i>		<i>Provider Gender: Male</i>
<i>Min/Max Age: 0\150</i>		<i>NPI: 1376625913</i>
<i>American Sign Language (ASL): N</i>	<u>PEDIATRICS</u>	<input type="checkbox"/> <i>Provider English Spoken: Y</i>
 <i>Accessibility: CONTACT PROVIDER</i>	BAILONY, AHMAD	<input type="checkbox"/> <i>Provider Language(s) Spoken: Arabic</i>
	<i>Provider ID: 146949</i>	<i>Cultural Competency: N</i>
	<i>Provider Gender: Male</i>	<i>Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, PARADISE VALLEY HOSPITAL, SHARP CHULA VISTA MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL CHULA VISTA</i>
<u>OBSTETRICS / GYNECOLOGY</u>	<input type="checkbox"/> <i>Provider English Spoken: Y</i>	<i>Board Certified Specialty: Yes</i>
ASLIAN, AZITA	<input type="checkbox"/> <i>Provider Language(s) Spoken: Faroese, Fataleka</i>	<i>Rady Childrens Health Network MOHAMMED T BAILONY</i>
<i>Provider ID: 227418</i>	<i>Cultural Competency: N</i>	 <i>655 EUCLID AVE STE 205 NATIONAL CITY, CA 91950</i>
<i>Provider Gender: Female</i>	<i>Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, PARADISE VALLEY HOSPITAL, SHARP CHULA VISTA MED CTR, SHARP MEMORIAL HOSPITAL</i>	 <i>Phone: (619) 470-1945</i>
<i>License Number: A118227</i>	<i>Board Certified Specialty: Yes</i>	<i>Fax: (619) 475-5048</i>
<i>NPI: 1851667661</i>	<i>Rady Childrens Health Network AHMAD L BAILONY</i>	<input type="checkbox"/> <i>After Hours Phone: (619) 470-1945</i>
<input type="checkbox"/> <i>Provider English Spoken: Y</i>	 <i>655 EUCLID AVE STE 205 NATIONAL CITY, CA 91950</i>	<input type="checkbox"/> <i>After Hours Phone: (619) 470-1945</i>
<input type="checkbox"/> <i>Provider Language(s) Spoken: Faroese, Fataleka</i>	 <i>Phone: (619) 470-1945</i>	 <i>Website: N/A</i>
<i>Cultural Competency: N</i>	<i>Fax: (619) 475-5048</i>	<i>Email:</i>
<i>Hospital Affiliation: Hemet Global Medical Center, Menifee Global Medical Center, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL</i>	<input type="checkbox"/> <i>After Hours Phone: (619) 470-1945</i>	<i>BAILONY@YAHOO.COM</i>
<i>Board Certified Specialty: No</i>	 <i>Website: N/A</i>	<i>Medi-Cal Open Panel: Yes</i>
<i>IHP of Southern Cal-PHP SAN YSIDRO HEALTH PARADISE HILLS</i>	<i>Email:</i>	<i>Min/Max Age: 0\19</i>
 <i>2400 E 8TH ST STE A NATIONAL CITY, CA 91950</i>	<i>BAILONYPEDIATRICS@GMAIL.COM</i>	<i>American Sign Language (ASL): N</i>
 <i>Phone: (619) 662-4100</i>	<i>Medi-Cal Open Panel: Yes</i>	 <i>Accessibility: CONTACT PROVIDER</i>
<input type="checkbox"/> <i>After Hours Phone: (619) 662-4100</i>	<i>Min/Max Age: 0\19</i>	<i>Hours: M-F 9:00AM-5:00PM</i>
 <i>Website: syhealth.org/clinics/paradise- hills- family- clinic</i>	<i>American Sign Language (ASL): N</i>	
<i>Medi-Cal Open Panel: Yes</i>	 <i>Accessibility: CONTACT PROVIDER</i>	<u>PEDIATRICS</u>
<i>Min/Max Age: 0\150</i>	<i>Hours: M-F 9:00AM-5:00PM</i>	BARBADILLO, TERESITA
<i>American Sign Language (ASL): N</i>	<u>PEDIATRICS</u>	<i>Provider ID: 84258</i>
	BAILONY, MOHAMMED	<i>Provider Gender: Female</i>
		<i>NPI: 1952416695</i>






D2. Directorio de atención primaria

 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Tagalog*
Cultural Competency: N
*Hospital Affiliation: PARADISE
VALLEY HOSPITAL*
Board Certified Specialty: No
Rady Childrens Health Network
TERESITA T BARBADILLO
 655 EUCLID AVE STE 201
NATIONAL CITY, CA 91950
 *Phone: (619) 267-8601*
Fax: (619) 267-2242
 *After Hours Phone: (619)
267-8601*
 *Website: N/A*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
*American Sign Language (ASL):
N*
 *Accessibility: CONTACT
PROVIDER*
Hours: M-F 9:00AM-5:00PM

PEDIATRICS


BONSU, BEMA


Provider ID: 227412
Provider Gender: Male
License Number: C55180
NPI: 1932106986
 *Provider English Spoken: Y*
Cultural Competency: N
*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND*
Board Certified Specialty: No
IHP of Southern Cal-PHP
*SAN YSIDRO HEALTH
NATIONAL CITY*

 1136 D AVE
NATIONAL CITY, CA 91950
 *Phone: (619) 662-4100*
 *After Hours Phone: (619)
662-4100*
 *Website: syhealth.org/clinic
s/national- city- family- clin
ic- 1*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
*American Sign Language (ASL):
N*
 *Accessibility: CONTACT
PROVIDER*

PEDIATRICS



BONSU, BEMA






Provider ID: 227412
Provider Gender: Male
License Number: C55180
NPI: 1932106986
 *Provider English Spoken: Y*
Cultural Competency: N
*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND*
Board Certified Specialty: No
IHP of Southern Cal-PHP
*SAN YSIDRO HEALTH
NATIONAL CITY*
 1136 D AVE
NATIONAL CITY, CA 91950
 *Phone: (619) 662-4100*
 *After Hours Phone: (619)
662-4100*
 *Website: syhealth.org/clinic
s/national- city- family- clin
ic- 1*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

*American Sign Language (ASL):
N*
 *Accessibility: CONTACT
PROVIDER*

PEDIATRICS

CONE, STEPHANIE

Provider ID: 185270
Provider Gender: Female
License Number: A123929
NPI: 1437444858
 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Spanish*
Cultural Competency: N
*Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, RADY CHILDRENS
HOSPITAL SAN DIEGO*
Board Certified Specialty: No
La Maestra Family Clinic
*LA MAESTRA FAMILY CLINIC
INC*

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950
 *Phone: (619) 434-7308*
 *After Hours Phone: (619)
434-7308*
 *Website: www.lamaestra.or
g*
*Email:
aschmaltz@lamaestra.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
*American Sign Language (ASL):
N*
 *Accessibility: CONTACT
PROVIDER*

PEDIATRICS

D2. Directorio de atención primaria

CONE, STEPHANIE

Provider ID: 185270

Provider Gender: Female

License Number: A123929

NPI: 1437444858

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, RADY CHILDRENS

HOSPITAL SAN DIEGO

Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC

INC

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Phone: (619) 434-7308

After Hours Phone: (619)
434-7308

Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

DAY, CHRISTOPHER

Provider ID: 418930

Provider Gender: Male

License Number: A163862

NPI: 1184121253

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San
Diego

FAMILY HEALTH CTR SD

NATIONAL CITY

1000 EUCLID AVE
NATIONAL CITY, CA 91950

Phone: (619) 515-2399

After Hours Phone: (619)
515-2399

Website: www.fhcsd.org

Email: lucinaj@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-3:30PM

TU 10:30AM-5:30PM

W 8:30AM-3:30PM

TH 10:30AM-5:30PM

F 8:30AM-3:30PM

PEDIATRICS

DAY, CHRISTOPHER

Provider ID: 418930

Provider Gender: Male

License Number: A163862

NPI: 1184121253

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San
Diego

FAMILY HEALTH CTR SD

NATIONAL CITY

1000 EUCLID AVE
NATIONAL CITY, CA 91950

Phone: (619) 515-2399

After Hours Phone: (619)
515-2399

Website: www.fhcsd.org

Email: lucinaj@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-3:30PM

TU 10:30AM-5:30PM

W 8:30AM-3:30PM

TH 10:30AM-5:30PM

F 8:30AM-3:30PM

PEDIATRICS

FRESNO, BLANCA

Provider ID: 102433

Provider Gender: Female

NPI: 1346258787

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: PARADISE

VALLEY HOSPITAL, SHARP

CHULA VISTA MED CTR

Board Certified Specialty: No

Rady Childrens Health Network

BLANCA I FRESNO



655 EUCLID AVE STE 207
NATIONAL CITY, CA 91950

Phone: (619) 475-4575

Fax: (619) 475-4578

After Hours Phone: (619)
475-4575




D2. Directorio de atención primaria



 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: SU-SA 8:00AM-5:00PM

PEDIATRICS

GARCIA, RAFAEL


Provider ID: 84954
Provider Gender: Male
NPI: 1053414086
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO
Board Certified Specialty: No
Rady Childrens Health Network
RAFAEL A GARCIA




 610 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
 Phone: (619) 527-7700
Fax: (619) 527-3226
 After Hours Phone: (619)
527-7700


 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM


PEDIATRICS

RANA, DEBORAH

Provider ID: 227418
Provider Gender: Female
License Number: G88347
NPI: 1033191457
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL ENCINITAS, CHULA
VISTA COMM HOSP
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
PARADISE HILLS


 2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100




 Website: syhealth.org/clinics/paradise-hills-family-clinic


Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PEDIATRICS

RANA, DEBORAH



Provider ID: 227418
Provider Gender: Female
License Number: G88347
NPI: 1033191457
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL
HOSPITAL ENCINITAS, CHULA
VISTA COMM HOSP
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
PARADISE HILLS
 2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: syhealth.org/clinics/paradise-hills-family-clinic



Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PEDIATRICS

UY, CARMELITA

Provider ID: 424443
Provider Gender: Female
NPI: 1154431484
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Tagalog
Cultural Competency: N

Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
Rady Childrens Health Network
CARMELITA UY

 2340 E 8TH ST STE E
NATIONAL CITY, CA 91950
 Phone: (619) 216-8500

D2. Directorio de atención primaria

Fax: (619) 216-8511

☎ After Hours Phone: (619) 216-8511

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

VALENCIA, MARILES

Provider ID: 104060

Provider Gender: Female

NPI: 1275541625

☐ Provider English Spoken: Y

☐ Provider Language(s) Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, PARADISE VALLEY

HOSPITAL, SHARP CHULA

VISTA MED CTR, RADY

CHILDRENS HOSPITAL SAN

DIEGO, SCRIPPS MERCY

HOSPITAL

Board Certified Specialty: No

Rady Childrens Health Network

MARILES F VALENCIA

📍 655 EUCLID AVE STE 207
NATIONAL CITY, CA 91950

☎ Phone: (619) 475-4575

Fax: (619) 475-4578

☎ After Hours Phone: (619) 475-4575

🌐 Website: N/A

Email:

PEDIATRICSINPARADISE@YAHOO.COM

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Hours: SU-SA 8:00AM-5:00PM

PHYSICIANS ASSISTANT

ARMENTA, JORGE

Provider ID: 185270

Provider Gender: Male

License Number: PA13694

NPI: 1346382611

☐ Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

📍 217 HIGHLAND AVE
NATIONAL CITY, CA 91950

☎ Phone: (619) 434-7308

☎ After Hours Phone: (619) 434-7308

🌐 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM

PHYSICIANS ASSISTANT

ARMENTA, JORGE

Provider ID: 185270

Provider Gender: Male

License Number: PA13694

NPI: 1346382611

☐ Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

📍 217 HIGHLAND AVE
NATIONAL CITY, CA 91950

☎ Phone: (619) 434-7308

☎ After Hours Phone: (619) 434-7308

🌐 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM

PHYSICIANS ASSISTANT

BANGS, SASHA

Provider ID: 418930

Provider Gender: Female

License Number: PA55660

NPI: 1720524374

☐ Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No


Family Health Centers of San
Diego
FAMILY HEALTH CTR SD
NATIONAL CITY

📍 1000 EUCLID AVE
NATIONAL CITY, CA 91950

☎ Phone: (619) 515-2399

D2. Directorio de atención primaria

 After Hours Phone: (619) 515-2399

 Website: www.fhcsd.org

Email: lucinaj@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): Cultural Competency: N

N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT


BANGS, SASHA

Provider ID: 418930

Provider Gender: Female

License Number: PA55660

NPI: 1720524374

 Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego

FAMILY HEALTH CTR SD

NATIONAL CITY

 1000 EUCLID AVE
NATIONAL CITY, CA 91950

 Phone: (619) 515-2399

 After Hours Phone: (619) 515-2399

 Website: www.fhcsd.org


Email: lucinaj@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): Cultural Competency: N

N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT


MARTINEZ-MURGUIA, IRENE

Provider ID: 185270

Provider Gender: Female

License Number: PA20296

NPI: 1447492889

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC INC

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (619) 434-7308

 After Hours Phone: (619) 434-7308

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT


MARTINEZ-MURGUIA, IRENE


Provider ID: 185270

Provider Gender: Female

License Number: PA20296

NPI: 1447492889

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No


La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC INC

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (619) 434-7308

 After Hours Phone: (619) 434-7308

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

MERCER, KELLY

Provider ID: 185270

Provider Gender: Female

License Number: PA21625

NPI: 1154609790

 Provider English Spoken: Y

 Provider Language(s) Spoken: Arabic


Cultural Competency: N


Board Certified Specialty: No


La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC INC

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (619) 434-7308

 After Hours Phone: (619) 434-7308

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

D2. Directorio de atención primaria



N





 **Accessibility:** CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM

PHYSICIANS ASSISTANT

MERCER, KELLY


Provider ID: 185270
Provider Gender: Female
License Number: PA21625
NPI: 1154609790

 **Provider English Spoken:** Y
 **Provider Language(s) Spoken:** Arabic
Cultural Competency: N
Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC INC

 217 HIGHLAND AVE
NATIONAL CITY, CA 91950
 **Phone:** (619) 434-7308
 **After Hours Phone:** (619) 434-7308
 **Website:** www.lamaestra.org
Email:

aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

N

 **Accessibility:** CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM

OCEANSIDE



CERTIFIED NURSE

PRACTITIONER


BAEK, KILHYO

Provider ID: 206341
Provider Gender: Female
License Number: NP95003571
NPI: 1053776914

 **Provider English Spoken:** Y
 **Provider Language(s) Spoken:** Korean
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057
 **Phone:** (760) 631-5000
 **After Hours Phone:** (760) 631-5000
 **Website:** www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):

N
 **Accessibility:** CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM





CERTIFIED NURSE

PRACTITIONER


BAEK, KILHYO

Provider ID: 206341
Provider Gender: Female
License Number: NP95003571
NPI: 1053776914

 **Provider English Spoken:** Y
 **Provider Language(s) Spoken:** Korean
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057
 **Phone:** (760) 631-5000
 **After Hours Phone:** (760) 631-5000
 **Website:** www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):

N

 **Accessibility:** CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM





CERTIFIED NURSE

PRACTITIONER

BAEK, KILHYO

Provider ID: 206341
Provider Gender: Female
License Number: NP95003571
NPI: 1053776914

 **Provider English Spoken:** Y
 **Provider Language(s) Spoken:** Korean
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057
 **Phone:** (760) 631-5000
 **After Hours Phone:** (760) 631-5000
 **Website:** www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):

N

 **Accessibility:** CONTACT



D2. Directorio de atención primaria

PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE PRACTITIONER




BAEK, KILHYO

Provider ID: 206341
Provider Gender: Female
License Number: NP95003571
NPI: 1053776914

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Korean
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC


 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N



 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE PRACTITIONER




BAEK, KILHYO

Provider ID: 206341
Provider Gender: Female
License Number: NP95003571
NPI: 1053776914

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Korean
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N



 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE PRACTITIONER




BAEK, KILHYO


Provider ID: 206341
Provider Gender: Female
License Number: NP95003571
NPI: 1053776914

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Korean
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC


 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N



 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE PRACTITIONER

BINETTE, DONYA




Provider ID: 480247
Provider Gender: Female
License Number: NP95001653
NPI: 1427325166

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

TRUECARE


 2210 MESA DR STE 300
OCEANSIDE, CA 92054
 Phone: (760) 757-5841
 After Hours Phone: (760)
757-5841

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:30PM

CERTIFIED NURSE

D2. Directorio de atención primaria

PRACTITIONER

BINETTE, DONYA

Provider ID: 480247

Provider Gender: Female

License Number: NP95001653

NPI: 1427325166

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

 2210 MESA DR STE 300
OCEANSIDE, CA 92054

 Phone: (760) 757-5841

 After Hours Phone: (760)
757-5841

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-4:30PM

CERTIFIED NURSE

PRACTITIONER

BINETTE, DONYA

Provider ID: 480247

Provider Gender: Female

License Number: NP95001653

NPI: 1427325166

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

 2210 MESA DR STE 300
OCEANSIDE, CA 92054

 Phone: (760) 757-5841

 After Hours Phone: (760)
757-5841

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-4:30PM

CERTIFIED NURSE

PRACTITIONER

BINETTE, DONYA

Provider ID: 480247

Provider Gender: Female

License Number: NP95001653

NPI: 1427325166

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

 2210 MESA DR STE 300
OCEANSIDE, CA 92054

 Phone: (760) 757-5841

 After Hours Phone: (760)
757-5841

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-4:30PM

CERTIFIED NURSE

PRACTITIONER

BROMAN, GRETCHEN

Provider ID: 402436

Provider Gender: Female

License Number: NP95007885

NPI: 1922421288

Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

HORNE STREET

 517 N HORNE ST
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000


 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

BROMAN, GRETCHEN

Provider ID: 206341

Provider Gender: Female

License Number: NP95007885

NPI: 1922421288


Provider English Spoken: Y


Cultural Competency: N

D2. Directorio de atención primaria

*Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC*

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

BROMAN, GRETCHEN

Provider ID: 206341

Provider Gender: Female

License Number: NP95007885


NPI: 1922421288


 Provider English Spoken: Y
Cultural Competency: N


*Board Certified Specialty: No
IHP of Southern Cal-PHP*

VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

BROMAN, GRETCHEN

Provider ID: 206341

Provider Gender: Female

License Number: NP95007885


NPI: 1922421288


 Provider English Spoken: Y
Cultural Competency: N

*Board Certified Specialty: No
IHP of Southern Cal-PHP*

VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER


BROMAN, GRETCHEN

Provider ID: 206341

Provider Gender: Female


License Number: NP95007885


NPI: 1922421288


 Provider English Spoken: Y

*Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC*

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

BROMAN, GRETCHEN

Provider ID: 206341

Provider Gender: Female

License Number: NP95007885


NPI: 1922421288


 Provider English Spoken: Y
Cultural Competency: N

*Board Certified Specialty: No
IHP of Southern Cal-PHP*

VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

D2. Directorio de atención primaria

N


 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM




CERTIFIED NURSE


PRACTITIONER

BROMAN, GRETCHEN


Provider ID: 402436
Provider Gender: Female
License Number: NP95007885
NPI: 1922421288

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
HORNE STREET

 517 N HORNE ST
OCEANSIDE, CA 92054
 *Phone: (760) 631-5000*
 *After Hours Phone: (760) 631-5000*

 *Website: www.vistacommunityclinic.org*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM


CERTIFIED NURSE




PRACTITIONER

BROMAN, GRETCHEN

Provider ID: 402436
Provider Gender: Female
License Number: NP95007885


NPI: 1922421288

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
HORNE STREET

 517 N HORNE ST
OCEANSIDE, CA 92054
 *Phone: (760) 631-5000*
 *After Hours Phone: (760) 631-5000*

 *Website: www.vistacommunityclinic.org*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM




CERTIFIED NURSE


PRACTITIONER


BROMAN, GRETCHEN

Provider ID: 402436
Provider Gender: Female
License Number: NP95007885
NPI: 1922421288

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
HORNE STREET

 517 N HORNE ST
OCEANSIDE, CA 92054
 *Phone: (760) 631-5000*
 *After Hours Phone: (760) 631-5000*

 *Website: www.vistacommunityclinic.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM




CERTIFIED NURSE


PRACTITIONER

BROMAN, GRETCHEN


Provider ID: 206341
Provider Gender: Female
License Number: NP95007885
NPI: 1922421288

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057
 *Phone: (760) 631-5000*
 *After Hours Phone: (760) 631-5000*

 *Website: www.vistacommunityclinic.org*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

D2. Directorio de atención primaria

CHILAKA, SAMUEL

Provider ID: 206341

Provider Gender: Male

License Number: NP95017483


NPI: 1679140644


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

CHILAKA, SAMUEL

Provider ID: 206341

Provider Gender: Male

License Number: NP95017483


NPI: 1679140644

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

CHILAKA, SAMUEL

Provider ID: 206341

Provider Gender: Male

License Number: NP95017483


NPI: 1679140644


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

CHILAKA, SAMUEL

Provider ID: 206341

Provider Gender: Male

License Number: NP95017483


NPI: 1679140644


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

CHILAKA, SAMUEL

Provider ID: 206341

Provider Gender: Male

License Number: NP95017483

NPI: 1679140644

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 4700 N RIVER RD

D2. Directorio de atención primaria

OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE PRACTITIONER

CHILAKA, SAMUEL

Provider ID: 206341
Provider Gender: Male
License Number: NP95017483
NPI: 1679140644
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC

4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE PRACTITIONER

CHRISTY, TYLER

Provider ID: 206341
Provider Gender: Male
License Number: NP95025871
NPI: 1689094971
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC

4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE PRACTITIONER

CHRISTY, TYLER

Provider ID: 206341
Provider Gender: Male
License Number: NP95025871
NPI: 1689094971
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC

4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE PRACTITIONER

CHRISTY, TYLER

Provider ID: 206341
Provider Gender: Male
License Number: NP95025871
NPI: 1689094971
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC

4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

D2. Directorio de atención primaria

SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

CHRISTY, TYLER

Provider ID: 206341

Provider Gender: Male

License Number: NP95025871

NPI: 1689094971


Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 4700 N RIVER RD

OCEANSIDE, CA 92057

 Phone: (760) 631-5000


 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

CHRISTY, TYLER

Provider ID: 206341

Provider Gender: Male

License Number: NP95025871

NPI: 1689094971


Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 4700 N RIVER RD

OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

CHRISTY, TYLER

Provider ID: 206341

Provider Gender: Male

License Number: NP95025871

NPI: 1689094971


Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 4700 N RIVER RD

OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

CORY, ALLISON

Provider ID: 206341

Provider Gender: Female

License Number: NP20497

NPI: 1194027706


Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP


VISTA COMMUNITY CLINIC

 4700 N RIVER RD

OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

CORY, ALLISON

Provider ID: 206341

Provider Gender: Female

License Number: NP20497

NPI: 1194027706

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

D2. Directorio de atención primaria

IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC


 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000
 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

CORY, ALLISON

Provider ID: 206341

Provider Gender: Female

License Number: NP20497

NPI: 1194027706

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000
 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

CORY, ALLISON

Provider ID: 206341

Provider Gender: Female




License Number: NP20497

NPI: 1194027706

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000
 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

CORY, ALLISON

Provider ID: 206341

Provider Gender: Female

License Number: NP20497

NPI: 1194027706

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000
 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

CORY, ALLISON

Provider ID: 206341

Provider Gender: Female





License Number: NP20497

NPI: 1194027706

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000
 Website: www.vistacommunityclinic.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

D2. Directorio de atención primaria

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM




CERTIFIED NURSE **PRACTITIONER**


EVERETT, ELIZABETH

Provider ID: 206341
Provider Gender: Female
License Number: NP95025094
NPI: 1942952767

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Sign Language*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC


 4700 N RIVER RD
OCEANSIDE, CA 92057
 *Phone: (760) 631-5000*
 *After Hours Phone: (760) 631-5000*

 *Website: www.vistacommunityclinic.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N



 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE **PRACTITIONER**

EVERETT, ELIZABETH




Provider ID: 206341
Provider Gender: Female
License Number: NP95025094

NPI: 1942952767

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Sign Language*
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057
 *Phone: (760) 631-5000*
 *After Hours Phone: (760) 631-5000*

 *Website: www.vistacommunityclinic.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N



 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE **PRACTITIONER**




EVERETT, ELIZABETH

Provider ID: 206341
Provider Gender: Female
License Number: NP95025094
NPI: 1942952767

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Sign Language*
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057
 *Phone: (760) 631-5000*
 *After Hours Phone: (760) 631-5000*

631-5000

 *Website: www.vistacommunityclinic.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N



 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE **PRACTITIONER**




EVERETT, ELIZABETH


Provider ID: 206341
Provider Gender: Female
License Number: NP95025094
NPI: 1942952767

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Sign Language*
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057
 *Phone: (760) 631-5000*
 *After Hours Phone: (760) 631-5000*

 *Website: www.vistacommunityclinic.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

D2. Directorio de atención primaria

CERTIFIED NURSE

PRACTITIONER

EVERETT, ELIZABETH

Provider ID: 206341

Provider Gender: Female

License Number: NP95025094

NPI: 1942952767

Provider English Spoken: Y

Provider Language(s)
Spoken: Sign Language


Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 4700 N RIVER RD

OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

EVERETT, ELIZABETH

Provider ID: 206341

Provider Gender: Female

License Number: NP95025094

NPI: 1942952767

Provider English Spoken: Y

Provider Language(s)
Spoken: Sign Language


Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 4700 N RIVER RD

OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

HALGEDAHL, YI TING

Provider ID: 206341

Provider Gender: Female

License Number: NP95006826

NPI: 1619246907

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese, Mandarin


Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 4700 N RIVER RD

OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

HALGEDAHL, YI TING

Provider ID: 206341

Provider Gender: Female

License Number: NP95006826

NPI: 1619246907

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese, Mandarin


Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP


VISTA COMMUNITY CLINIC

 4700 N RIVER RD

OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

HALGEDAHL, YI TING




Provider ID: 206341

D2. Directorio de atención primaria

Provider Gender: Female
License Number: NP95006826
NPI: 1619246907

Provider English Spoken: Y
 Provider Language(s)
Spoken: Chinese, Mandarin
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

HALGEDAHL, YI TING

Provider ID: 402434



Provider Gender: Female

License Number: NP95006826
NPI: 1619246907

Provider English Spoken: Y
 Provider Language(s)
Spoken: Chinese, Mandarin
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
PIER VIEW WAY

 818 PIER VIEW WAY
OCEANSIDE, CA 92054

 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

HALGEDAHL, YI TING




Provider ID: 206341

Provider Gender: Female

License Number: NP95006826
NPI: 1619246907

Provider English Spoken: Y
 Provider Language(s)
Spoken: Chinese, Mandarin
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

HALGEDAHL, YI TING




Provider ID: 402434

Provider Gender: Female

License Number: NP95006826
NPI: 1619246907

Provider English Spoken: Y
 Provider Language(s)
Spoken: Chinese, Mandarin
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
PIER VIEW WAY

 818 PIER VIEW WAY
OCEANSIDE, CA 92054
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

HALGEDAHL, YI TING

Provider ID: 402436




Provider Gender: Female


License Number: NP95006826
NPI: 1619246907


Provider English Spoken: Y

D2. Directorio de atención primaria

 *Provider Language(s)*
Spoken: Chinese, Mandarin
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
HORNE STREET

 517 N HORNE ST
OCEANSIDE, CA 92054
 *Phone: (760) 631-5000*
 *After Hours Phone: (760)*
631-5000

 *Website: www.vistacommunityclinic.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N



 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM




CERTIFIED NURSE


PRACTITIONER


HALGEDAHL, YI TING

Provider ID: 402436
Provider Gender: Female
License Number: NP95006826
NPI: 1619246907

 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Chinese, Mandarin
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
HORNE STREET

 517 N HORNE ST
OCEANSIDE, CA 92054
 *Phone: (760) 631-5000*
 *After Hours Phone: (760)*

631-5000
 *Website: www.vistacommunityclinic.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N



 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM




CERTIFIED NURSE


PRACTITIONER


HALGEDAHL, YI TING

Provider ID: 402434
Provider Gender: Female
License Number: NP95006826
NPI: 1619246907

 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Chinese, Mandarin
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
PIER VIEW WAY

 818 PIER VIEW WAY
OCEANSIDE, CA 92054
 *Phone: (760) 631-5000*
 *After Hours Phone: (760)*
631-5000

 *Website: www.vistacommunityclinic.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N



 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE




PRACTITIONER


HALGEDAHL, YI TING


Provider ID: 402434
Provider Gender: Female
License Number: NP95006826
NPI: 1619246907

 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Chinese, Mandarin
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
PIER VIEW WAY

 818 PIER VIEW WAY
OCEANSIDE, CA 92054
 *Phone: (760) 631-5000*
 *After Hours Phone: (760)*
631-5000

 *Website: www.vistacommunityclinic.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N



 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

HALGEDAHL, YI TING

Provider ID: 206341
Provider Gender: Female
License Number: NP95006826
NPI: 1619246907

 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Chinese, Mandarin
Cultural Competency: N

D2. Directorio de atención primaria

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

4700 N RIVER RD

OCEANSIDE, CA 92057

Phone: (760) 631-5000

After Hours Phone: (760)
631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

HALGEDAHL, YI TING

Provider ID: 206341

Provider Gender: Female

License Number: NP95006826

NPI: 1619246907

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese, Mandarin

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

4700 N RIVER RD

OCEANSIDE, CA 92057

Phone: (760) 631-5000

After Hours Phone: (760)
631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

HALGEDAHL, YI TING

Provider ID: 402436

Provider Gender: Female

License Number: NP95006826

NPI: 1619246907

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese, Mandarin

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

HORNE STREET

517 N HORNE ST

OCEANSIDE, CA 92054

Phone: (760) 631-5000

After Hours Phone: (760)
631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

HALGEDAHL, YI TING

Provider ID: 402436

Provider Gender: Female

License Number: NP95006826

NPI: 1619246907

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese, Mandarin

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

HORNE STREET

517 N HORNE ST

OCEANSIDE, CA 92054

Phone: (760) 631-5000

After Hours Phone: (760)
631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

HARRIS, PAMELA

Provider ID: 206341

Provider Gender: Female

License Number: NP95022679

NPI: 1407545221

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

4700 N RIVER RD


D2. Directorio de atención primaria






OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760) 631-5000
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

HARRIS, PAMELA


Provider ID: 206341
Provider Gender: Female
License Number: NP95022679
NPI: 1407545221
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC






 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760) 631-5000
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

HARRIS, PAMELA


Provider ID: 206341
Provider Gender: Female
License Number: NP95022679
NPI: 1407545221
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC






 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760) 631-5000
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

HARRIS, PAMELA


Provider ID: 206341
Provider Gender: Female
License Number: NP95022679
NPI: 1407545221
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC






 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760) 631-5000
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

HARRIS, PAMELA

Provider ID: 206341
Provider Gender: Female
License Number: NP95022679
NPI: 1407545221
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760) 631-5000
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

D2. Directorio de atención primaria

SA 9:00AM-4:00PM

CERTIFIED NURSE
PRACTITIONER

HARRIS, PAMELA

Provider ID: 206341

Provider Gender: Female

License Number: NP95022679


NPI: 1407545221


Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

CERTIFIED NURSE
PRACTITIONER

HOWELL, AMANDA

Provider ID: 206341

Provider Gender: Female

License Number: NP95020894


NPI: 1427797943


Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

CERTIFIED NURSE
PRACTITIONER

HOWELL, AMANDA

Provider ID: 206341

Provider Gender: Female

License Number: NP95020894


NPI: 1427797943


Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

CERTIFIED NURSE
PRACTITIONER

HOWELL, AMANDA

Provider ID: 206341

Provider Gender: Female

License Number: NP95020894


NPI: 1427797943


Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

CERTIFIED NURSE
PRACTITIONER

HOWELL, AMANDA

Provider ID: 206341

Provider Gender: Female

License Number: NP95020894

NPI: 1427797943

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

D2. Directorio de atención primaria


IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000
 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

HOWELL, AMANDA

Provider ID: 206341

Provider Gender: Female


License Number: NP95020894

NPI: 1427797943

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000
 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

HOWELL, AMANDA

Provider ID: 206341

Provider Gender: Female

License Number: NP95020894

NPI: 1427797943

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000
 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER


KELLEHER, BRIDGET


Provider ID: 402434

Provider Gender: Female

License Number: NP95003447

NPI: 1245695006

 Provider English Spoken: Y

 Provider Language(s)





Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC
PIER VIEW WAY

 818 PIER VIEW WAY
OCEANSIDE, CA 92054
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000
 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TU 8:00AM-5:00PM
W 8:00AM-7:00PM

TH-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

KELLEHER, BRIDGET

Provider ID: 402434

Provider Gender: Female

License Number: NP95003447

NPI: 1245695006

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Spanish




Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP

D2. Directorio de atención primaria

VISTA COMMUNITY CLINIC
PIER VIEW WAY

 818 PIER VIEW WAY
OCEANSIDE, CA 92054
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000


 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-TU 8:00AM-5:00PM

W 8:00AM-7:00PM

TH-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

KELLEHER, BRIDGET

Provider ID: 402434

Provider Gender: Female

License Number: NP95003447

NPI: 1245695006

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: TRI CITY
MEDICAL CTR


Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

PIER VIEW WAY

 818 PIER VIEW WAY
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

 After Hours Phone: (760)

631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-TU 8:00AM-5:00PM

W 8:00AM-7:00PM

TH-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

KELLEHER, BRIDGET

Provider ID: 402434

Provider Gender: Female

License Number: NP95003447

NPI: 1245695006

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: TRI CITY
MEDICAL CTR


Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

PIER VIEW WAY

 818 PIER VIEW WAY
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-TU 8:00AM-5:00PM

W 8:00AM-7:00PM

TH-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

TAYLOR, CHRISTOPHER

Provider ID: 206341

Provider Gender: Male

License Number: NP95020584

NPI: 1851747166

Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

TAYLOR, CHRISTOPHER

Provider ID: 206341

Provider Gender: Male

D2. Directorio de atención primaria


License Number: NP95020584
NPI: 1851747166


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

TAYLOR, CHRISTOPHER

Provider ID: 206341

Provider Gender: Male

License Number: NP95020584


NPI: 1851747166


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

TAYLOR, CHRISTOPHER

Provider ID: 206341

Provider Gender: Male

License Number: NP95020584


NPI: 1851747166


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000


 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

TAYLOR, CHRISTOPHER

Provider ID: 206341

Provider Gender: Male

License Number: NP95020584


NPI: 1851747166


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

TAYLOR, CHRISTOPHER

Provider ID: 206341

Provider Gender: Male

License Number: NP95020584


NPI: 1851747166


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP



VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000





D2. Directorio de atención primaria



 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

WAGNER, TASIA


Provider ID: 206341
Provider Gender: Female
License Number: NP95001650
NPI: 1598158768
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760) 631-5000




 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM



CERTIFIED NURSE

PRACTITIONER

WAGNER, TASIA

Provider ID: 206341
Provider Gender: Female
License Number: NP95001650
NPI: 1598158768
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC




 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760) 631-5000

 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM



CERTIFIED NURSE

PRACTITIONER

WAGNER, TASIA

Provider ID: 206341
Provider Gender: Female
License Number: NP95001650
NPI: 1598158768
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000


 After Hours Phone: (760) 631-5000




 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM



CERTIFIED NURSE

PRACTITIONER

WAGNER, TASIA

Provider ID: 206341
Provider Gender: Female
License Number: NP95001650
NPI: 1598158768
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760) 631-5000

 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

D2. Directorio de atención primaria

CERTIFIED NURSE

PRACTITIONER

WAGNER, TASIA

Provider ID: 206341

Provider Gender: Female

License Number: NP95001650

NPI: 1598158768

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

4700 N RIVER RD

OCEANSIDE, CA 92057

Phone: (760) 631-5000

After Hours Phone: (760)
631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

WAGNER, TASIA

Provider ID: 206341

Provider Gender: Female

License Number: NP95001650

NPI: 1598158768

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

4700 N RIVER RD

OCEANSIDE, CA 92057

Phone: (760) 631-5000

After Hours Phone: (760)
631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FAMILY PRACTICE

ESPINOSA-SILVA, YAMINAH

Provider ID: 206341

Provider Gender: Female

License Number: 20A12958

NPI: 1003172016

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, TRI CITY MEDICAL
CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

4700 N RIVER RD

OCEANSIDE, CA 92057

Phone: (760) 631-5000

After Hours Phone: (760)
631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FAMILY PRACTICE

ESPINOSA-SILVA, YAMINAH

Provider ID: 206341

Provider Gender: Female

License Number: 20A12958

NPI: 1003172016

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, TRI CITY MEDICAL
CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

4700 N RIVER RD

OCEANSIDE, CA 92057

Phone: (760) 631-5000

After Hours Phone: (760)
631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N






Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FAMILY PRACTICE

ESPINOSA-SILVA, YAMINAH






D2. Directorio de atención primaria

Provider ID: 206341
Provider Gender: Female
License Number: 20A12958
NPI: 1003172016
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, TRI CITY MEDICAL
CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FAMILY PRACTICE


ESPINOSA-SILVA, YAMINAH


Provider ID: 206341
Provider Gender: Female
License Number: 20A12958
NPI: 1003172016
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, TRI CITY MEDICAL
CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FAMILY PRACTICE





ESPINOSA-SILVA, YAMINAH

Provider ID: 206341
Provider Gender: Female
License Number: 20A12958
NPI: 1003172016
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, TRI CITY MEDICAL
CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
 4700 N RIVER RD

OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FAMILY PRACTICE

ESPINOSA-SILVA, YAMINAH






Provider ID: 206341
Provider Gender: Female
License Number: 20A12958
NPI: 1003172016
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, TRI CITY MEDICAL
CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):

D2. Directorio de atención primaria

- N**
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM SA 9:00AM-4:00PM
- FAMILY PRACTICE**
FATLAND, SARAH
Provider ID: 206341
Provider Gender: Female
License Number: 20A18374
NPI: 1831354026
 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
 4700 N RIVER RD
OCEANSIDE, CA 92057
 *Phone: (760) 631-5000*
 *After Hours Phone: (760) 631-5000*
 *Website: www.vistacommunityclinic.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM SA 9:00AM-4:00PM
- FAMILY PRACTICE**
FATLAND, SARAH
Provider ID: 206341
Provider Gender: Female
License Number: 20A18374
NPI: 1831354026
 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
 4700 N RIVER RD
OCEANSIDE, CA 92057
 *Phone: (760) 631-5000*
 *After Hours Phone: (760) 631-5000*
 *Website: www.vistacommunityclinic.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT*
- Board Certified Specialty: No*
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
 4700 N RIVER RD
OCEANSIDE, CA 92057
 *Phone: (760) 631-5000*
 *After Hours Phone: (760) 631-5000*
 *Website: www.vistacommunityclinic.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM SA 9:00AM-4:00PM
- FAMILY PRACTICE**
FATLAND, SARAH
Provider ID: 206341
Provider Gender: Female
License Number: 20A18374
NPI: 1831354026
 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
 4700 N RIVER RD
OCEANSIDE, CA 92057
 *Phone: (760) 631-5000*
 *After Hours Phone: (760) 631-5000*
 *Website: www.vistacommunityclinic.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT*
- PROVIDER*
Hours: M-F 8:00AM-5:00PM SA 9:00AM-4:00PM
- FAMILY PRACTICE**
FATLAND, SARAH
Provider ID: 206341
Provider Gender: Female
License Number: 20A18374
NPI: 1831354026
 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
 4700 N RIVER RD
OCEANSIDE, CA 92057
 *Phone: (760) 631-5000*
 *After Hours Phone: (760) 631-5000*
 *Website: www.vistacommunityclinic.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM SA 9:00AM-4:00PM
- FAMILY PRACTICE**
FATLAND, SARAH
Provider ID: 206341
Provider Gender: Female
License Number: 20A18374
NPI: 1831354026
 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP


D2. Directorio de atención primaria






VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FAMILY PRACTICE

FATLAND, SARAH



Provider ID: 206341
Provider Gender: Female
License Number: 20A18374
NPI: 1831354026
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM






SA 9:00AM-4:00PM

FAMILY PRACTICE

KETCHEL, CLINT








Provider ID: 402434
Provider Gender: Male
License Number: A135564
NPI: 1699038125
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, Chaldean
Neo-Aramaic, Spanish,
Syriac

Cultural Competency: N
Hospital Affiliation:
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL ENCINITAS, TRI CITY
MEDICAL CTR, WHITTIER
HOSPITAL MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
PIER VIEW WAY

 818 PIER VIEW WAY
OCEANSIDE, CA 92054
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

KETCHEL, CLINT

Provider ID: 402434
Provider Gender: Male
License Number: A135564
NPI: 1699038125
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, Chaldean
Neo-Aramaic, Spanish,
Syriac
Cultural Competency: N
Hospital Affiliation:
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL ENCINITAS, TRI CITY
MEDICAL CTR, WHITTIER
HOSPITAL MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
PIER VIEW WAY
 818 PIER VIEW WAY
OCEANSIDE, CA 92054
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

D2. Directorio de atención primaria

FAMILY PRACTICE

KETCHEL, CLINT

Provider ID: 206341

Provider Gender: Male

License Number: A135564

NPI: 1699038125

Provider English Spoken: Y

*Provider Language(s)
Spoken: Arabic, Chaldean
Neo-Aramaic, Spanish,
Syriac*

Cultural Competency: N

Hospital Affiliation:

*SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL ENCINITAS, TRI CITY
MEDICAL CTR, WHITTIER
HOSPITAL MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP*

VISTA COMMUNITY CLINIC

*4700 N RIVER RD
OCEANSIDE, CA 92057*

Phone: (760) 631-5000

*After Hours Phone: (760)
631-5000*

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

N

*Accessibility: CONTACT
PROVIDER*

Hours: M-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

FAMILY PRACTICE

KETCHEL, CLINT

Provider ID: 206341

Provider Gender: Male

License Number: A135564

NPI: 1699038125

Provider English Spoken: Y

*Provider Language(s)
Spoken: Arabic, Chaldean
Neo-Aramaic, Spanish,
Syriac*

Cultural Competency: N

Hospital Affiliation:

*SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL ENCINITAS, TRI CITY
MEDICAL CTR, WHITTIER
HOSPITAL MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC*

*4700 N RIVER RD
OCEANSIDE, CA 92057*

Phone: (760) 631-5000

*After Hours Phone: (760)
631-5000*

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

*Accessibility: CONTACT
PROVIDER*

Hours: M-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

FAMILY PRACTICE

KETCHEL, CLINT

Provider ID: 402434

Provider Gender: Male

License Number: A135564

NPI: 1699038125

Provider English Spoken: Y

*Provider Language(s)
Spoken: Arabic, Chaldean
Neo-Aramaic, Spanish,
Syriac*

Cultural Competency: N

Hospital Affiliation:

*SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL ENCINITAS, TRI CITY
MEDICAL CTR, WHITTIER
HOSPITAL MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
PIER VIEW WAY*

*818 PIER VIEW WAY
OCEANSIDE, CA 92054*

Phone: (760) 631-5000

*After Hours Phone: (760)
631-5000*

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

*Accessibility: CONTACT
PROVIDER*

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

KETCHEL, CLINT

Provider ID: 402434

D2. Directorio de atención primaria

Provider Gender: Male
License Number: A135564
NPI: 1699038125
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, Chaldean
Neo-Aramaic, Spanish,
Syriac
Cultural Competency: N
Hospital Affiliation:
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL ENCINITAS, TRI CITY
MEDICAL CTR, WHITTIER
HOSPITAL MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
PIER VIEW WAY
 818 PIER VIEW WAY
OCEANSIDE, CA 92054
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

KETCHEL, CLINT

Provider ID: 206341
Provider Gender: Male

License Number: A135564
NPI: 1699038125
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, Chaldean
Neo-Aramaic, Spanish,
Syriac
Cultural Competency: N
Hospital Affiliation:
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL ENCINITAS, TRI CITY
MEDICAL CTR, WHITTIER
HOSPITAL MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FAMILY PRACTICE

KETCHEL, CLINT

Provider ID: 206341
Provider Gender: Male
License Number: A135564



NPI: 1699038125
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, Chaldean
Neo-Aramaic, Spanish,
Syriac
Cultural Competency: N
Hospital Affiliation:
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL ENCINITAS, TRI CITY
MEDICAL CTR, WHITTIER
HOSPITAL MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FAMILY PRACTICE



KETCHEL, CLINT


Provider ID: 206341
Provider Gender: Male
License Number: A135564
NPI: 1699038125

D2. Directorio de atención primaria

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, Chaldean
Neo-Aramaic, Spanish,
Syriac


Cultural Competency: N
Hospital Affiliation:
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL ENCINITAS, TRI CITY
MEDICAL CTR, WHITTIER
HOSPITAL MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000
 Website: www.vistacommunityclinic.org





Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM


FAMILY PRACTICE

KETCHEL, CLINT

Provider ID: 206341
Provider Gender: Male
License Number: A135564
NPI: 1699038125
 Provider English Spoken: Y


 Provider Language(s)
Spoken: Arabic, Chaldean
Neo-Aramaic, Spanish,
Syriac
Cultural Competency: N
Hospital Affiliation:
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL ENCINITAS, TRI CITY
MEDICAL CTR, WHITTIER
HOSPITAL MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999



American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FAMILY PRACTICE

NGUYEN, DANIELA






Provider ID: 206341
Provider Gender: Female
License Number: 20A21066
NPI: 1891069662
 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FAMILY PRACTICE

NGUYEN, DANIELA

Provider ID: 206341
Provider Gender: Female
License Number: 20A21066
NPI: 1891069662
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT

D2. Directorio de atención primaria

PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FAMILY PRACTICE

NGUYEN, DANIELA

Provider ID: 206341
Provider Gender: Female
License Number: 20A21066
NPI: 1891069662
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC

4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760) 631-5000
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FAMILY PRACTICE

NGUYEN, DANIELA

Provider ID: 206341
Provider Gender: Female
License Number: 20A21066
NPI: 1891069662
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC
 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760) 631-5000
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FAMILY PRACTICE

NGUYEN, DANIELA

Provider ID: 206341
Provider Gender: Female
License Number: 20A21066
NPI: 1891069662
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC

4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760) 631-5000
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

FAMILY PRACTICE

NGUYEN, DANIELA

Provider ID: 206341
Provider Gender: Female
License Number: 20A21066
NPI: 1891069662
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC

4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760) 631-5000
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM






FAMILY PRACTICE

PANICKER, CIBU

Provider ID: 206341
Provider Gender: Male
License Number: A149340
NPI: 1235492760
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP


D2. Directorio de atención primaria

VISTA COMMUNITY CLINIC


 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

PANICKER, CIBU


Provider ID: 206341
Provider Gender: Male
License Number: A149340
NPI: 1235492760
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC






 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

PANICKER, CIBU


Provider ID: 206341
Provider Gender: Male
License Number: A149340
NPI: 1235492760
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE





PANICKER, CIBU

Provider ID: 206341
Provider Gender: Male
License Number: A149340
NPI: 1235492760
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC


 4700 N RIVER RD

OCEANSIDE, CA 92057






 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

PANICKER, CIBU

Provider ID: 206341
Provider Gender: Male
License Number: A149340
NPI: 1235492760
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP


VISTA COMMUNITY CLINIC





 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

PANICKER, CIBU





D2. Directorio de atención primaria

Provider ID: 206341
Provider Gender: Male
License Number: A149340
NPI: 1235492760
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER






FAMILY PRACTICE **PONSFORD, DIANA**

Provider ID: 402436
Provider Gender: Female
License Number: 20A17371
NPI: 1407204969
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
HORNE STREET
 517 N HORNE ST
OCEANSIDE, CA 92054

 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM


FAMILY PRACTICE **PONSFORD, DIANA**






Provider ID: 402436
Provider Gender: Female
License Number: 20A17371
NPI: 1407204969
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
HORNE STREET

 517 N HORNE ST
OCEANSIDE, CA 92054
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

SA 9:00AM-4:00PM


FAMILY PRACTICE **PONSFORD, DIANA**

Provider ID: 402436
Provider Gender: Female
License Number: 20A17371
NPI: 1407204969
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
HORNE STREET

 517 N HORNE ST
OCEANSIDE, CA 92054
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FAMILY PRACTICE **PONSFORD, DIANA**

Provider ID: 402436
Provider Gender: Female
License Number: 20A17371
NPI: 1407204969
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: TRI CITY

D2. Directorio de atención primaria

MEDICAL CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC
HORNE STREET

517 N HORNE ST
OCEANSIDE, CA 92054

Phone: (760) 631-5000

After Hours Phone: (760)
631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FAMILY PRACTICE

VIDAL, MONICA

Provider ID: 206341

Provider Gender: Female

License Number: 20A8949

NPI: 1871791749

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

After Hours Phone: (760)
631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): NPI: 1871791749

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FAMILY PRACTICE

VIDAL, MONICA

Provider ID: 206341

Provider Gender: Female

License Number: 20A8949

NPI: 1871791749

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

After Hours Phone: (760)
631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): NPI: 1871791749

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FAMILY PRACTICE

VIDAL, MONICA

Provider ID: 206341

Provider Gender: Female

License Number: 20A8949

NPI: 1871791749

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

After Hours Phone: (760)
631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FAMILY PRACTICE

VIDAL, MONICA

Provider ID: 206341

Provider Gender: Female

License Number: 20A8949

NPI: 1871791749

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP



VISTA COMMUNITY CLINIC

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000



After Hours Phone: (760)

D2. Directorio de atención primaria


631-5000
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FAMILY PRACTICE

VIDAL, MONICA



Provider ID: 206341
Provider Gender: Female
License Number: 20A8949
NPI: 1871791749
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC



 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FAMILY PRACTICE

VIDAL, MONICA





Provider ID: 206341
Provider Gender: Female
License Number: 20A8949
NPI: 1871791749
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP



VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FQHC







TRUECARE,

Provider ID: 480247
NPI: 1245246917
 Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
TRUECARE
 2210 MESA DR STE 300
OCEANSIDE, CA 92054
 Phone: (760) 736-6767
Fax: (760) 736-6744
 After Hours Phone: (760)
736-6767

 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:30PM


FQHC

TRUECARE,

Provider ID: 480247
NPI: 1245246917
 Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
TRUECARE
 2210 MESA DR STE 300
OCEANSIDE, CA 92054
 Phone: (760) 736-6767
Fax: (760) 736-6744
 After Hours Phone: (760)
736-6767
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:30PM


FQHC

VISTA COMMUNITY CLINIC,

Provider ID: 206341
NPI: 1316501562
 Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP


D2. Directorio de atención primaria






VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FQHC


VISTA COMMUNITY CLINIC,






Provider ID: 206341
NPI: 1649662719
 Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FQHC


VISTA COMMUNITY CLINIC,

Provider ID: 206341
NPI: 1851300123
 Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC


 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FQHC

VISTA COMMUNITY CLINIC,

Provider ID: 206341
NPI: 1649662719
 Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC






 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000
 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FQHC


VISTA COMMUNITY CLINIC,

Provider ID: 206341
NPI: 1316501562
 Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FQHC

VISTA COMMUNITY CLINIC,

Provider ID: 206341
NPI: 1851300123
 Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP

D2. Directorio de atención primaria

VISTA COMMUNITY CLINIC

4700 N RIVER RD

OCEANSIDE, CA 92057

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760) 631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FQHC

VISTA COMMUNITY CLINIC HORNE STREET,

Provider ID: 402436

NPI: 1609094036

Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

HORNE STREET

517 N HORNE ST

OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760) 631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

FQHC

VISTA COMMUNITY CLINIC HORNE STREET,

Provider ID: 402436

NPI: 1609094036

Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

HORNE STREET

517 N HORNE ST

OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760) 631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

FQHC

VISTA COMMUNITY CLINIC HORNE STREET,

Provider ID: 402436

NPI: 1609094036

Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

HORNE STREET

517 N HORNE ST

OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760) 631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FQHC

VISTA COMMUNITY CLINIC HORNE STREET,

Provider ID: 402436

NPI: 1609094036

Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

HORNE STREET

517 N HORNE ST

OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760) 631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

D2. Directorio de atención primaria

FQHC

VISTA COMMUNITY CLINIC PIER VIEW WAY,

Provider ID: 402434

NPI: 1629357355


 Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

PIER VIEW WAY

 818 PIER VIEW WAY
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): Provider ID: 402434

N

 Accessibility: CONTACT
PROVIDER

Hours: M-TU 8:00AM-5:00PM

W 8:00AM-7:00PM

TH-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

FQHC

VISTA COMMUNITY CLINIC PIER VIEW WAY,

Provider ID: 402434

NPI: 1629357355

 Provider English Spoken: Y
Cultural Competency: N


IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

PIER VIEW WAY

 818 PIER VIEW WAY

OCEANSIDE, CA 92054

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-TU 8:00AM-5:00PM

W 8:00AM-7:00PM

TH-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

FQHC

VISTA COMMUNITY CLINIC PIER VIEW WAY,

Provider ID: 402434

NPI: 1629357355


 Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

PIER VIEW WAY

 818 PIER VIEW WAY
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-TU 8:00AM-5:00PM

W 8:00AM-7:00PM

TH-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

FQHC

VISTA COMMUNITY CLINIC PIER VIEW WAY,

Provider ID: 402434

NPI: 1629357355


 Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

PIER VIEW WAY

 818 PIER VIEW WAY
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-TU 8:00AM-5:00PM

W 8:00AM-7:00PM

TH-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

INTERNAL MEDICINE

HASSANI, FARZANEH

Provider ID: 206341

Provider Gender: Female

License Number: C54458



NPI: 1942204979






D2. Directorio de atención primaria

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, Farsi,
Persian, Urdu
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, TRI CITY MEDICAL
CTR, UC DAVIS MEDICAL CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

INTERNAL MEDICINE





HASSANI, FARZANEH




Provider ID: 206341
Provider Gender: Female
License Number: C54458
NPI: 1942204979
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, Farsi,
Persian, Urdu
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, TRI CITY MEDICAL

CTR, UC DAVIS MEDICAL CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

INTERNAL MEDICINE







HASSANI, FARZANEH

Provider ID: 206341
Provider Gender: Female
License Number: C54458
NPI: 1942204979
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, Farsi,
Persian, Urdu
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, TRI CITY MEDICAL
CTR, UC DAVIS MEDICAL CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000


 After Hours Phone: (760)
631-5000
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

INTERNAL MEDICINE

HASSANI, FARZANEH

Provider ID: 206341
Provider Gender: Female
License Number: C54458
NPI: 1942204979
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, Farsi,
Persian, Urdu
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, TRI CITY MEDICAL
CTR, UC DAVIS MEDICAL CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N



D2. Directorio de atención primaria

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM





INTERNAL MEDICINE

HASSANI, FARZANEH


Provider ID: 206341
Provider Gender: Female
License Number: C54458
NPI: 1942204979

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Arabic, Farsi, Persian, Urdu*

Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, TRI CITY MEDICAL CTR, UC DAVIS MEDICAL CTR
Board Certified Specialty: No IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC

 *4700 N RIVER RD OCEANSIDE, CA 92057*
 *Phone: (760) 631-5000*
 *After Hours Phone: (760) 631-5000*
 *Website: www.vistacommunityclinic.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999



American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM





INTERNAL MEDICINE

HASSANI, FARZANEH


Provider ID: 206341
Provider Gender: Female
License Number: C54458
NPI: 1942204979

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Arabic, Farsi, Persian, Urdu*

Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, TRI CITY MEDICAL CTR, UC DAVIS MEDICAL CTR
Board Certified Specialty: No IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC

 *4700 N RIVER RD OCEANSIDE, CA 92057*
 *Phone: (760) 631-5000*
 *After Hours Phone: (760) 631-5000*
 *Website: www.vistacommunityclinic.org*



Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM




PEDIATRICS


CALHOUN, CHANELLE

Provider ID: 480247
Provider Gender: Female
License Number: G75390
NPI: 1437166709

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Board Certified Specialty: No IHP of Southern Cal-PHP
TRUECARE

 *2210 MESA DR STE 300 OCEANSIDE, CA 92054*
 *Phone: (760) 891-4667*
 *After Hours Phone: (760) 891-4667*



 *Website: N/A*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*



PEDIATRICS

CALHOUN, CHANELLE

Provider ID: 480247
Provider Gender: Female
License Number: G75390
NPI: 1437166709


 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N

Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Board Certified Specialty: No IHP of Southern Cal-PHP
TRUECARE

 *2210 MESA DR STE 300 OCEANSIDE, CA 92054*
 *Phone: (760) 891-4667*

D2. Directorio de atención primaria

 After Hours Phone: (760) 891-4667

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

PEDIATRICS


CALHOUN, CHANELLE

Provider ID: 480247

Provider Gender: Female

License Number: G75390

NPI: 1437166709

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL


ENCINITAS


Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

 2210 MESA DR STE 300
OCEANSIDE, CA 92054

 Phone: (760) 891-4667

 After Hours Phone: (760) 891-4667

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

PEDIATRICS


CALHOUN, CHANELLE

Provider ID: 480247

Provider Gender: Female

License Number: G75390

NPI: 1437166709

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL


ENCINITAS


Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

 2210 MESA DR STE 300
OCEANSIDE, CA 92054

 Phone: (760) 891-4667

 After Hours Phone: (760) 891-4667

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

PEDIATRICS


CALHOUN, CHANELLE

Provider ID: 344145

Provider Gender: Female

NPI: 1437166709

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL


ENCINITAS

Board Certified Specialty: No

Rady Childrens Health Network

CHANELLE R CALHOUN

 2210 MESA DR STE 300
OCEANSIDE, CA 92054

 Phone: (760) 736-6767

Fax: (760) 736-8740

 After Hours Phone: (760) 736-6767

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS


CURLEY, EDWARD

Provider ID: 240736

Provider Gender: Male

NPI: 1164434312

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY


MEDICAL CTR

Board Certified Specialty: No

Rady Childrens Health Network

EDWARD R CURLEY

 2210 MESA DR STE 300
OCEANSIDE, CA 92054

 Phone: (760) 736-6767

Fax: (760) 736-8740

 After Hours Phone: (760) 736-6767


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

D2. Directorio de atención primaria

American Sign Language (ASL): License Number: A73814
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:30PM

PEDIATRICS


CURLEY, EDWARD

Provider ID: 480247

Provider Gender: Male

License Number: A73814

NPI: 1164434312

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 2210 MESA DR STE 300
OCEANSIDE, CA 92054

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): License Number: A73814
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:30PM


PEDIATRICS

CURLEY, EDWARD

Provider ID: 480247

Provider Gender: Male

NPI: 1164434312

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 2210 MESA DR STE 300
OCEANSIDE, CA 92054

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): License Number: A73814
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:30PM


PEDIATRICS


CURLEY, EDWARD

Provider ID: 480247

Provider Gender: Male

License Number: A73814
NPI: 1164434312

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 2210 MESA DR STE 300
OCEANSIDE, CA 92054

 Phone: (760) 736-6767


 After Hours Phone: (760)
736-6767

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:30PM

PEDIATRICS

CURLEY, EDWARD

Provider ID: 480247

Provider Gender: Male

License Number: A73814
NPI: 1164434312

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 2210 MESA DR STE 300
OCEANSIDE, CA 92054

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

D2. Directorio de atención primaria

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:30PM

PEDIATRICS

DANIELS, SARAH

Provider ID: 433806

Provider Gender: Female


NPI: 1730446527


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: TRI CITY
MEDICAL CTR, RADY

CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
SCRIPPS MEMORIAL
HOSPITAL

Board Certified Specialty: No
Rady Childrens Health Network
SARAH R DANIELS

 3605 VISTA WAY STE 130
BLDG B
OCEANSIDE, CA 92056

 Phone: (760) 547-1010


 After Hours Phone: (760)
547-1010

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS


GUNTA, SUJANA


Provider ID: 402434

Provider Gender: Female

License Number: A109056

NPI: 1932304342

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Hindi, Marathi,
Spanish, Telugu


Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, TRI CITY MEDICAL CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
PIER VIEW WAY

 818 PIER VIEW WAY
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS


GUNTA, SUJANA


Provider ID: 402434

Provider Gender: Female

License Number: A109056

NPI: 1932304342

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Hindi, Marathi,
Spanish, Telugu


Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, TRI CITY MEDICAL CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
PIER VIEW WAY

 818 PIER VIEW WAY
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

GUNTA, SUJANA


Provider ID: 402434

Provider Gender: Female

License Number: A109056

NPI: 1932304342

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Hindi, Marathi,
Spanish, Telugu


Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, TRI CITY MEDICAL CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
PIER VIEW WAY

 818 PIER VIEW WAY
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

D2. Directorio de atención primaria

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS


GUNTA, SUJANA


Provider ID: 402434

Provider Gender: Female

License Number: A109056

NPI: 1932304342

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hindi, Marathi,
Spanish, Telugu


Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, TRI CITY MEDICAL CTR

Board Certified Specialty: No

IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
PIER VIEW WAY

 818 PIER VIEW WAY
OCEANSIDE, CA 92054

 Phone: (760) 631-5000


 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

KRAMER, MELISSA

Provider ID: 469759

Provider Gender: Female

NPI: 1467833467


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No
Rady Childrens Health Network

MELISSA S KRAMER

 3605 VISTA WAY BLDG B
OCEANSIDE, CA 92056

 Phone: (760) 547-1010

Fax: (760) 547-1011

 After Hours Phone: (760)
547-1010

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

PEDIATRICS

MACINTYRE, ELIZABETH


Provider ID: 543354

Provider Gender: Female


NPI: 1336520766

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: Yes
Rady Childrens Health Network
ELIZABETH T MACINTYRE

 3605 VISTA WAY BLDG B
STE 130

OCEANSIDE, CA 92056

 Phone: (760) 547-1010

Fax: (760) 547-1011

 After Hours Phone: (760)
547-1010

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

PEDIATRICS

MCCAMMACK, BRADLEY

Provider ID: 206341

Provider Gender: Male

License Number: A130883

NPI: 1629368857

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP


VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

Fax: (760) 414-3731

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

D2. Directorio de atención primaria

American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

PEDIATRICS

MCCAMMACK, BRADLEY

Provider ID: 206341

Provider Gender: Male

License Number: A130883

NPI: 1629368857

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

Fax: (760) 414-3731

After Hours Phone: (760)
631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

MCCAMMACK, BRADLEY

Provider ID: 206341

Provider Gender: Male

License Number: A130883

NPI: 1629368857

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

Fax: (760) 414-3731

After Hours Phone: (760)
631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

MCCAMMACK, BRADLEY

Provider ID: 206341

Provider Gender: Male

License Number: A130883

NPI: 1629368857

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

Fax: (760) 414-3731

After Hours Phone: (760)
631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

MCCAMMACK, BRADLEY

Provider ID: 206341

Provider Gender: Male

License Number: A130883

NPI: 1629368857

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

Fax: (760) 414-3731

After Hours Phone: (760)
631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

D2. Directorio de atención primaria

PEDIATRICS

MCCAMMACK, BRADLEY

Provider ID: 206341

Provider Gender: Male

License Number: A130883

NPI: 1629368857

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Board Certified Specialty: No

IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

4700 N RIVER RD

OCEANSIDE, CA 92057

Phone: (760) 631-5000

Fax: (760) 414-3731

After Hours Phone: (760)
631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

MILLER, DONALD

Provider ID: 433589

Provider Gender: Male

NPI: 1154356582

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, RADY CHILDRENS
HOSPITAL SAN DIEGO,

PALOMAR MEDICAL CENTER,
UCSF BENIOFF CHILDREN'S

HOSPITAL OAKLAND, SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No

Rady Childrens Health Network

DONALD T MILLER

3605 VISTA WAY BLDG B
STE 130

OCEANSIDE, CA 92056

Phone: (760) 547-1010

After Hours Phone: (760)
547-1010

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

NOVOTA, GABRIELA

Provider ID: 685653

Provider Gender: Female

NPI: 1154520096

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Rady Childrens Health Network

GABRIELA B NOVOTA

2210 MESA DR STE 300

OCEANSIDE, CA 92054

Phone: (760) 736-6767

Fax: (760) 736-8740

After Hours Phone: (760)

736-6767

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:30PM

PEDIATRICS

PARK, RONALD

Provider ID: 271889

Provider Gender: Male

NPI: 1881695914

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, RADY

CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No

Rady Childrens Health Network
RONALD E PARK

2210 MESA DR STE 300
OCEANSIDE, CA 92054

Phone: (760) 736-6767

Fax: (760) 736-8740

After Hours Phone: (760)
736-6767

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:30PM

D2. Directorio de atención primaria

PEDIATRICS

PERKINS, RACHEL

Provider ID: 435952

Provider Gender: Female

NPI: 1427398320

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, SCRIPPS


MEMORIAL HOSPITAL, TRI
CITY MEDICAL CTR, UCSF
BENIOFF CHILDREN'S
HOSPITAL OAKLAND, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No
Rady Childrens Health Network
RACHEL E PERKINS

 3605 VISTA WAY STE 130
BLDG B

OCEANSIDE, CA 92056

 Phone: (760) 547-1010

 After Hours Phone: (760)
547-1010

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS


RONAN, KEVIN

Provider ID: 206341

Provider Gender: Male

License Number: G77176

NPI: 1225017353

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, SCRIPPS


MEMORIAL HOSPITAL


ENCINITAS

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

PEDIATRICS


RONAN, KEVIN

Provider ID: 206341

Provider Gender: Male

License Number: G77176

NPI: 1225017353

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, SCRIPPS


MEMORIAL HOSPITAL


ENCINITAS

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

PEDIATRICS


RONAN, KEVIN


Provider ID: 206341

Provider Gender: Male

License Number: G77176

NPI: 1225017353

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, SCRIPPS


MEMORIAL HOSPITAL


ENCINITAS

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000








 After Hours Phone: (760)

D2. Directorio de atención primaria

 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

PEDIATRICS








RONAN, KEVIN








Provider ID: 206341
Provider Gender: Male
License Number: G77176
NPI: 1225017353
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT

PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

PEDIATRICS



RONAN, KEVIN

Provider ID: 206341
Provider Gender: Male
License Number: G77176
NPI: 1225017353
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM
PEDIATRICS
RONAN, KEVIN
Provider ID: 206341
Provider Gender: Male

License Number: G77176
NPI: 1225017353
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

PEDIATRICS

ZACHRY, ALISON

Provider ID: 480247
Provider Gender: Female
License Number: A131678
NPI: 1922402858
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

D2. Directorio de atención primaria

DIEGO, TRI CITY MEDICAL CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

2210 MESA DR STE 300
OCEANSIDE, CA 92054
Phone: (760) 736-6767
After Hours Phone: (760)
736-6767

Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:30PM

PEDIATRICS

ZACHRY, ALISON

Provider ID: 480247
Provider Gender: Female
License Number: A131678
NPI: 1922402858

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, TRI CITY MEDICAL CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

2210 MESA DR STE 300
OCEANSIDE, CA 92054
Phone: (760) 736-6767
After Hours Phone: (760)
736-6767

Website: N/A
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:30PM

PEDIATRICS

ZACHRY, ALISON

Provider ID: 480247
Provider Gender: Female
License Number: A131678
NPI: 1922402858

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, TRI CITY MEDICAL CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

2210 MESA DR STE 300
OCEANSIDE, CA 92054
Phone: (760) 736-6767
After Hours Phone: (760)
736-6767

Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:30PM

PEDIATRICS

ZACHRY, ALISON

Provider ID: 480247

Provider Gender: Female

License Number: A131678

NPI: 1922402858

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, TRI CITY MEDICAL CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

2210 MESA DR STE 300
OCEANSIDE, CA 92054
Phone: (760) 736-6767
After Hours Phone: (760)
736-6767

Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:30PM

PHYSICIANS ASSISTANT

CHISWICK, GARY

Provider ID: 480247

Provider Gender: Male

License Number: PA22667




NPI: 1174964001

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:
GROSSMONT HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP

D2. Directorio de atención primaria

TRUECARE


 2210 MESA DR STE 300
OCEANSIDE, CA 92054
 Phone: (760) 966-3306
 After Hours Phone: (760)
966-3306

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

CHISWICK, GARY

Provider ID: 480247

Provider Gender: Male

License Number: PA22667

NPI: 1174964001

 Provider English Spoken: Y
Cultural Competency: N




Hospital Affiliation:


GROSSMONT HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

 2210 MESA DR STE 300
OCEANSIDE, CA 92054
 Phone: (760) 966-3306
 After Hours Phone: (760)
966-3306

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

CHISWICK, GARY

Provider ID: 480247

Provider Gender: Male

License Number: PA22667

NPI: 1174964001




 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP

TRUECARE

 2210 MESA DR STE 300
OCEANSIDE, CA 92054
 Phone: (760) 966-3306
 After Hours Phone: (760)
966-3306

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

CHISWICK, GARY

Provider ID: 480247

Provider Gender: Male

License Number: PA22667

NPI: 1174964001




 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP

TRUECARE

 2210 MESA DR STE 300
OCEANSIDE, CA 92054
 Phone: (760) 966-3306
 After Hours Phone: (760)

966-3306

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

RUSSO, KRISTA

Provider ID: 480247

Provider Gender: Female




License Number: PA53036

NPI: 1922471192

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

TRUECARE

 2210 MESA DR STE 300
OCEANSIDE, CA 92054
 Phone: (760) 966-3306
 After Hours Phone: (760)
966-3306

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

RUSSO, KRISTA

Provider ID: 480247

Provider Gender: Female

License Number: PA53036

NPI: 1922471192

 Provider English Spoken: Y
Cultural Competency: N

D2. Directorio de atención primaria

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

2210 MESA DR STE 300
OCEANSIDE, CA 92054
Phone: (760) 966-3306
After Hours Phone: (760)
966-3306
Website: N/A

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

RUSSO, KRISTA

Provider ID: 480247
Provider Gender: Female
License Number: PA53036
NPI: 1922471192

Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

2210 MESA DR STE 300
OCEANSIDE, CA 92054
Phone: (760) 966-3306
After Hours Phone: (760)
966-3306
Website: N/A

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

RUSSO, KRISTA

Provider ID: 480247
Provider Gender: Female
License Number: PA53036
NPI: 1922471192

Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

2210 MESA DR STE 300
OCEANSIDE, CA 92054
Phone: (760) 966-3306
After Hours Phone: (760)
966-3306
Website: N/A

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

POWAY

FAMILY PRACTICE

KAUR, JATINDER

Provider ID: 481187
Provider Gender: Female
License Number: A120771
NPI: 1912141391

Provider English Spoken: Y
Provider Language(s)
Spoken: Hindi, Punjabi,
Urdu

Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE GOLD FAMILY
HEALTH CENTER

13010 POWAY RD

POWAY, CA 92064

Phone: (858) 218-3000
After Hours Phone: (858)
218-3000
Website: N/A

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

KAUR, JATINDER

Provider ID: 481187
Provider Gender: Female
License Number: A120771
NPI: 1912141391

Provider English Spoken: Y
Provider Language(s)
Spoken: Hindi, Punjabi,
Urdu

Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE GOLD FAMILY
HEALTH CENTER

13010 POWAY RD
POWAY, CA 92064
Phone: (858) 218-3000
After Hours Phone: (858)
218-3000

Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

D2. Directorio de atención primaria

**FQHC
NEIGHBORHOOD
HEALTHCARE GOLD FAMILY
HEALTH CENTER,**


Provider ID: 481187


NPI: 1023518768

 Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

**NEIGHBORHOOD
HEALTHCARE GOLD FAMILY
HEALTH CENTER**

 13010 POWAY RD
POWAY, CA 92064

 Phone: (858) 218-3000

Fax: (360) 462-2742

 After Hours Phone: (858)
218-3000

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

**FQHC
NEIGHBORHOOD
HEALTHCARE GOLD FAMILY
HEALTH CENTER,**


Provider ID: 481187


NPI: 1023518768

 Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP


**NEIGHBORHOOD
HEALTHCARE GOLD FAMILY
HEALTH CENTER**

 13010 POWAY RD
POWAY, CA 92064

 Phone: (858) 218-3000

Fax: (360) 462-2742

 After Hours Phone: (858)
218-3000

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS


CURET, ZULMA

Provider ID: 481187

Provider Gender: Female

License Number: A119661

NPI: 1841561107

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO


Board Certified Specialty: No


IHP of Southern Cal-PHP


NEIGHBORHOOD

HEALTHCARE GOLD FAMILY
HEALTH CENTER

 13010 POWAY RD
POWAY, CA 92064

 Phone: (858) 218-3000

 After Hours Phone: (858)
218-3000

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

CURET, ZULMA

Provider ID: 481187

Provider Gender: Female

License Number: A119661

NPI: 1841561107

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO


Board Certified Specialty: No


IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE GOLD FAMILY
HEALTH CENTER

 13010 POWAY RD
POWAY, CA 92064

 Phone: (858) 218-3000

 After Hours Phone: (858)
218-3000


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

LINDBACK, SARAH

Provider ID: 161834

Provider Gender: Female

D2. Directorio de atención primaria

NPI: 1427345487

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PALOMAR
HEALTH, SCRIPPS MEMORIAL
HOSPITAL, RADY CHILDRENS
HOSPITAL SAN DIEGO

Board Certified Specialty: No
Rady Childrens Health Network
SARAH M LINDBACK

15725 POMERADO RD STE
203
POWAY, CA 92064

Phone: (858) 673-3340
Fax: (858) 673-1075

After Hours Phone: (858)
673-3340

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

LOSTETTER, ADRIENNE

Provider ID: 261797

Provider Gender: Female

NPI: 1881607984

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SHARP MARY BIRCH
HOSP FOR WOMEN AND
NEWBORNS, PALOMAR
HEALTH

Board Certified Specialty: No
Rady Childrens Health Network

ADRIENNE L LOSTETTER

15725 POMERADO RD STE
203
POWAY, CA 92064

Phone: (858) 673-3340
Fax: (858) 673-1075

After Hours Phone: (858)
673-3340

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

MOREIRA, LUCILA

Provider ID: 523761

Provider Gender: Female

NPI: 1104846567

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, RADY CHILDRENS
HOSPITAL SAN DIEGO

Board Certified Specialty: No
Rady Childrens Health Network
LUCILA K MOREIRA

15725 POMERADO RD STE
203
POWAY, CA 92064

Phone: (858) 673-3340
Fax: (858) 673-1075

After Hours Phone: (858)
673-3340

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: SU-SA 8:00AM-5:00PM

PEDIATRICS

MORTIMER, DORI

Provider ID: 230552

Provider Gender: Female

NPI: 1417928417

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SHARP MARY BIRCH
HOSP FOR WOMEN AND
NEWBORNS, PALOMAR
HEALTH

Board Certified Specialty: No
Rady Childrens Health Network
DORI R MORTIMER

15725 POMERADO RD STE
203
POWAY, CA 92064

Phone: (858) 673-3340
Fax: (858) 673-1075

After Hours Phone: (858)
673-3340

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

RAMGREN, AILEEN

D2. Directorio de atención primaria

Provider ID: 397707


Provider Gender: Female


NPI: 1356785505


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No
Rady Childrens Health Network
AILEEN N RAMGREN

 15725 POMERADO RD STE
203
POWAY, CA 92064

 Phone: (858) 673-3340

 After Hours Phone: (858)
673-3340

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM


PEDIATRICS


RENDLER, NATHAN

Provider ID: 30205

Provider Gender: Male

NPI: 1275531337

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hebrew, Spanish,
Yiddish


Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, RADY
CHILDRENS HOSPITAL SAN
DIEGO, PALOMAR HEALTH
Board Certified Specialty: No

Rady Childrens Health Network


NATHAN RENDLER

 15525 POMERADO RD STE 1
POWAY, CA 92064

 Phone: (858) 487-8333

Fax: (858) 487-0856

 After Hours Phone: (858)
487-8333

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:00PM
SA 9:00AM-5:00PM


PEDIATRICS


TAI, KUANGKAI

Provider ID: 351834

Provider Gender: Male

NPI: 1396744066

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese, Mandarin,
Spanish

Cultural Competency: N


Hospital Affiliation: PALOMAR
HEALTH, RADY CHILDRENS
HOSPITAL SAN DIEGO

Board Certified Specialty: No
Rady Childrens Health Network
KUANGKAI TAI

 15525 POMERADO RD STE
B1

 Phone: (858) 487-8333

Fax: (858) 487-0856

 After Hours Phone: (858)
484-4003

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:00PM
SA 8:30AM-0:00PM

PHYSICIANS ASSISTANT

BALDWIN, DONNA

Provider ID: 481187

Provider Gender: Female


License Number: PA23310


NPI: 1649692369


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE GOLD FAMILY
HEALTH CENTER

 13010 POWAY RD
POWAY, CA 92064

 Phone: (858) 218-3000

 After Hours Phone: (858)
218-3000

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-4:30PM

PHYSICIANS ASSISTANT

BALDWIN, DONNA

Provider ID: 481187

Provider Gender: Female

License Number: PA23310


D2. Directorio de atención primaria


NPI: 1649692369


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD

HEALTHCARE GOLD FAMILY
HEALTH CENTER

 13010 POWAY RD
POWAY, CA 92064

 Phone: (858) 218-3000

 After Hours Phone: (858)
218-3000


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-4:30PM

RAMONA

CERTIFIED NURSE

PRACTITIONER


DOAN, CHINH

Provider ID: 449438

Provider Gender: Female

License Number: NP18874

NPI: 1083845069

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese


Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP

TRUECARE

 220 ROTANZI ST
RAMONA, CA 92065

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER


DOAN, CHINH


Provider ID: 449438

Provider Gender: Female

License Number: NP18874

NPI: 1083845069

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese


Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

TRUECARE

 220 ROTANZI ST
RAMONA, CA 92065

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER

FQHC


TRUECARE,


Provider ID: 449438

NPI: 1245246917

 Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP
TRUECARE

 220 ROTANZI ST
RAMONA, CA 92065

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-0:00PM

FQHC

TRUECARE,


Provider ID: 449438


NPI: 1245246917

 Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

TRUECARE

 220 ROTANZI ST
RAMONA, CA 92065

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

D2. Directorio de atención primaria

SA 8:00AM-0:00PM

INTERNAL MEDICINE

YUNG, DORIS

Provider ID: 449438

Provider Gender: Female

License Number: A89893

NPI: 1730386863

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese, Mandarin,
Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS

Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

220 ROTANZI ST

RAMONA, CA 92065

Phone: (760) 736-6767

After Hours Phone: (760)
736-6767

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

YUNG, DORIS

Provider ID: 449438

Provider Gender: Female

License Number: A89893

NPI: 1730386863

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese, Mandarin,

Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS

Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

220 ROTANZI ST

RAMONA, CA 92065

Phone: (760) 736-6767

After Hours Phone: (760)
736-6767

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

ZACHRY, ALISON

Provider ID: 449438

Provider Gender: Female

License Number: A131678

NPI: 1922402858

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, TRI CITY MEDICAL CTR

Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

220 ROTANZI ST

RAMONA, CA 92065

Phone: (760) 736-6767

After Hours Phone: (760)

736-6767

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-0:00PM

PEDIATRICS

ZACHRY, ALISON

Provider ID: 449438

Provider Gender: Female

License Number: A131678

NPI: 1922402858

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, TRI CITY MEDICAL CTR

Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

220 ROTANZI ST

RAMONA, CA 92065

Phone: (760) 736-6767

After Hours Phone: (760)
736-6767

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-0:00PM

D2. Directorio de atención primaria

PHYSICIANS ASSISTANT

CHISWICK, GARY

Provider ID: 449438

Provider Gender: Male

License Number: PA22667

NPI: 1174964001

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

220 ROTANZI ST
RAMONA, CA 92065

Phone: (760) 736-6767

After Hours Phone: (760)
736-6767

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

CHISWICK, GARY

Provider ID: 449438

Provider Gender: Male

License Number: PA22667

NPI: 1174964001

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

220 ROTANZI ST
RAMONA, CA 92065

Phone: (760) 736-6767

After Hours Phone: (760)
736-6767

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

REIFENBERGER, JODY

Provider ID: 449438

Provider Gender: Female

License Number: PA22669

NPI: 1386741072

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

220 ROTANZI ST
RAMONA, CA 92065

Phone: (760) 736-6767

After Hours Phone: (760)
736-6767

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

REIFENBERGER, JODY

Provider ID: 449438

Provider Gender: Female

License Number: PA22669

NPI: 1386741072

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

220 ROTANZI ST
RAMONA, CA 92065

Phone: (760) 736-6767

After Hours Phone: (760)
736-6767

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

RUSSO, KRISTA

Provider ID: 449438

Provider Gender: Female

License Number: PA53036

NPI: 1922471192

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

220 ROTANZI ST
RAMONA, CA 92065

Phone: (760) 736-6767

After Hours Phone: (760)
736-6767

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

D2. Directorio de atención primaria

PHYSICIANS ASSISTANT


RUSSO, KRISTA

Provider ID: 449438

Provider Gender: Female

License Number: PA53036

NPI: 1922471192

 Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

TRUECARE

 220 ROTANZI ST

RAMONA, CA 92065

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767


 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT


ZANGEN, ROCHELLE

Provider ID: 449438

Provider Gender: Female

License Number: PA51494

NPI: 1447681150

 Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

TRUECARE

 220 ROTANZI ST

RAMONA, CA 92065

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT


ZANGEN, ROCHELLE

Provider ID: 449438

Provider Gender: Female

License Number: PA51494

NPI: 1447681150

 Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

TRUECARE

 220 ROTANZI ST

RAMONA, CA 92065

 Phone: (760) 736-6767


 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL

Board Certified Specialty: No


Family Health Centers of San
Diego


FAMILY HLTH CTR SD

HILLCREST

 4094 4TH AVE

SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CARDIOVASCULAR DISEASE


BLUM, RICHARD

Provider ID: 417937

Provider Gender: Male

License Number: G53758

NPI: 1043310030

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL

Board Certified Specialty: No


Family Health Centers of San
Diego

FAMILY HLTH CTR SD

HILLCREST

 4094 4TH AVE

SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)

SAN DIEGO

CARDIOVASCULAR DISEASE


BLUM, RICHARD

Provider ID: 417937

Provider Gender: Male

License Number: G53758

NPI: 1043310030

 Provider English Spoken: Y

D2. Directorio de atención primaria

515-2545
 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CARDIOVASCULAR DISEASE

GARIBYAN, VARTAN



Provider ID: 417937
Provider Gender: Male
License Number: 20A12504
NPI: 1790084143


Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS GREEN
HOSPITAL

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

CARDIOVASCULAR DISEASE

GARIBYAN, VARTAN



Provider ID: 417937
Provider Gender: Male
License Number: 20A12504
NPI: 1790084143


Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS GREEN
HOSPITAL

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

CERTIFIED NURSE


PRACTITIONER



AQUINO, FELINO


Provider ID: 418535
Provider Gender: Male
License Number: NP22974
NPI: 1356684781

Provider English Spoken: Y
 Provider Language(s)
Spoken: Tagalog
Cultural Competency: N

Board Certified Specialty: No
Operation Samahan
OPERATION SAMAHAN
RANCHO PENASQUITOS


 9995 CARMEL MOUNTAIN
RD STE B10 AND B11
SAN DIEGO, CA 92129

 Phone: (844) 200-2426
 After Hours Phone: (844)
200-2426

 Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TU 8:30AM-5:30PM
W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

AQUINO, FELINO

Provider ID: 418535
Provider Gender: Male
License Number: NP22974
NPI: 1356684781

Provider English Spoken: Y
 Provider Language(s)

D2. Directorio de atención primaria

Spoken: Tagalog
Cultural Competency: N
Board Certified Specialty: No
Operation Samahan

OPERATION SAMAHAN
RANCHO PENASQUITOS

9995 CARMEL MOUNTAIN
RD STE B10 AND B11
SAN DIEGO, CA 92129

Phone: (844) 200-2426
After Hours Phone: (844)
200-2426

Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TU 8:30AM-5:30PM
W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

AQUINO, FELINO

Provider ID: 432308

Provider Gender: Male

License Number: NP22974

NPI: 1356684781

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Board Certified Specialty: No

Operation Samahan

OPERATION SAMAHAN - MIRA
MESA

9855 ERMA RD STE 105
SAN DIEGO, CA 92131

Phone: (844) 200-2426
After Hours Phone: (844)
200-2426

Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

AQUINO, FELINO

Provider ID: 432308

Provider Gender: Male

License Number: NP22974

NPI: 1356684781

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Board Certified Specialty: No

Operation Samahan

OPERATION SAMAHAN - MIRA
MESA

9855 ERMA RD STE 105
SAN DIEGO, CA 92131

Phone: (844) 200-2426
After Hours Phone: (844)
200-2426

Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

ARTS, SERENA

Provider ID: 403583

Provider Gender: Female

License Number: NP10769

NPI: 1801881552

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

1501 IMPERIAL AVE
SAN DIEGO, CA 92101

Phone: (619) 233-8500
After Hours Phone: (619)
233-8500

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

ARTS, SERENA

Provider ID: 403583

Provider Gender: Female

License Number: NP10769

NPI: 1801881552

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

1501 IMPERIAL AVE
SAN DIEGO, CA 92101

Phone: (619) 233-8500

D2. Directorio de atención primaria

☎ After Hours Phone: (619) 233-8500

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

BELEN, NEZER

Provider ID: 206363

Provider Gender: Male

License Number: NP95009292

NPI: 1386120723

☑ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

📍 4725 MARKET ST
SAN DIEGO, CA 92102

☎ Phone: (619) 515-2560

☎ After Hours Phone: (619)
515-2560

🌐 Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

BELEN, NEZER

Provider ID: 206363

Provider Gender: Male

License Number: NP95009292

NPI: 1386120723

☑ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

📍 4725 MARKET ST
SAN DIEGO, CA 92102

☎ Phone: (619) 515-2560

☎ After Hours Phone: (619)
515-2560

🌐 Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

BELTRON, KIMBERLY

Provider ID: 403583

Provider Gender: Female

License Number: NP95020497

NPI: 1871295493

☑ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

📍 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

☎ Phone: (619) 233-8500

☎ After Hours Phone: (619) 233-8500

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

BELTRON, KIMBERLY

Provider ID: 403583

Provider Gender: Female

License Number: NP95020497

NPI: 1871295493

☑ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

📍 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

☎ Phone: (619) 233-8500

☎ After Hours Phone: (619)
233-8500

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

BESTERFELDT, LYDIA

D2. Directorio de atención primaria


Provider ID: 482070
Provider Gender: Female
License Number: NP95013060
NPI: 1265929442


Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 After Hours Phone: (858)
810-8700

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

BESTERFELDT, LYDIA


Provider ID: 482070
Provider Gender: Female
License Number: NP95013060
NPI: 1265929442

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 After Hours Phone: (858)

810-8700

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

BURNS, DELLA

Provider ID: 233597

Provider Gender: Female

License Number: NP7413


NPI: 1871577023


Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

MID-CITY COMMUNITY CLINIC

 4290 POLK AVE
SAN DIEGO, CA 92105

 Phone: (619) 563-0250

 After Hours Phone: (619)
563-0250

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

BURNS, DELLA

Provider ID: 233597

Provider Gender: Female

License Number: NP7413


NPI: 1871577023


Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

MID-CITY COMMUNITY CLINIC

 4290 POLK AVE
SAN DIEGO, CA 92105

 Phone: (619) 563-0250

 After Hours Phone: (619)
563-0250

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

CELESTIN-RAMSEY, AKANKE

Provider ID: 451167

Provider Gender: Female

License Number: NP8563

NPI: 1447450275


Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP


KING CHAVEZ HEALTH
CENTER

 950 S EUCLID AVE
SAN DIEGO, CA 92114

 Phone: (619) 662-4100

D2. Directorio de atención primaria

 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org/clinics/king-chavez-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

CELESTIN-RAMSEY, AKANKE

Provider ID: 451167

Provider Gender: Female

License Number: NP8563

NPI: 1447450275


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL


Board Certified Specialty: No
IHP of Southern Cal-PHP

KING CHAVEZ HEALTH
CENTER

 950 S EUCLID AVE
SAN DIEGO, CA 92114

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org/clinics/king-chavez-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER


CHASE, AVA LOU

Provider ID: 206360

Provider Gender: Female

License Number: NP95000602

NPI: 1164496386

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San


Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

CHASE, AVA LOU

Provider ID: 206360

Provider Gender: Female

License Number: NP95000602

NPI: 1164496386

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San


Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

DHARKAR-SURBER, SAPNA


Provider ID: 185268

Provider Gender: Female

License Number: NP95013257

NPI: 1538707765

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Marathi, Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No
La Maestra Family Clinic

D2. Directorio de atención primaria

LA MAESTRA FAMILY CLINIC INC

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Phone: (619) 255-9155

After Hours Phone: (619)
255-9155

Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM

CERTIFIED NURSE

PRACTITIONER

DHARKAR-SURBER, SAPNA

Provider ID: 185268

Provider Gender: Female

License Number: NP95013257

NPI: 1538707765

Provider English Spoken: Y

Provider Language(s)
Spoken: Marathi, Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL

Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC

INC

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Phone: (619) 255-9155

After Hours Phone: (619)
255-9155

Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-6:00PM

SA 8:00AM-2:00PM

CERTIFIED NURSE

PRACTITIONER

GALLEGOS, CYNTHIA

Provider ID: 206360

Provider Gender: Female

License Number: NP95016217

NPI: 1174105589

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY

HEALTH CENTER

1809 NATIONAL AVE

SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

GALLEGOS, CYNTHIA

Provider ID: 206360

Provider Gender: Female

License Number: NP95016217

NPI: 1174105589

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY

HEALTH CENTER

1809 NATIONAL AVE

SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

GARCIA, JOHNNY


Provider ID: 206363

Provider Gender: Male

License Number: NP95007000

D2. Directorio de atención primaria

NPI: 1932622156

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org


Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER


GARCIA, JOHNNY

Provider ID: 206363

Provider Gender: Male

License Number: NP95007000

NPI: 1932622156

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

 4725 MARKET ST

SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER


GOLDFINGER, SARAH

Provider ID: 206360

Provider Gender: Female

License Number: NP95011313

NPI: 1134686744

 Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

GOLDFINGER, SARAH

Provider ID: 206360

Provider Gender: Female

License Number: NP95011313

NPI: 1134686744

 Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org


Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

HA, THU

Provider ID: 206046

Provider Gender: Female

License Number: NP95010517

NPI: 1346443983

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Vietnamese

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

D2. Directorio de atención primaria

LINDA VISTA HEALTH CARE
CTR


 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 After Hours Phone: (858)
279-0925
 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

HA, THU

Provider ID: 482070

Provider Gender: Female

License Number: NP95010517

NPI: 1346443983

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
 After Hours Phone: (858)
810-8700

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

CERTIFIED NURSE PRACTITIONER

HA, THU

Provider ID: 206046

Provider Gender: Female

License Number: NP95010517

NPI: 1346443983

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE

CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

HA, THU

Provider ID: 482070

Provider Gender: Female

License Number: NP95010517

NPI: 1346443983

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
 After Hours Phone: (858)
810-8700

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

HA, THU

Provider ID: 206046

Provider Gender: Female

License Number: NP95010517

NPI: 1346443983

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE

CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

D2. Directorio de atención primaria

American Sign Language (ASL): NPI: 1659579134

N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER


HA, THU

Provider ID: 206046

Provider Gender: Female

License Number: NP95010517

NPI: 1346443983

 Provider English Spoken: Y

 Provider Language(s) Spoken: Vietnamese


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858) 279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

HARRINGTON, BARBARA LORRAINE

Provider ID: 185268


Provider Gender: Female


License Number: NP17008

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 255-9155

 After Hours Phone: (619) 255-9155

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM

CERTIFIED NURSE PRACTITIONER

HARRINGTON, BARBARA LORRAINE

Provider ID: 185268

Provider Gender: Female


License Number: NP17008


NPI: 1659579134


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 255-9155

 After Hours Phone: (619) 255-9155

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM

CERTIFIED NURSE PRACTITIONER

HART, BECKY

Provider ID: 403583

Provider Gender: Female

License Number: NP95025699

NPI: 1316626344


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 Phone: (619) 645-6405

 After Hours Phone: (619) 645-6405

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

D2. Directorio de atención primaria

CERTIFIED NURSE PRACTITIONER

HART, BECKY

Provider ID: 403583

Provider Gender: Female

License Number: NP95025699

NPI: 1316626344

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

1501 IMPERIAL AVE
SAN DIEGO, CA 92101

Phone: (619) 645-6405

After Hours Phone: (619)
645-6405

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

HILL, GENIELYN

Provider ID: 417101

Provider Gender: Female

License Number: NP95020046

NPI: 1710632435

Provider English Spoken: Y
 Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Board Certified Specialty: No
Operation Samahan

OPERATION SAMAHAN - MIRA

MESA

10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

Phone: (844) 200-2426

After Hours Phone: (844)
200-2426

Website: www.operationsa
mahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-4:30PM

CERTIFIED NURSE PRACTITIONER

HILL, GENIELYN

Provider ID: 417101

Provider Gender: Female

License Number: NP95020046

NPI: 1710632435

Provider English Spoken: Y
 Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Board Certified Specialty: No
Operation Samahan

OPERATION SAMAHAN - MIRA
MESA

10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

Phone: (844) 200-2426

After Hours Phone: (844)
200-2426

Website: www.operationsa
mahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-4:30PM

CERTIFIED NURSE PRACTITIONER

HILLIARD, THESALONICA

Provider ID: 417101

Provider Gender: Female

License Number: NP95010585

NPI: 1861956724

Provider English Spoken: Y
 Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Board Certified Specialty: No
Operation Samahan

OPERATION SAMAHAN - MIRA
MESA

10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

Phone: (844) 200-2426

After Hours Phone: (844)
200-2426

Website: www.operationsa
mahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-4:30PM

CERTIFIED NURSE PRACTITIONER

HILLIARD, THESALONICA

Provider ID: 417101

D2. Directorio de atención primaria

Provider Gender: Female
License Number: NP95010585
NPI: 1861956724
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Tagalog
Cultural Competency: N
Board Certified Specialty: No
Operation Samahan
OPERATION SAMAHAN - MIRA
MESA

📍 10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126
☎ Phone: (844) 200-2426
📞 After Hours Phone: (844)
200-2426
🌐 Website: [www.operationsa
mahan.org](http://www.operationsa
mahan.org)
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-4:30PM

CERTIFIED NURSE

PRACTITIONER

HOANG, CHI

Provider ID: 482070
Provider Gender: Female
License Number: NP95004600
NPI: 1902350994
☐ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN DIEGO FAMILY CARE

📍 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

☎ Phone: (858) 810-8700
📞 After Hours Phone: (858)
810-8700
🌐 Website: [www.sdfamilycare
.org](http://www.sdfamilycare
.org)
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

HOANG, CHI

Provider ID: 482070
Provider Gender: Female
License Number: NP95004600
NPI: 1902350994
☐ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN DIEGO FAMILY CARE

📍 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
☎ Phone: (858) 810-8700
📞 After Hours Phone: (858)
810-8700
🌐 Website: [www.sdfamilycare
.org](http://www.sdfamilycare
.org)
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

HOGAN, ROSELYNNJOY

Provider ID: 206362

Provider Gender: Female
License Number: NP17852
NPI: 1205019510
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish, Thai
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
NORTH PARK FAMILY HEALTH
CENTERS

📍 3544 30TH ST
SAN DIEGO, CA 92104
☎ Phone: (619) 515-2424
📞 After Hours Phone: (619)
515-2424
🌐 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Hours: M-TH 8:30AM-5:30PM
F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

HOGAN, ROSELYNNJOY

Provider ID: 206362
Provider Gender: Female
License Number: NP17852
NPI: 1205019510
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish, Thai
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

D2. Directorio de atención primaria

NORTH PARK FAMILY HEALTH CENTERS N

3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-TH 8:30AM-5:30PM
F 8:00AM-5:00PM

CERTIFIED NURSE PRACTITIONER

HOGAN, ROSELYNNJOY

Provider ID: 206362

Provider Gender: Female

License Number: NP17852

NPI: 1205019510

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Thai

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS N

3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):

Accessibility: CONTACT PROVIDER

Hours: M-TH 8:30AM-5:30PM
F 8:00AM-5:00PM

CERTIFIED NURSE PRACTITIONER

HOGAN, ROSELYNNJOY

Provider ID: 206362

Provider Gender: Female

License Number: NP17852

NPI: 1205019510

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Thai

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS N

3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):

Accessibility: CONTACT PROVIDER

Hours: M-TH 8:30AM-5:30PM
F 8:00AM-5:00PM

CERTIFIED NURSE PRACTITIONER

HOGAN, ROSELYNNJOY

Provider ID: 206360

Provider Gender: Female

License Number: NP17852

NPI: 1205019510

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Thai

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

HOGAN, ROSELYNNJOY

Provider ID: 206360

Provider Gender: Female

License Number: NP17852

NPI: 1205019510

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Thai

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY







D2. Directorio de atención primaria

HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER






CERTIFIED NURSE PRACTITIONER

HORNEY, KRISTAN

Provider ID: 403583
Provider Gender: Female
License Number: NP95007712
NPI: 1720590904
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER
 1501 IMPERIAL AVE
SAN DIEGO, CA 92101
 Phone: (619) 233-8500
 After Hours Phone: (619)
233-8500
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE PRACTITIONER



HORNEY, KRISTAN






Provider ID: 403583
Provider Gender: Female
License Number: NP95007712
NPI: 1720590904
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER
 1501 IMPERIAL AVE
SAN DIEGO, CA 92101
 Phone: (619) 233-8500
 After Hours Phone: (619)
233-8500
 Website: N/A

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE PRACTITIONER






INSTONE, SUSAN

Provider ID: 233532
Provider Gender: Female
License Number: NP4858
NPI: 1710223268
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No
IHP of Southern Cal-PHP
MID-CITY COMMUNITY CLINIC
 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
 Phone: (619) 280-2058
 After Hours Phone: (619)
280-2058
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\22
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

CERTIFIED NURSE PRACTITIONER



INSTONE, SUSAN



Provider ID: 233532
Provider Gender: Female
License Number: NP4858
NPI: 1710223268
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Board Certified Specialty: No
IHP of Southern Cal-PHP
MID-CITY COMMUNITY CLINIC
 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
 Phone: (619) 280-2058
 After Hours Phone: (619)

D2. Directorio de atención primaria

280-2058
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\22
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM



CERTIFIED NURSE
PRACTITIONER
INSTONE, SUSAN

Provider ID: 482070
Provider Gender: Female
License Number: NP4858
NPI: 1710223268
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
 After Hours Phone: (858)
810-8700
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT


PROVIDER

CERTIFIED NURSE
PRACTITIONER
INSTONE, SUSAN

Provider ID: 482070
Provider Gender: Female
License Number: NP4858
NPI: 1710223268
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN DIEGO FAMILY CARE







 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
 After Hours Phone: (858)
810-8700
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE
PRACTITIONER
JOHNSON, SHAWNA AKIKO

Provider ID: 233597
Provider Gender: Female
License Number: NP95002518
NPI: 1922237809
 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
MID-CITY COMMUNITY CLINIC
 4290 POLK AVE
SAN DIEGO, CA 92105
 Phone: (619) 563-0250
 After Hours Phone: (619)
563-0250
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE
PRACTITIONER
JOHNSON, SHAWNA AKIKO

Provider ID: 233597
Provider Gender: Female
License Number: NP95002518
NPI: 1922237809
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
MID-CITY COMMUNITY CLINIC
 4290 POLK AVE
SAN DIEGO, CA 92105
 Phone: (619) 563-0250
 After Hours Phone: (619)
563-0250
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes

D2. Directorio de atención primaria

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER


KEMP, KATHRINE

Provider ID: 403583

Provider Gender: Female

License Number: NP95018497

NPI: 1316615313

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


ST VINCENT DE PAUL VILLAGE

FAMILY HEALTH CENTER

 1501 IMPERIAL AVE

SAN DIEGO, CA 92101

 Phone: (619) 233-8500

 After Hours Phone: (619)
233-8500


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE PRACTITIONER


KEMP, KATHRINE

Provider ID: 403583

Provider Gender: Female

License Number: NP95018497

NPI: 1316615313

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


ST VINCENT DE PAUL VILLAGE

FAMILY HEALTH CENTER

 1501 IMPERIAL AVE

SAN DIEGO, CA 92101

 Phone: (619) 233-8500

 After Hours Phone: (619)
233-8500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE PRACTITIONER


KHAN, MATTHEW

Provider ID: 417987

Provider Gender: Male

License Number: NP17838

NPI: 1942456124

 Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego

FAMILY HEALTH CTR IBARRA

 4874 POLK AVE

SAN DIEGO, CA 92105

 Phone: (619) 515-2426

 After Hours Phone: (619)
515-2426

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER

KHAN, MATTHEW

Provider ID: 417987

Provider Gender: Male

License Number: NP17838

NPI: 1942456124

 Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego

FAMILY HEALTH CTR IBARRA

 4874 POLK AVE

SAN DIEGO, CA 92105

 Phone: (619) 515-2426

 After Hours Phone: (619)
515-2426

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER

KI, TRISH


Provider ID: 206046


Provider Gender: Female

License Number: NP23847

D2. Directorio de atención primaria

NPI: 1376840199

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP


LINDA VISTA HEALTH CARE

CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)
279-0925


 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

SA 8:30AM-5:30PM

CERTIFIED NURSE

PRACTITIONER


KI, TRISH

Provider ID: 206046

Provider Gender: Female

License Number: NP23847

NPI: 1376840199

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


LINDA VISTA HEALTH CARE

CTR

 6973 LINDA VISTA RD

SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

SA 8:30AM-5:30PM

CERTIFIED NURSE

PRACTITIONER


KI, TRISH

Provider ID: 482070

Provider Gender: Female

License Number: NP23847

NPI: 1376840199

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD

SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 After Hours Phone: (858)
810-8700

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

KI, TRISH

Provider ID: 482070

Provider Gender: Female

License Number: NP23847

NPI: 1376840199

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD

SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 After Hours Phone: (858)
810-8700

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

KI, TRISH


Provider ID: 206046

Provider Gender: Female

License Number: NP23847

NPI: 1376840199


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Vietnamese


D2. Directorio de atención primaria

Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 *Phone: (858) 279-0925*

 *After Hours Phone: (858) 279-0925*


 *Website: www.sdfamilycare.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:30AM-5:30PM

SA 8:30AM-5:30PM

CERTIFIED NURSE **PRACTITIONER**


KI, TRISH

Provider ID: 206046

Provider Gender: Female

License Number: NP23847

NPI: 1376840199

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Vietnamese*


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 *Phone: (858) 279-0925*

 *After Hours Phone: (858) 279-0925*

 *Website: www.sdfamilycare*

.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:30AM-5:30PM

SA 8:30AM-5:30PM

CERTIFIED NURSE **PRACTITIONER**


LENNON, RYAN

Provider ID: 624977

Provider Gender: Female

License Number: NP95027593

NPI: 1558084855

 *Provider English Spoken: Y*


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 2204 NATIONAL AVE
SAN DIEGO, CA 92113

 *Phone: (619) 515-2355*

 *After Hours Phone: (619) 515-2355*

 *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE **PRACTITIONER**

LENNON, RYAN

Provider ID: 624977

Provider Gender: Female

License Number: NP95027593

NPI: 1558084855


 *Provider English Spoken: Y*
Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 2204 NATIONAL AVE
SAN DIEGO, CA 92113

 *Phone: (619) 515-2355*

 *After Hours Phone: (619) 515-2355*

 *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE **PRACTITIONER**

LIEBER, CAROL


Provider ID: 517403

Provider Gender: Female

License Number: NP20849

NPI: 1487889846

 *Provider English Spoken: Y*


 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH 25TH ST
FAMILY MEDICINE


 316 25TH ST

SAN DIEGO, CA 92102

 *Phone: (619) 238-5551*

D2. Directorio de atención primaria

 After Hours Phone: (619) 238-5551

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

LIEBER, CAROL

Provider ID: 517403

Provider Gender: Female

License Number: NP20849

NPI: 1487889846

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH 25TH ST
FAMILY MEDICINE

 316 25TH ST
SAN DIEGO, CA 92102

 Phone: (619) 238-5551

 After Hours Phone: (619) 238-5551

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

LIM, IMELDA

Provider ID: 417101

Provider Gender: Female

License Number: NP95000203

NPI: 1093130395

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog

Cultural Competency: N


Board Certified Specialty: No


Operation Samahan


OPERATION SAMAHAN - MIRA
MESA

 10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

 Phone: (844) 200-2426

 After Hours Phone: (844) 200-2426

 Website: www.operationsa
mahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-TU 8:30AM-5:30PM

W 10:00AM-7:00PM

TH-F 8:30AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

LIM, IMELDA

Provider ID: 417101

Provider Gender: Female

License Number: NP95000203

NPI: 1093130395

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog


Cultural Competency: N


Board Certified Specialty: No
Operation Samahan


OPERATION SAMAHAN - MIRA
MESA

 10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

 Phone: (844) 200-2426

 After Hours Phone: (844) 200-2426

 Website: www.operationsa
mahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-TU 8:30AM-5:30PM

W 10:00AM-7:00PM

TH-F 8:30AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

LU, TAMMY

Provider ID: 206360

Provider Gender: Female

License Number: NP95007253

NPI: 1457879132

Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113


 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

D2. Directorio de atención primaria

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

LU, TAMMY

Provider ID: 206360

Provider Gender: Female

License Number: NP95007253


NPI: 1457879132


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

MARTIN, RIA


Provider ID: 206363


Provider Gender: Female
License Number: NP95005321
NPI: 1437695079


 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

MARTIN, RIA

Provider ID: 206363

Provider Gender: Female

License Number: NP95005321


NPI: 1437695079

 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

MARTINEZ, CAROLYN

Provider ID: 214492

Provider Gender: Female

License Number: NP22031


NPI: 1609101997


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP

NESTOR COMMUNITY
HEALTH CENTER


 1016 OUTER RD
SAN DIEGO, CA 92154

 Phone: (619) 429-3733

 After Hours Phone: (619)
429-3733

 Website: www.ibclinic.org
Email: avaldez@ibclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:00PM

TU-TH 8:30AM-8:00PM

D2. Directorio de atención primaria

F 8:30AM-5:00PM

CERTIFIED NURSE PRACTITIONER


MARTINEZ, CAROLYN


Provider ID: 214492

Provider Gender: Female

License Number: NP22031

NPI: 1609101997

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


NESTOR COMMUNITY

HEALTH CENTER

 1016 OUTER RD

SAN DIEGO, CA 92154

 Phone: (619) 429-3733

 After Hours Phone: (619)
429-3733

 Website: www.ibclinic.org


Email: avaldez@ibclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:00PM

TU-TH 8:30AM-8:00PM

F 8:30AM-5:00PM

CERTIFIED NURSE PRACTITIONER

MENDOZA, GRETEL MARIE

Provider ID: 417101

Provider Gender: Female

License Number: NP95002233

NPI: 1245652387

 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No


Operation Samahan


OPERATION SAMAHAN - MIRA
MESA

 10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

 Phone: (844) 200-2426

 After Hours Phone: (844)
200-2426

 Website: [www.operationsa
mahan.org](http://www.operationsa
mahan.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER


MENDOZA, GRETEL MARIE

Provider ID: 417101

Provider Gender: Female

License Number: NP95002233

NPI: 1245652387

 Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No


Operation Samahan


OPERATION SAMAHAN - MIRA
MESA

 10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

 Phone: (844) 200-2426

 After Hours Phone: (844)
200-2426

 Website: [www.operationsa
mahan.org](http://www.operationsa
mahan.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

MORAN, TIFFANY

Provider ID: 207382

Provider Gender: Female

License Number: NP95011037

NPI: 1730730649

 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN DIEGO AMERICAN

INDIAN HEALTH CENTER

 2630 1ST AVE

SAN DIEGO, CA 92103

 Phone: (619) 234-2158

 After Hours Phone: (619)
234-2158

 Website: WWW.SDAIHC.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

Indian Health Services: Y

CERTIFIED NURSE PRACTITIONER

MORAN, TIFFANY

Provider ID: 207382


Provider Gender: Female


D2. Directorio de atención primaria

License Number: NP95011037
NPI: 1730730649

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN DIEGO AMERICAN
INDIAN HEALTH CENTER

 2630 1ST AVE
SAN DIEGO, CA 92103

 Phone: (619) 234-2158


 After Hours Phone: (619)
234-2158

 Website: WWW.SDAIHC.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

Indian Health Services: Y

CERTIFIED NURSE PRACTITIONER


NEVAREZ, IRENE

Provider ID: 185268

Provider Gender: Female

License Number: NP95009891

NPI: 1003166646

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA


JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Board Certified Specialty: No
La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 564-8765

 After Hours Phone: (619)
564-8765

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM

CERTIFIED NURSE PRACTITIONER


NEVAREZ, IRENE

Provider ID: 185268

Provider Gender: Female

License Number: NP95009891

NPI: 1003166646

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Board Certified Specialty: No


La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 564-8765

 After Hours Phone: (619)
564-8765

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM

CERTIFIED NURSE PRACTITIONER

NGUYEN, NINA

Provider ID: 417101

Provider Gender: Female

License Number: NP95020179

NPI: 1417699869


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Operation Samahan


OPERATION SAMAHAN - MIRA
MESA

 10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

 Phone: (844) 200-2426

 After Hours Phone: (844)
200-2426


 Website: www.operationsa
mahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N


D2. Directorio de atención primaria

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-4:30PM

CERTIFIED NURSE PRACTITIONER

NGUYEN, NINA


Provider ID: 417101
Provider Gender: Female
License Number: NP95020179
NPI: 1417699869


 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
Operation Samahan


OPERATION SAMAHAN - MIRA MESA

 10737 CAMINO RUIZ STE 235

SAN DIEGO, CA 92126

 *Phone: (844) 200-2426*

 *After Hours Phone: (844) 200-2426*


 *Website: www.operationsamahan.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


Hours: M-F 8:00AM-4:30PM

CERTIFIED NURSE PRACTITIONER

NOCEDA, ANA


Provider ID: 482070
Provider Gender: Female
License Number: NP19505
NPI: 1386971760


 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Tagalog*
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified Specialty: No
IHP of Southern Cal-PHP SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD SAN DIEGO, CA 92111

 *Phone: (858) 810-8700*

 *After Hours Phone: (858) 810-8700*

 *Website: www.sdfamilycare.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*

Hours: M 8:30AM-5:30PM

TU 8:30AM-9:00PM


W-F 8:30AM-5:30PM


SA 9:00AM-4:00PM

CERTIFIED NURSE PRACTITIONER

NOCEDA, ANA

Provider ID: 482070
Provider Gender: Female
License Number: NP19505
NPI: 1386971760

 *Provider English Spoken: Y*


 *Provider Language(s) Spoken: Tagalog*


Cultural Competency: N


Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified Specialty: No
IHP of Southern Cal-PHP SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD SAN DIEGO, CA 92111

 *Phone: (858) 810-8700*

 *After Hours Phone: (858) 810-8700*

 *Website: www.sdfamilycare.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*

Hours: M 8:30AM-5:30PM

TU 8:30AM-9:00PM

W-F 8:30AM-5:30PM

SA 9:00AM-4:00PM

CERTIFIED NURSE PRACTITIONER

NOCEDA, ANA

Provider ID: 233532
Provider Gender: Female
License Number: NP19505
NPI: 1386971760

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Tagalog*

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified Specialty: No
IHP of Southern Cal-PHP

MID-CITY COMMUNITY CLINIC

 4305 UNIVERSITY AVE STE 150

SAN DIEGO, CA 92105

D2. Directorio de atención primaria

 Phone: (619) 280-2058
 After Hours Phone: (619) 280-2058
 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

CERTIFIED NURSE

PRACTITIONER


NOCEDA, ANA


Provider ID: 233532

Provider Gender: Female

License Number: NP19505

NPI: 1386971760

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Tagalog

Cultural Competency: N


Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No
IHP of Southern Cal-PHP

MID-CITY COMMUNITY CLINIC

 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105

 Phone: (619) 280-2058

 After Hours Phone: (619)
280-2058

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

CERTIFIED NURSE

PRACTITIONER


OCAMPO, ELAINE


Provider ID: 482070

Provider Gender: Female

License Number: NP95003427

NPI: 1063856805

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Mandarin, Yue
Chinese


Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 After Hours Phone: (858)
810-8700

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

OCAMPO, ELAINE


Provider ID: 206046

Provider Gender: Female

License Number: NP95003427

NPI: 1063856805

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Mandarin, Yue
Chinese


Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

OCAMPO, ELAINE


Provider ID: 482070

Provider Gender: Female

License Number: NP95003427

NPI: 1063856805

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Mandarin, Yue
Chinese

Cultural Competency: N




Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700



D2. Directorio de atención primaria

 After Hours Phone: (858) 810-8700
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

OCAMPO, ELAINE

Provider ID: 206046
Provider Gender: Female
License Number: NP95003427
NPI: 1063856805
 Provider English Spoken: Y
 Provider Language(s) Spoken: Mandarin, Yue Chinese



Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 After Hours Phone: (858) 279-0925
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER


CERTIFIED NURSE

PRACTITIONER

OCAMPO, ELAINE

Provider ID: 206046
Provider Gender: Female
License Number: NP95003427
NPI: 1063856805
 Provider English Spoken: Y
 Provider Language(s) Spoken: Mandarin, Yue Chinese



Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 After Hours Phone: (858) 279-0925
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE


PRACTITIONER

OCAMPO, ELAINE

Provider ID: 206046
Provider Gender: Female
License Number: NP95003427
NPI: 1063856805
 Provider English Spoken: Y
 Provider Language(s) Spoken: Mandarin, Yue Chinese

Cultural Competency: N
Board Certified Specialty: No



IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 After Hours Phone: (858) 279-0925
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

ODA, THAGHAR

Provider ID: 206363
Provider Gender: Female
License Number: NP95000205
NPI: 1063835692
 Provider English Spoken: Y
 Provider Language(s) Spoken: Amharic, Arabic
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619) 515-2560
 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

D2. Directorio de atención primaria

American Sign Language (ASL): NPI: 1063835692

N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER


ODA, THAGHAR


Provider ID: 206363

Provider Gender: Female

License Number: RN810863

NPI: 1063835692

 Provider English Spoken: Y

 Provider Language(s) Spoken: Amharic, Arabic


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619) 515-2560

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): NPI: 1063835692

N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE


PRACTITIONER


ODA, THAGHAR

Provider ID: 206363

Provider Gender: Female

License Number: NP95000205

 Provider English Spoken: Y

 Provider Language(s) Spoken: Amharic, Arabic


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego


DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619) 515-2560

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE


PRACTITIONER


ODA, THAGHAR

Provider ID: 206363

Provider Gender: Female

License Number: RN810863

 Provider English Spoken: Y

 Provider Language(s) Spoken: Amharic, Arabic

Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego


DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

 4725 MARKET ST

SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619) 515-2560

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER


ODA, THAGHAR


Provider ID: 206360

Provider Gender: Female

License Number: NP95000205

NPI: 1063835692

 Provider English Spoken: Y


 Provider Language(s) Spoken: Amharic, Arabic


Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

D2. Directorio de atención primaria

CERTIFIED NURSE PRACTITIONER

ODA, THAGHAR

Provider ID: 206360

Provider Gender: Female

License Number: RN810863

NPI: 1063835692

Provider English Spoken: Y


Provider Language(s)
Spoken: Amharic, Arabic


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

ODA, THAGHAR

Provider ID: 206360

Provider Gender: Female

License Number: NP95000205

NPI: 1063835692

Provider English Spoken: Y


Provider Language(s)
Spoken: Amharic, Arabic


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

ODA, THAGHAR

Provider ID: 206360

Provider Gender: Female

License Number: RN810863

NPI: 1063835692

Provider English Spoken: Y


Provider Language(s)
Spoken: Amharic, Arabic


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

ORPILLA, IMELDA

Provider ID: 417101

Provider Gender: Female

License Number: NP95003211

NPI: 1790785988

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog


Cultural Competency: N


Board Certified Specialty: No
Operation Samahan


OPERATION SAMAHAN - MIRA
MESA

 10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

 Phone: (844) 200-2426

 After Hours Phone: (844)
200-2426

 Website: [www.operationsa
mahan.org](http://www.operationsa
mahan.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-4:30PM

CERTIFIED NURSE

D2. Directorio de atención primaria

PRACTITIONER

ORPILLA, IMELDA

Provider ID: 417101

Provider Gender: Female

License Number: NP95003211

NPI: 1790785988

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog

Cultural Competency: N


Board Certified Specialty: No


Operation Samahan


OPERATION SAMAHAN - MIRA
MESA

 10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

 Phone: (844) 200-2426

 After Hours Phone: (844)
200-2426

 Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-4:30PM

CERTIFIED NURSE

PRACTITIONER

ORPILLA, IMELDA

Provider ID: 418535

Provider Gender: Female

License Number: NP95003211

NPI: 1790785988

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Board Certified Specialty: No


Operation Samahan


OPERATION SAMAHAN


RANCHO PENASQUITOS

 9995 CARMEL MOUNTAIN
RD STE B10 AND B11

SAN DIEGO, CA 92129

 Phone: (844) 200-2426

 After Hours Phone: (844)
200-2426

 Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

ORPILLA, IMELDA

Provider ID: 418535

Provider Gender: Female

License Number: NP95003211

NPI: 1790785988

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Board Certified Specialty: No


Operation Samahan


OPERATION SAMAHAN


RANCHO PENASQUITOS

 9995 CARMEL MOUNTAIN
RD STE B10 AND B11

SAN DIEGO, CA 92129

 Phone: (844) 200-2426

 After Hours Phone: (844)
200-2426

 Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

OWEN, MICHAEL

Provider ID: 206362

Provider Gender: Female

License Number: NP95001492

NPI: 1073869145

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424


 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:30AM-5:30PM

F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER


OWEN, MICHAEL

D2. Directorio de atención primaria

Provider ID: 206362
Provider Gender: Female
License Number: NP95001492
NPI: 1073869145
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No

Family Health Centers of San Diego
NORTH PARK FAMILY HEALTH CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-TH 8:30AM-5:30PM
F 8:00AM-5:00PM

CERTIFIED NURSE PRACTITIONER

OWEN, MICHAEL


Provider ID: 206362
Provider Gender: Female
License Number: NP95001492
NPI: 1073869145
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San

Diego
NORTH PARK FAMILY HEALTH CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Hours: M-TH 8:30AM-5:30PM
F 8:00AM-5:00PM

CERTIFIED NURSE PRACTITIONER

OWEN, MICHAEL

Provider ID: 206362
Provider Gender: Female
License Number: NP95001492
NPI: 1073869145
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER
Hours: M-TH 8:30AM-5:30PM
F 8:00AM-5:00PM

CERTIFIED NURSE PRACTITIONER


OWEN, MICHAEL

Provider ID: 206363
Provider Gender: Female
License Number: NP95001492
NPI: 1073869145
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619) 515-2560

 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

OWEN, MICHAEL

Provider ID: 206363

D2. Directorio de atención primaria

Provider Gender: Female
License Number: NP95001492
NPI: 1073869145

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560
 After Hours Phone: (619)
515-2560

Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

PADILLA, MICHELE

Provider ID: 403583
Provider Gender: Female
License Number: NP95020636
NPI: 1356083828

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

1501 IMPERIAL AVE
SAN DIEGO, CA 92101

Phone: (619) 233-8500
 After Hours Phone: (619)
233-8500

Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

PADILLA, MICHELE

Provider ID: 403583
Provider Gender: Female
License Number: NP95020636
NPI: 1356083828

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

1501 IMPERIAL AVE
SAN DIEGO, CA 92101

Phone: (619) 233-8500
 After Hours Phone: (619)
233-8500

Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

PATEL, KELLY

Provider ID: 402851
Provider Gender: Female
License Number: NP95004735
NPI: 1033493747

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN
DIEGO-BEACH AREA

3705 MISSION BLVD
SAN DIEGO, CA 92109

Phone: (619) 515-2444
 After Hours Phone: (619)
515-2444

Website: www.fhcsd.org
Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-W 8:30AM-5:30PM
TH 9:00AM-6:00PM
F 8:30AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

PATEL, KELLY

Provider ID: 402851
Provider Gender: Female
License Number: NP95004735
NPI: 1033493747

Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San


D2. Directorio de atención primaria

Diego

FAMILY HLTH CTR SAN
DIEGO-BEACH AREA

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619)
515-2444

 Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-W 8:30AM-5:30PM

TH 9:00AM-6:00PM

F 8:30AM-5:30PM

CERTIFIED NURSE

PRACTITIONER


PATIAG, DANIEL


Provider ID: 206046

Provider Gender: Male

License Number: NP95012511

NPI: 1073169769

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Tagalog


Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE

PRACTITIONER


PATIAG, DANIEL


Provider ID: 206046

Provider Gender: Male

License Number: NP95012511

NPI: 1073169769

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Tagalog


Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE

PRACTITIONER

PATIAG, DANIEL

Provider ID: 482070

Provider Gender: Male

License Number: NP95012511

NPI: 1073169769

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Tagalog


Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700


 After Hours Phone: (858)
810-8700

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM

TU 8:30AM-8:30PM

W-F 8:30AM-5:30PM

SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

PATIAG, DANIEL


Provider ID: 206046

Provider Gender: Male

License Number: NP95012511

NPI: 1073169769

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Board Certified Specialty: No

D2. Directorio de atención primaria

IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE
CTR

📍 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
☎ Phone: (858) 279-0925
🕒 After Hours Phone: (858)
279-0925
🌐 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER

PATIAG, DANIEL

Provider ID: 206046
Provider Gender: Male
License Number: NP95012511
NPI: 1073169769

☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE
CTR

📍 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
☎ Phone: (858) 279-0925
🕒 After Hours Phone: (858)
279-0925
🌐 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL): Provider ID: 207382

N

♿ Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER

PATIAG, DANIEL

Provider ID: 482070

Provider Gender: Male

License Number: NP95012511

NPI: 1073169769

☐ Provider English Spoken: Y

☐ Provider Language(s)

Spoken: Tagalog

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN DIEGO FAMILY CARE

📍 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

☎ Phone: (858) 810-8700

🕒 After Hours Phone: (858)
810-8700

🌐 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM

TU 8:30AM-8:30PM

W-F 8:30AM-5:30PM

SA 9:00AM-4:00PM

CERTIFIED NURSE PRACTITIONER

PERRY, KATHERINE

Provider Gender: Female

License Number: NP95014964

NPI: 1215543426

☐ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN DIEGO AMERICAN

INDIAN HEALTH CENTER

📍 2630 1ST AVE
SAN DIEGO, CA 92103

☎ Phone: (619) 234-2158

🕒 After Hours Phone: (619)
234-2158

🌐 Website: WWW.SDAIHC.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

Indian Health Services: Y

CERTIFIED NURSE PRACTITIONER

PERRY, KATHERINE

Provider ID: 207382

Provider Gender: Female

License Number: NP95014964

NPI: 1215543426

☐ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No



IHP of Southern Cal-PHP


SAN DIEGO AMERICAN

INDIAN HEALTH CENTER

📍 2630 1ST AVE
SAN DIEGO, CA 92103

D2. Directorio de atención primaria



 Phone: (619) 234-2158
 After Hours Phone: (619) 234-2158
 Website: WWW.SDAIHC.ORG

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Indian Health Services: Y

CERTIFIED NURSE

PRACTITIONER

QUINTO, CINDY

Provider ID: 482070
Provider Gender: Female
License Number: NP16433
NPI: 1902810377
 Provider English Spoken: Y
 Provider Language(s)
Spoken: French, Lao,
Spanish

Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
 After Hours Phone: (858)
810-8700
 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):



N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

QUINTO, CINDY

Provider ID: 482070
Provider Gender: Female
License Number: NP16433
NPI: 1902810377
 Provider English Spoken: Y
 Provider Language(s)
Spoken: French, Lao,
Spanish

Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
 After Hours Phone: (858)
810-8700
 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER



CERTIFIED NURSE

PRACTITIONER


QUINTO, CINDY


Provider ID: 233532
Provider Gender: Female

License Number: NP16433
NPI: 1902810377


 Provider English Spoken: Y
 Provider Language(s)
Spoken: French, Lao,
Spanish

Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Board Certified Specialty: No
IHP of Southern Cal-PHP
MID-CITY COMMUNITY CLINIC

 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105

 Phone: (619) 280-2058
 After Hours Phone: (619)
280-2058
 Website: www.sdfamilycare.org



Medi-Cal Open Panel: Yes
Min/Max Age: 0\22
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

CERTIFIED NURSE

PRACTITIONER

QUINTO, CINDY

Provider ID: 233532
Provider Gender: Female
License Number: NP16433
NPI: 1902810377
 Provider English Spoken: Y
 Provider Language(s)
Spoken: French, Lao,
Spanish
Cultural Competency: N

D2. Directorio de atención primaria

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Board Certified Specialty: No
IHP of Southern Cal-PHP
MID-CITY COMMUNITY CLINIC

4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
Phone: (619) 280-2058
After Hours Phone: (619)
280-2058

Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\22
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

CERTIFIED NURSE PRACTITIONER

REID, EMILY

Provider ID: 185268
Provider Gender: Female
License Number: NP95002766
NPI: 1083081467

Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 255-9155
After Hours Phone: (619)
255-9155

Website: www.lamaestra.org
g
Email:

aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

REID, EMILY

Provider ID: 185268
Provider Gender: Female
License Number: NP95002766
NPI: 1083081467

Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 255-9155
After Hours Phone: (619)
255-9155

Website: www.lamaestra.org
g
Email:

aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

ROGERS, TANYA

Provider ID: 417987
Provider Gender: Female
License Number: NP95004443
NPI: 1558710038

Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HEALTH CTR IBARRA

4874 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 515-2426
After Hours Phone: (619)
515-2426

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

ROGERS, TANYA

Provider ID: 417987
Provider Gender: Female
License Number: NP95004443
NPI: 1558710038


Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HEALTH CTR IBARRA

4874 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 515-2426

D2. Directorio de atención primaria

 After Hours Phone: (619)
515-2426

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER


SABIN, NANCY

Provider ID: 206046

Provider Gender: Female

License Number: NP4668

NPI: 1285732586

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925


 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-5:00PM

TU 8:00AM-8:00PM

W-F 8:00AM-5:00PM

SA 9:00AM-1:00PM

CERTIFIED NURSE

PRACTITIONER


SABIN, NANCY

Provider ID: 482070

Provider Gender: Female

License Number: NP4668

NPI: 1285732586

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 After Hours Phone: (858)
810-8700

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM

TU 8:30AM-9:00PM

W-F 8:30AM-5:30PM

SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER


SABIN, NANCY

Provider ID: 206046

Provider Gender: Female

License Number: NP4668

NPI: 1285732586

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-5:00PM

TU 8:00AM-8:00PM

W-F 8:00AM-5:00PM

SA 9:00AM-1:00PM

CERTIFIED NURSE

PRACTITIONER

SABIN, NANCY

Provider ID: 206046

Provider Gender: Female

License Number: NP4668

NPI: 1285732586

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD

D2. Directorio de atención primaria

SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER
Hours: M 8:00AM-5:00PM
TU 8:00AM-8:00PM
W-F 8:00AM-5:00PM
SA 9:00AM-1:00PM

CERTIFIED NURSE

PRACTITIONER

SABIN, NANCY

Provider ID: 482070
Provider Gender: Female
License Number: NP4668
NPI: 1285732586
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN DIEGO FAMILY CARE

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M 8:30AM-5:30PM
TU 8:30AM-9:00PM
W-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

SABIN, NANCY

Provider ID: 206046
Provider Gender: Female
License Number: NP4668
NPI: 1285732586
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE
CTR

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER
Hours: M 8:00AM-5:00PM
TU 8:00AM-8:00PM
W-F 8:00AM-5:00PM
SA 9:00AM-1:00PM

CERTIFIED NURSE

PRACTITIONER

SAMPSON, ANDRIECE

Provider ID: 207382
Provider Gender: Female
License Number: NP95026377
NPI: 1619594124

Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN DIEGO AMERICAN
INDIAN HEALTH CENTER

2630 1ST AVE
SAN DIEGO, CA 92103
Phone: (619) 234-2158
After Hours Phone: (619) 234-2158
Website: WWW.SDAIHC.ORG

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Indian Health Services: Y

CERTIFIED NURSE

PRACTITIONER

SAMPSON, ANDRIECE

Provider ID: 207382
Provider Gender: Female
License Number: NP95026377
NPI: 1619594124

Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN DIEGO AMERICAN
INDIAN HEALTH CENTER

D2. Directorio de atención primaria

 2630 1ST AVE
SAN DIEGO, CA 92103
 Phone: (619) 234-2158
 After Hours Phone: (619)
234-2158
 Website: WWW.SDAIHC.ORG

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
Indian Health Services: Y

CERTIFIED NURSE

PRACTITIONER


SANTANGELO, JOANNE

Provider ID: 206046

Provider Gender: Female

License Number: NP2390


NPI: 1619370475

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 After Hours Phone: (858)
279-0925
 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-5:00PM
TU 8:00AM-8:00PM
W-F 8:00AM-5:00PM
SA 9:00AM-1:00PM

CERTIFIED NURSE

PRACTITIONER


SANTANGELO, JOANNE

Provider ID: 482070

Provider Gender: Female

License Number: NP2390

NPI: 1619370475

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
 After Hours Phone: (858)
810-8700
 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM
TU 8:30AM-9:00PM
W-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

CERTIFIED NURSE


PRACTITIONER

SANTANGELO, JOANNE

Provider ID: 206046

Provider Gender: Female

License Number: NP2390
NPI: 1619370475

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 After Hours Phone: (858)
279-0925
 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-5:00PM
TU 8:00AM-8:00PM
W-F 8:00AM-5:00PM
SA 9:00AM-1:00PM

CERTIFIED NURSE

PRACTITIONER


SANTANGELO, JOANNE

Provider ID: 206046

Provider Gender: Female

License Number: NP2390

NPI: 1619370475

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

D2. Directorio de atención primaria

 Phone: (858) 279-0925
 After Hours Phone: (858) 279-0925
 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M 8:00AM-5:00PM

TU 8:00AM-8:00PM

W-F 8:00AM-5:00PM

SA 9:00AM-1:00PM

CERTIFIED NURSE PRACTITIONER


SANTANGELO, JOANNE

Provider ID: 482070


Provider Gender: Female


License Number: NP2390

NPI: 1619370475

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700


 After Hours Phone: (858) 810-8700

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M 8:30AM-5:30PM

TU 8:30AM-9:00PM

W-F 8:30AM-5:30PM

SA 9:00AM-4:00PM

CERTIFIED NURSE PRACTITIONER


SANTANGELO, JOANNE

Provider ID: 206046


Provider Gender: Female


License Number: NP2390

NPI: 1619370475

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858) 279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M 8:00AM-5:00PM

TU 8:00AM-8:00PM

W-F 8:00AM-5:00PM

SA 9:00AM-1:00PM

CERTIFIED NURSE PRACTITIONER

SATTERWHITE, MAURINE

Provider ID: 206046

Provider Gender: Female

License Number: NP7022

NPI: 1225012842

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858) 279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M 8:00AM-5:00PM

TU 8:00AM-8:00PM

W-F 8:00AM-5:00PM

SA 9:00AM-1:00PM

CERTIFIED NURSE PRACTITIONER

SATTERWHITE, MAURINE


Provider ID: 482070

Provider Gender: Female

License Number: NP7022

NPI: 1225012842

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

D2. Directorio de atención primaria

SAN DIEGO FAMILY CARE


 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
 After Hours Phone: (858)
810-8700
 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

SATTERWHITE, MAURINE

Provider ID: 206046

Provider Gender: Female

License Number: NP7022

NPI: 1225012842

Provider English Spoken: Y



Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925
 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-5:00PM

TU 8:00AM-8:00PM

W-F 8:00AM-5:00PM

SA 9:00AM-1:00PM

CERTIFIED NURSE

PRACTITIONER

SATTERWHITE, MAURINE

Provider ID: 206046

Provider Gender: Female

License Number: NP7022

NPI: 1225012842

Provider English Spoken: Y



Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925
 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-5:00PM

TU 8:00AM-8:00PM

W-F 8:00AM-5:00PM

SA 9:00AM-1:00PM

CERTIFIED NURSE

PRACTITIONER

SATTERWHITE, MAURINE

Provider ID: 482070

Provider Gender: Female

License Number: NP7022

NPI: 1225012842

Provider English Spoken: Y



Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700
 After Hours Phone: (858)
810-8700


 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

SA 9:00AM-4:00PM

CERTIFIED NURSE

PRACTITIONER

SATTERWHITE, MAURINE

Provider ID: 206046

Provider Gender: Female

License Number: NP7022

NPI: 1225012842

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


D2. Directorio de atención primaria

Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 After Hours Phone: (858)
279-0925
 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-5:00PM
TU 8:00AM-8:00PM
W-F 8:00AM-5:00PM
SA 9:00AM-1:00PM

CERTIFIED NURSE PRACTITIONER

SAVILLE, EDITH

Provider ID: 417937

Provider Gender: Female

License Number: NP7374



NPI: 1730567678


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

CERTIFIED NURSE PRACTITIONER

SAVILLE, EDITH

Provider ID: 417937

Provider Gender: Female

License Number: NP7374



NPI: 1730567678


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

CERTIFIED NURSE PRACTITIONER

SEAMAN, MARY

Provider ID: 206363

Provider Gender: Female

License Number: NP10146



NPI: 1033116652


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC


 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560
 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

SEAMAN, MARY

Provider ID: 206363

Provider Gender: Female

License Number: NP10146

NPI: 1033116652

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

D2. Directorio de atención primaria

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619)
515-2560

Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

SEBRING, JAN

Provider ID: 206360
Provider Gender: Female
License Number: RN486421
NPI: 1295750339

Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

SEBRING, JAN

Provider ID: 206360
Provider Gender: Female
License Number: RN486421
NPI: 1295750339

Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

SEBRING, JAN

Provider ID: 206360
Provider Gender: Female
License Number: NP10906
NPI: 1295750339

Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

SEBRING, JAN

Provider ID: 206360
Provider Gender: Female
License Number: NP10906
NPI: 1295750339


Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

D2. Directorio de atención primaria

American Sign Language (ASL):  Provider English Spoken: Y
Cultural Competency: N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

TAYLOR, KAYLA

Provider ID: 417429

Provider Gender: Female

License Number: NP95006792


NPI: 1730604414


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO- CITY COLLEGE

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101

 Phone: (619) 515-2525

 After Hours Phone: (619)
515-2525

 Website: www.fhcsd.org
Email: janeta@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER

TAYLOR, KAYLA

Provider ID: 417429

Provider Gender: Female

License Number: NP95006792


NPI: 1730604414


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO- CITY COLLEGE

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101

 Phone: (619) 515-2525

 After Hours Phone: (619)
515-2525

 Website: www.fhcsd.org
Email: janeta@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER

TAYLOR, KAYLA

Provider ID: 206362

Provider Gender: Female

License Number: NP95006792


NPI: 1730604414


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

TAYLOR, KAYLA

Provider ID: 206362

Provider Gender: Female

License Number: NP95006792


NPI: 1730604414


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104


 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE PRACTITIONER

TAYLOR, KAYLA

Provider ID: 206362

Provider Gender: Female

License Number: NP95006792

D2. Directorio de atención primaria


NPI: 1730604414


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619) 515-2424


 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

TAYLOR, KAYLA

Provider ID: 206362

Provider Gender: Female

License Number: NP95006792


NPI: 1730604414


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619) 515-2424

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER


TODD, MIKAYLA


Provider ID: 517998

Provider Gender: Female

License Number: NP95005999

NPI: 1316478092

 Provider English Spoken: Y

 Provider Language(s)


Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH
COMMUNITY HEIGHTS FAMILY
MED

 4690 EL CAJON BLVD
SAN DIEGO, CA 92115

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

TODD, MIKAYLA


Provider ID: 517998

Provider Gender: Female

License Number: NP95005999

NPI: 1316478092

 Provider English Spoken: Y

 Provider Language(s)


Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH
COMMUNITY HEIGHTS FAMILY
MED

 4690 EL CAJON BLVD
SAN DIEGO, CA 92115

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

TRAN, KELLY

Provider ID: 206360

Provider Gender: Female

License Number: NP95003689

NPI: 1255799276

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Vietnamese

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE

D2. Directorio de atención primaria

SAN DIEGO, CA 92113
☎ Phone: (619) 515-2300
🕒 After Hours Phone: (619) 515-2300
🌐 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

TRAN, KELLY

Provider ID: 206360
Provider Gender: Female
License Number: NP95003689
NPI: 1255799276

☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

📍 1809 NATIONAL AVE
SAN DIEGO, CA 92113
☎ Phone: (619) 515-2300
🕒 After Hours Phone: (619) 515-2300

🌐 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

TUEROS, VICTORIA

Provider ID: 206360
Provider Gender: Female
License Number: NP2286
NPI: 1598989261

☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

📍 1809 NATIONAL AVE
SAN DIEGO, CA 92113
☎ Phone: (619) 515-2300
🕒 After Hours Phone: (619) 515-2300

🌐 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

TUEROS, VICTORIA

Provider ID: 206360
Provider Gender: Female
License Number: NP2286
NPI: 1598989261

☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

📍 1809 NATIONAL AVE
SAN DIEGO, CA 92113
☎ Phone: (619) 515-2300
🕒 After Hours Phone: (619) 515-2300

🌐 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

VEGA, TERESA

Provider ID: 206360
Provider Gender: Female
License Number: NP95001705
NPI: 1912304569

☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish


Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

📍 1809 NATIONAL AVE
SAN DIEGO, CA 92113
☎ Phone: (619) 515-2300
🕒 After Hours Phone: (619) 515-2300

D2. Directorio de atención primaria



 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER




CERTIFIED NURSE PRACTITIONER



VEGA, TERESA

Provider ID: 206360
Provider Gender: Female
License Number: NP95001705
NPI: 1912304569

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER



 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER




CERTIFIED NURSE PRACTITIONER



VELASQUEZ, FERNANDO

Provider ID: 206360
Provider Gender: Male
License Number: NP95011254
NPI: 1386195535

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER



 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER




VELASQUEZ, FERNANDO



Provider ID: 206360
Provider Gender: Male
License Number: NP95011254
NPI: 1386195535

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER



 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER


CERTIFIED NURSE PRACTITIONER

VELASQUEZ, FERNANDO

Provider ID: 419529
Provider Gender: Male
License Number: NP95011254
NPI: 1386195535

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL


 2325 COMMERCIAL ST STE 1400
SAN DIEGO, CA 92113
 Phone: (619) 515-2422
 After Hours Phone: (619) 515-2422

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes

D2. Directorio de atención primaria

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER


VELASQUEZ, FERNANDO

Provider ID: 419529

Provider Gender: Male

License Number: NP95011254

NPI: 1386195535

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR OF SD SAN
DIEGO COMMERCIAL

 2325 COMMERCIAL ST STE
1400

SAN DIEGO, CA 92113

 Phone: (619) 515-2422

 After Hours Phone: (619)
515-2422

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER


VILLALOBOS, REBECA

Provider ID: 206360

Provider Gender: Female

License Number: NP95015780

NPI: 1184224396

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER


VILLALOBOS, REBECA

Provider ID: 206360

Provider Gender: Female

License Number: NP95015780

NPI: 1184224396

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY

HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

WEICKERT, MARIA

Provider ID: 417429

Provider Gender: Female

License Number: NP95010814


NPI: 1841758984


 Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO- CITY COLLEGE

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101

 Phone: (619) 515-2525

 After Hours Phone: (619)
515-2525

 Website: www.fhcsd.org

Email: janeta@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT


D2. Directorio de atención primaria

PROVIDER
Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE **PRACTITIONER**



WEICKERT, MARIA


Provider ID: 417429
Provider Gender: Female
License Number: NP95010814
NPI: 1841758984

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE

 *1550 BROADWAY STE 2*
SAN DIEGO, CA 92101

 *Phone: (619) 515-2525*
 *After Hours Phone: (619) 515-2525*

 *Website: www.fhcsd.org*
Email: janeta@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N



 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE **PRACTITIONER**



WILLIAMS, BREAHA

Provider ID: 185268
Provider Gender: Female
License Number: NP95001840
NPI: 1063884864

 *Provider English Spoken: Y*
 *Provider Language(s)*

Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC INC

 *4060 FAIRMOUNT AVE*
SAN DIEGO, CA 92105

 *Phone: (619) 255-9155*
 *After Hours Phone: (619) 255-9155*

 *Website: www.lamaestra.org*

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N


 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM

CERTIFIED NURSE **PRACTITIONER**

WILLIAMS, BREAHA

Provider ID: 185268
Provider Gender: Female
License Number: NP95001840
NPI: 1063884864

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Spanish

Cultural Competency: N
Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC INC

 *4060 FAIRMOUNT AVE*
SAN DIEGO, CA 92105

 *Phone: (619) 255-9155*
 *After Hours Phone: (619) 255-9155*
 *Website: www.lamaestra.org*


Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N



 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM

CERTIFIED NURSE **PRACTITIONER**

WILLIAMS, TAKISHA



Provider ID: 416831
Provider Gender: Female
License Number: NP95013978
NPI: 1881727386


 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish

Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

 *3514 30TH ST*
SAN DIEGO, CA 92104

 *Phone: (619) 515-2424*
 *After Hours Phone: (619) 515-2424*

 *Website: www.fhcsd.org*
Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

D2. Directorio de atención primaria

American Sign Language (ASL): NPI: 1881727386

N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER


WILLIAMS, TAKISHA

Provider ID: 416831

Provider Gender: Female

License Number: NP95013978

NPI: 1881727386

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

 3514 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619) 515-2424

 Website: www.fhcsd.org


Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL): NPI: 1881727386

N

 Accessibility: CONTACT PROVIDER


CERTIFIED NURSE PRACTITIONER

WILLIAMS, TAKISHA

Provider ID: 402851

Provider Gender: Female

License Number: NP95013978

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego


FAMILY HLTH CTR SAN

DIEGO-BEACH AREA

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619) 515-2444

 Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


CERTIFIED NURSE PRACTITIONER

WILLIAMS, TAKISHA

Provider ID: 402851

Provider Gender: Female

License Number: NP95013978

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No


Family Health Centers of San Diego


FAMILY HLTH CTR SAN

DIEGO-BEACH AREA

 3705 MISSION BLVD

SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619) 515-2444

 Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

WOLF, CELIA

Provider ID: 417937

Provider Gender: Female

License Number: NP95001899

NPI: 1245635564

 Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego

FAMILY HLTH CTR SD

HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619) 515-2545

 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

D2. Directorio de atención primaria

CERTIFIED NURSE

PRACTITIONER


WOLF, CELIA

Provider ID: 417937

Provider Gender: Female

License Number: NP95001899

NPI: 1245635564

 Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD

HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED REGISTERED

NURSE MIDWIFE


BOSTON, LAURA

Provider ID: 206360

Provider Gender: Female

License Number: NM792

NPI: 1174553259

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San

Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED REGISTERED

NURSE MIDWIFE


BOSTON, LAURA


Provider ID: 206360

Provider Gender: Female

License Number: NM792

NPI: 1174553259

 Provider English Spoken: Y

 Provider Language(s)


Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED REGISTERED

NURSE MIDWIFE


GEPSTEIN, YANA


Provider ID: 402851

Provider Gender: Female

License Number: NM1662

NPI: 1396956512

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Hebrew


Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN
DIEGO-BEACH AREA

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619)
515-2444

 Website: www.fhcsd.org


Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED REGISTERED

NURSE MIDWIFE

GEPSTEIN, YANA


Provider ID: 402851


Provider Gender: Female

License Number: NM1662

D2. Directorio de atención primaria

NPI: 1396956512

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Hebrew


Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-BEACH AREA

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619)
515-2444

 Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED REGISTERED

NURSE MIDWIFE


TOLMIE, SIMONE

Provider ID: 206360

Provider Gender: Female

License Number: NM236263

NPI: 1104572007

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: Providence
Santa Rosa Memorial Hospital

Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY

HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED REGISTERED

NURSE MIDWIFE


TOLMIE, SIMONE

Provider ID: 206360

Provider Gender: Female

License Number: NM236263

NPI: 1104572007

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: Providence
Santa Rosa Memorial Hospital

Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

ASSADIAN, MEHRAK


Provider ID: 451167

Provider Gender: Female

License Number: DC27523

NPI: 1295278281

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Turkish


Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

KING CHAVEZ HEALTH
CENTER

 950 S EUCLID AVE
SAN DIEGO, CA 92114

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/king-chavez-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

ASSADIAN, MEHRAK

Provider ID: 451167


Provider Gender: Female

License Number: DC27523


NPI: 1295278281

 Provider English Spoken: Y

D2. Directorio de atención primaria


 *Provider Language(s)
Spoken: Turkish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
KING CHAVEZ HEALTH
CENTER*

 950 S EUCLID AVE
SAN DIEGO, CA 92114
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/king-chavez-health-center


*Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER*

CHIROPRACTOR

CABALLERO, JAMES


*Provider ID: 418535
Provider Gender: Male
License Number: DC27726
NPI: 1093991549
 *Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Operation Samahan
OPERATION SAMAHAN
RANCHO PENASQUITOS**

 9995 CARMEL MOUNTAIN
RD STE B10 AND B11
SAN DIEGO, CA 92129
 Phone: (844) 200-2426
 After Hours Phone: (844)
200-2426
 Website: www.operationsamahan.org


*Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-TU 8:30AM-5:30PM
W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM*

CHIROPRACTOR

CABALLERO, JAMES

*Provider ID: 418535
Provider Gender: Male
License Number: DC27726
NPI: 1093991549
 *Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Operation Samahan
OPERATION SAMAHAN
RANCHO PENASQUITOS**

 9995 CARMEL MOUNTAIN
RD STE B10 AND B11
SAN DIEGO, CA 92129
 Phone: (844) 200-2426
 After Hours Phone: (844)
200-2426
 Website: www.operationsamahan.org

*Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-TU 8:30AM-5:30PM
W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM*

CHIROPRACTOR


CABALLERO, JAMES


*Provider ID: 417101
Provider Gender: Male
License Number: DC27726
NPI: 1093991549
 *Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Operation Samahan
OPERATION SAMAHAN - MIRA
MESA**

 10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126
 Phone: (844) 200-2426
 After Hours Phone: (844)
200-2426
 Website: www.operationsamahan.org
*Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-4:30PM*




CHIROPRACTOR

CABALLERO, JAMES

*Provider ID: 417101
Provider Gender: Male
License Number: DC27726
NPI: 1093991549
 *Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Operation Samahan
OPERATION SAMAHAN - MIRA
MESA**

 10737 CAMINO RUIZ STE
235

D2. Directorio de atención primaria

SAN DIEGO, CA 92126
 Phone: (844) 200-2426
 After Hours Phone: (844) 200-2426
 Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-4:30PM

CHIROPRACTOR



GILIBERTO, JOSEPH

Provider ID: 417101
Provider Gender: Male
License Number: DC15775
NPI: 1821463159
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Operation Samahan
OPERATION SAMAHAN - MIRA MESA
 10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
 Phone: (844) 200-2426
 After Hours Phone: (844) 200-2426
 Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-4:30PM

CHIROPRACTOR



GILIBERTO, JOSEPH






Provider ID: 417101
Provider Gender: Male
License Number: DC15775
NPI: 1821463159
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Operation Samahan
OPERATION SAMAHAN - MIRA MESA

 10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
 Phone: (844) 200-2426
 After Hours Phone: (844) 200-2426
 Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-4:30PM

CHIROPRACTOR






GILIBERTO, JOSEPH

Provider ID: 418535
Provider Gender: Male
License Number: DC15775
NPI: 1821463159
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish

Cultural Competency: N
Board Certified Specialty: No
Operation Samahan
OPERATION SAMAHAN
RANCHO PENASQUITOS
 9995 CARMEL MOUNTAIN RD STE B10 AND B11
SAN DIEGO, CA 92129
 Phone: (844) 200-2426
 After Hours Phone: (844) 200-2426
 Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-TU 8:30AM-5:30PM
W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM

CHIROPRACTOR

GILIBERTO, JOSEPH



Provider ID: 418535
Provider Gender: Male
License Number: DC15775
NPI: 1821463159
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Operation Samahan
OPERATION SAMAHAN
RANCHO PENASQUITOS
 9995 CARMEL MOUNTAIN RD STE B10 AND B11
SAN DIEGO, CA 92129
 Phone: (844) 200-2426
 After Hours Phone: (844)

D2. Directorio de atención primaria

200-2426
 Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-TU 8:30AM-5:30PM
W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM

CHIROPRACTOR

HALEY, STEVEN

Provider ID: 185268
Provider Gender: Male
License Number: DC25697
NPI: 1083764484
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
 Phone: (619) 280-4213
 After Hours Phone: (619)
280-4213
 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150



American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER
Hours: M-F 8:00AM-5:00PM

CHIROPRACTOR

HALEY, STEVEN

Provider ID: 185268
Provider Gender: Male
License Number: DC25697
NPI: 1083764484
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
 Phone: (619) 280-4213
 After Hours Phone: (619)
280-4213
 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150


American Sign Language (ASL):
N



 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

CHIROPRACTOR

HOURIHAN, KEITH

Provider ID: 185268
Provider Gender: Male
License Number: DC29314
NPI: 1306916994
 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC
 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
 Phone: (619) 280-4213
 After Hours Phone: (619)
280-4213
 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150



American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

CHIROPRACTOR


HOURIHAN, KEITH

Provider ID: 185268
Provider Gender: Male
License Number: DC29314
NPI: 1306916994
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
 Phone: (619) 280-4213
 After Hours Phone: (619)

D2. Directorio de atención primaria

280-4213
 Website: www.lamaestra.org
g
Email:
aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

CHIROPRACTOR


ILCHENA, ALESANDRA

Provider ID: 185268

Provider Gender: Female

License Number: DC32800

NPI: 1871046664

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER


Board Certified Specialty: No


La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC

INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 798-3947

 After Hours Phone: (619)
798-3947

 Website: www.lamaestra.org
g

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

CHIROPRACTOR


ILCHENA, ALESANDRA

Provider ID: 185268

Provider Gender: Female

License Number: DC32800

NPI: 1871046664

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR

MEDICAL CENTER


Board Certified Specialty: No


La Maestra Family Clinic


LA MAESTRA FAMILY CLINIC

INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 798-3947

 After Hours Phone: (619)
798-3947

 Website: www.lamaestra.org
g

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

CHIROPRACTOR

KAZEM, AHMAD

Provider ID: 227409

Provider Gender: Male

License Number: DC33300

NPI: 1003296096

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi, Persian


Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHC -

OCEAN VIEW

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

KAZEM, AHMAD


Provider ID: 227409

Provider Gender: Male

License Number: DC33300

NPI: 1003296096

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi, Persian

Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHC -

OCEAN VIEW

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

 Phone: (619) 662-4100

D2. Directorio de atención primaria

 After Hours Phone: (619) 662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

CHIROPRACTOR


LOVERN, JENNIFER

Provider ID: 418535

Provider Gender: Female

License Number: DC29074

NPI: 1235469396

 Provider English Spoken: Y

 Provider Language(s)
Spoken: French, Italian,
Spanish


Cultural Competency: N


Board Certified Specialty: No


Operation Samahan


OPERATION SAMAHAN

RANCHO PENASQUITOS

 9995 CARMEL MOUNTAIN
RD STE B10 AND B11
SAN DIEGO, CA 92129

 Phone: (844) 200-2426


 After Hours Phone: (844)
200-2426

 Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-TU 8:30AM-5:30PM

W 10:00AM-7:00PM

TH-F 8:30AM-5:30PM

CHIROPRACTOR


LOVERN, JENNIFER


Provider ID: 418535

Provider Gender: Female

License Number: DC29074

NPI: 1235469396

 Provider English Spoken: Y

 Provider Language(s)
Spoken: French, Italian,
Spanish


Cultural Competency: N


Board Certified Specialty: No


Operation Samahan


OPERATION SAMAHAN

RANCHO PENASQUITOS

 9995 CARMEL MOUNTAIN
RD STE B10 AND B11
SAN DIEGO, CA 92129

 Phone: (844) 200-2426

 After Hours Phone: (844)
200-2426

 Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-TU 8:30AM-5:30PM

W 10:00AM-7:00PM

TH-F 8:30AM-5:30PM

CHIROPRACTOR

OLSEN, MARTIN

Provider ID: 402851

Provider Gender: Male

License Number: DC20729

NPI: 1730247990

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego

FAMILY HLTH CTR SAN

DIEGO-BEACH AREA

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619)
515-2444

 Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

CHIROPRACTOR

OLSEN, MARTIN

Provider ID: 402851

Provider Gender: Male

License Number: DC20729

NPI: 1730247990

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San
Diego

FAMILY HLTH CTR SAN



DIEGO-BEACH AREA

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 Phone: (619) 515-2444





 After Hours Phone: (619)

D2. Directorio de atención primaria

515-2444
 Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

CHIROPRACTOR


PAGE, BIANCA






Provider ID: 417937
Provider Gender: Female
License Number: DC33688
NPI: 1649787607
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SD
HILLCREST
 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619) 515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

CHIROPRACTOR


PAGE, BIANCA


Provider ID: 417937
Provider Gender: Female
License Number: DC33688
NPI: 1649787607
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619) 515-2545
 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

CHIROPRACTOR

ROJAS, RICHARD





Provider ID: 417937
Provider Gender: Male
License Number: DC31024
NPI: 1538318811
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619) 515-2545
 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 9:00AM-5:00PM

CHIROPRACTOR

ROJAS, RICHARD

Provider ID: 417937
Provider Gender: Male
License Number: DC31024
NPI: 1538318811
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619) 515-2545
 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 9:00AM-5:00PM

D2. Directorio de atención primaria

CHIROPRACTOR

SOSA, DAVID

Provider ID: 417937

Provider Gender: Male

License Number: DC33150

NPI: 1013308675


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego


FAMILY HLTH CTR SD

HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

CHIROPRACTOR

SOSA, DAVID

Provider ID: 417937

Provider Gender: Male

License Number: DC33150

NPI: 1013308675

 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San


Diego


FAMILY HLTH CTR SD

HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

CHIROPRACTOR

SOSA, DAVID

Provider ID: 206363

Provider Gender: Male

License Number: DC33150

NPI: 1013308675


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego


DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

SOSA, DAVID

Provider ID: 206363

Provider Gender: Male

License Number: DC33150

NPI: 1013308675


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego


DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560


 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

TAGHIZADEH, MAJID


Provider ID: 417937

Provider Gender: Male

License Number: DC30121

NPI: 1750590600

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi, Persian,

D2. Directorio de atención primaria

Turkish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SD
HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545

Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

CHIROPRACTOR

TAGHIZADEH, MAJID

Provider ID: 417937
Provider Gender: Male
License Number: DC30121
NPI: 1750590600

Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Persian, Turkish

Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SD
HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545

After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

CHIROPRACTOR

TRUONG, VENNES

Provider ID: 417101
Provider Gender: Female
License Number: DC34907
NPI: 1053919928

Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Operation Samahan
OPERATION SAMAHAN - MIRA MESA

10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426

Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-4:30PM

CHIROPRACTOR

TRUONG, VENNES

Provider ID: 417101
Provider Gender: Female
License Number: DC34907
NPI: 1053919928
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Operation Samahan
OPERATION SAMAHAN - MIRA MESA

10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-4:30PM

CLINIC OUTPATIENT

OPERATION SAMAHAN RANCHO PENASQUITOS,

Provider ID: 418535
NPI: 1699216622
Provider English Spoken: Y
Cultural Competency: N
Operation Samahan
OPERATION SAMAHAN RANCHO PENASQUITOS
9995 CARMEL MOUNTAIN RD STE B10 AND B11
SAN DIEGO, CA 92129
Phone: (844) 200-2426

D2. Directorio de atención primaria

Fax: (858) 695-9074

☎ After Hours Phone: (844) 200-2426

🌐 Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Hours: M-TU 8:30AM-5:30PM

W 10:00AM-7:00PM

TH-F 8:30AM-5:30PM

CLINIC OUTPATIENT

OPERATION SAMAHAN

RANCHO PENASQUITOS,

Provider ID: 418535

NPI: 1699216622

☑ Provider English Spoken: Y
Cultural Competency: N

Operation Samahan

OPERATION SAMAHAN

RANCHO PENASQUITOS

📍 9995 CARMEL MOUNTAIN RD STE B10 AND B11
SAN DIEGO, CA 92129

☎ Phone: (844) 200-2426

Fax: (858) 695-9074

☎ After Hours Phone: (844) 200-2426

🌐 Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Hours: M-TU 8:30AM-5:30PM

W 10:00AM-7:00PM

TH-F 8:30AM-5:30PM

DERMATOLOGY

BURROWS, WILLIAM

Provider ID: 417937

Provider Gender: Male

License Number: G16236

NPI: 1639199292

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD

HILLCREST

📍 4094 4TH AVE
SAN DIEGO, CA 92103

☎ Phone: (619) 515-2545

☎ After Hours Phone: (619) 515-2545

🌐 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

DERMATOLOGY

BURROWS, WILLIAM

Provider ID: 417937

Provider Gender: Male

License Number: G16236

NPI: 1639199292

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD
HILLCREST

📍 4094 4TH AVE
SAN DIEGO, CA 92103

☎ Phone: (619) 515-2545

☎ After Hours Phone: (619) 515-2545

🌐 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

DERMATOLOGY

CARTER, NATASHA

Provider ID: 206363

Provider Gender: Female

License Number: A140912

NPI: 1033539184

☑ Provider English Spoken: Y
☑ Provider Language(s) Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

Board Certified Specialty: No
Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

D2. Directorio de atención primaria

 4725 MARKET ST
SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

DERMATOLOGY


CARTER, NATASHA

Provider ID: 206363

Provider Gender: Female

License Number: A140912

NPI: 1033539184

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA


JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Board Certified Specialty: No
Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560


 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): License Number: 20A12732
N

 Accessibility: CONTACT
PROVIDER

ENDOCRINOLOGY

METABOLISM DIABETES

AHMAD, AAKIF

Provider ID: 206360

Provider Gender: Male

License Number: 20A12732

NPI: 1720308331

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,


SCRIPPS GREEN HOSPITAL


Board Certified Specialty: No


Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

ENDOCRINOLOGY

METABOLISM DIABETES

AHMAD, AAKIF

Provider ID: 206360

Provider Gender: Male

NPI: 1720308331

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,


SCRIPPS GREEN HOSPITAL


Board Certified Specialty: No


Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

ENDOCRINOLOGY

METABOLISM DIABETES

CARRILLO, MARITZA

Provider ID: 206360

Provider Gender: Female

License Number: A163183
NPI: 1649628587

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,




SCRIPPS MERCY HOSPITAL


CHULA VISTA

D2. Directorio de atención primaria

Board Certified Specialty: No
Family Health Centers of San Diego


LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*


Hours: M 8:00AM-7:00PM
TU-TH 8:00AM-6:00PM
F 8:00AM-5:30PM

ENDOCRINOLOGY

METABOLISM DIABETES

CARRILLO, MARITZA




Provider ID: 206360
Provider Gender: Female
License Number: A163183
NPI: 1649628587


 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA

Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY

HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*


Hours: M 8:00AM-7:00PM
TU-TH 8:00AM-6:00PM
F 8:00AM-5:30PM

ENDOCRINOLOGY

METABOLISM DIABETES

CHANG, AMY

Provider ID: 206360
Provider Gender: Female
License Number: A93385
NPI: 1750568911



 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SADDLEBACK MEMORIAL MED CTR, SCRIPPS GREEN HOSPITAL


Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE

SAN DIEGO, CA 92113

 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N


 *Accessibility: CONTACT PROVIDER*

ENDOCRINOLOGY

METABOLISM DIABETES




CHANG, AMY


Provider ID: 206360
Provider Gender: Female
License Number: A93385
NPI: 1750568911

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SADDLEBACK MEMORIAL MED CTR, SCRIPPS GREEN HOSPITAL

Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

D2. Directorio de atención primaria

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): License Number: A178494

N

 Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY

METABOLISM DIABETES


GANDHI, ANAND

Provider ID: 206360

Provider Gender: Male

License Number: A178494

NPI: 1821651779

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego


LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

Fax: (619) 515-2510

 After Hours Phone: (619)
515-2300


 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): License Number: A113255

N

 Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY

METABOLISM DIABETES


GANDHI, ANAND

Provider ID: 206360

Provider Gender: Male

License Number: A178494

NPI: 1821651779

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego


LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

Fax: (619) 515-2510

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY

METABOLISM DIABETES

HOSEIN, NADEEN

Provider ID: 417937

Provider Gender: Female

License Number: A113255

NPI: 1912051715

 Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego


FAMILY HLTH CTR SD

HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

ENDOCRINOLOGY

METABOLISM DIABETES

HOSEIN, NADEEN

Provider ID: 417937

Provider Gender: Female

License Number: A113255

NPI: 1912051715

 Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego


FAMILY HLTH CTR SD

HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

D2. Directorio de atención primaria

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM

ENDOCRINOLOGY

METABOLISM DIABETES



ISLAM, JULIE

Provider ID: 206363

Provider Gender: Female

License Number: A149552


NPI: 1750780516


 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Bengali, Spanish*
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

 *4725 MARKET ST
SAN DIEGO, CA 92102*

 *Phone: (619) 515-2560*

 *After Hours Phone: (619) 515-2560*

 *Website: www.fhcsd.org*


Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

ENDOCRINOLOGY

METABOLISM DIABETES



ISLAM, JULIE

Provider ID: 206363

Provider Gender: Female

License Number: A149552


NPI: 1750780516


 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Bengali, Spanish*
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

 *4725 MARKET ST
SAN DIEGO, CA 92102*

 *Phone: (619) 515-2560*

 *After Hours Phone: (619) 515-2560*

 *Website: www.fhcsd.org*

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

ENDOCRINOLOGY

METABOLISM DIABETES


LEVINE, MATTHEW

Provider ID: 206360

Provider Gender: Male

License Number: A77126

NPI: 1801994231

 *Provider English Spoken: Y*


 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N


Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, UCSD MEDICAL CTR

Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 *1809 NATIONAL AVE
SAN DIEGO, CA 92113*

 *Phone: (619) 515-2300*

 *After Hours Phone: (619) 515-2300*

 *Website: www.fhcsd.org*

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

ENDOCRINOLOGY

METABOLISM DIABETES

LEVINE, MATTHEW

Provider ID: 206360

Provider Gender: Male

License Number: A77126

NPI: 1801994231

 *Provider English Spoken: Y*


 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N


Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, UCSD MEDICAL CTR

Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 *1809 NATIONAL AVE
SAN DIEGO, CA 92113*


 *Phone: (619) 515-2300*

 *After Hours Phone: (619) 515-2300*

D2. Directorio de atención primaria

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150



American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY **METABOLISM DIABETES**




LORENZO, PATRICIA


Provider ID: 206360
Provider Gender: Female
License Number: A129599
NPI: 1487913315

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N


Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150



American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY **METABOLISM DIABETES**




LORENZO, PATRICIA


Provider ID: 206360
Provider Gender: Female
License Number: A129599
NPI: 1487913315

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150


American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY **METABOLISM DIABETES**

MCCALLUM, JAMES

Provider ID: 206360
Provider Gender: Male
License Number: A55708
NPI: 1609838994



 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS GREEN HOSPITAL

Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER

Hours: M-TU 8:30AM-6:00PM
TH 8:30AM-6:00PM
F 8:30AM-5:00PM
SA 8:30AM-5:00PM

ENDOCRINOLOGY **METABOLISM DIABETES**

MCCALLUM, JAMES

Provider ID: 206360
Provider Gender: Male
License Number: A55708
NPI: 1609838994

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS

D2. Directorio de atención primaria

MEMORIAL HOSPITAL, RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS GREEN
HOSPITAL

Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TU 8:30AM-6:00PM

TH 8:30AM-6:00PM

F 8:30AM-5:00PM

SA 8:30AM-5:00PM

ENDOCRINOLOGY

METABOLISM DIABETES

NAGELBERG, JODI

Provider ID: 206360

Provider Gender: Female

License Number: A146838

NPI: 1720474141

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

ENDOCRINOLOGY

METABOLISM DIABETES

NAGELBERG, JODI

Provider ID: 206360

Provider Gender: Female

License Number: A146838

NPI: 1720474141

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

ENDOCRINOLOGY

METABOLISM DIABETES

PHILIS-TSIMIKAS, ATHENA

Provider ID: 206360

Provider Gender: Female

License Number: A50477

NPI: 1922105964

Provider English Spoken: Y

Provider Language(s)

Spoken: Greek

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, SCRIPPS GREEN

HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA

Board Certified Specialty: No

Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

D2. Directorio de atención primaria

Hours: M-F 9:00AM-5:00PM

ENDOCRINOLOGY

METABOLISM DIABETES

PHILIS-TSIMIKAS, ATHENA

Provider ID: 206360

Provider Gender: Female

License Number: A50477

NPI: 1922105964

Provider English Spoken: Y

Provider Language(s)

Spoken: Greek

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, SCRIPPS GREEN

HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA

Board Certified Specialty: No


Family Health Centers of San Diego


LOGAN HEIGHTS FAMILY


HEALTH CENTER

 1809 NATIONAL AVE

SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org


Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 9:00AM-5:00PM

FAMILY PRACTICE

ABDALLAH, ALI

Provider ID: 206363

Provider Gender: Male

License Number: 20A15471

NPI: 1649699968

Provider English Spoken: Y

Provider Language(s)

Spoken: Arabic

Cultural Competency: N

Board Certified Specialty: No


Family Health Centers of San Diego


DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

 4725 MARKET ST

SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619) 515-2560

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

ABDALLAH, ALI

Provider ID: 206363

Provider Gender: Male

License Number: 20A15471

NPI: 1649699968

Provider English Spoken: Y

Provider Language(s)

Spoken: Arabic

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San


Diego


DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

 4725 MARKET ST

SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619) 515-2560

 Website: www.fhcsd.org


Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

ALVAREZ-ESTRADA, MIGUEL

Provider ID: 227409

Provider Gender: Male

License Number: A157505

NPI: 1588197826

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL, PARADISE VALLEY

HOSPITAL

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHC -

OCEAN VIEW

 3177 OCEAN VIEW BLVD


SAN DIEGO, CA 92113

 Phone: (619) 662-4100

 After Hours Phone: (619)

662-4100


D2. Directorio de atención primaria

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE


ALVAREZ-ESTRADA, MIGUEL

Provider ID: 227409

Provider Gender: Male

License Number: A157505

NPI: 1588197826

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL, PARADISE VALLEY


HOSPITAL


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHC -

OCEAN VIEW

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE


BACHARACH, REBECCA

Provider ID: 417937

Provider Gender: Female

License Number: 20A15459

NPI: 1225442643

 Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San


Diego


FAMILY HLTH CTR SD

HILLCREST

 4094 4TH AVE

SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

FAMILY PRACTICE


BACHARACH, REBECCA

Provider ID: 417937

Provider Gender: Female

License Number: 20A15459

NPI: 1225442643

 Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No


Family Health Centers of San
Diego


FAMILY HLTH CTR SD

HILLCREST

 4094 4TH AVE

SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

FAMILY PRACTICE

BAGINGITO, AUSTIN

Provider ID: 417937

Provider Gender: Male

License Number: A163977

NPI: 1942705637

 Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San


Diego


FAMILY HLTH CTR SD

HILLCREST

 4094 4TH AVE

SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org


Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

D2. Directorio de atención primaria

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

FAMILY PRACTICE


BAGINGITO, AUSTIN

Provider ID: 417937

Provider Gender: Male


License Number: A163977


NPI: 1942705637

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545


 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

FAMILY PRACTICE

BAGINGITO, AUSTIN

Provider ID: 417429

Provider Gender: Male

License Number: A163977


NPI: 1942705637


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO- CITY COLLEGE

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101

 Phone: (619) 515-2525

 After Hours Phone: (619)
515-2525

 Website: www.fhcsd.org

Email: janeta@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE


BAGINGITO, AUSTIN

Provider ID: 417429

Provider Gender: Male


License Number: A163977

NPI: 1942705637

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO- CITY COLLEGE

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101

 Phone: (619) 515-2525

 After Hours Phone: (619)

515-2525


 Website: www.fhcsd.org

Email: janeta@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE


BAGINGITO, AUSTIN

Provider ID: 206360

Provider Gender: Male


License Number: A163977


NPI: 1942705637

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300


 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

BAGINGITO, AUSTIN


Provider ID: 206360

D2. Directorio de atención primaria

Provider Gender: Male


License Number: A163977


NPI: 1942705637

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300


 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


BAHRAMZI, MARIA


Provider ID: 206362

Provider Gender: Female

License Number: A173486

NPI: 1588141865

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Pashto

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104



Phone: (619) 515-2424



After Hours Phone: (619) 515-2424



Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


BAHRAMZI, MARIA


Provider ID: 206362

Provider Gender: Female

License Number: A173486

NPI: 1588141865


 Provider English Spoken: Y

 Provider Language(s)
Spoken: Pashto


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

 3544 30TH ST

SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619) 515-2424

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

BAHRAMZI, MARIA

Provider ID: 417987

Provider Gender: Female

License Number: A173486

NPI: 1588141865

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Pashto


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HEALTH CTR IBARRA

 4874 POLK AVE

SAN DIEGO, CA 92105

 Phone: (619) 515-2426


 After Hours Phone: (619) 515-2426

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

BAHRAMZI, MARIA


Provider ID: 417987

Provider Gender: Female

License Number: A173486

NPI: 1588141865

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Pashto


Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HEALTH CTR IBARRA



 4874 POLK AVE

SAN DIEGO, CA 92105

 Phone: (619) 515-2426



 After Hours Phone: (619)






D2. Directorio de atención primaria

515-2426
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

BAHRAMZI, MARIA



Provider ID: 206362
Provider Gender: Female
License Number: A173486
NPI: 1588141865
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Pashto
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
NORTH PARK FAMILY HEALTH CENTERS






 3544 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

BAHRAMZI, MARIA



Provider ID: 206362
Provider Gender: Female

License Number: A173486
NPI: 1588141865
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Pashto
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
NORTH PARK FAMILY HEALTH CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER





FAMILY PRACTICE

BAIN, NATALIE

Provider ID: 206360
Provider Gender: Female
License Number: A183464
NPI: 1821677584
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
LOGAN HEIGHTS FAMILY HEALTH CENTER



LOGAN HEIGHTS FAMILY HEALTH CENTER






 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

BAIN, NATALIE

Provider ID: 206360
Provider Gender: Female
License Number: A183464
NPI: 1821677584
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

D2. Directorio de atención primaria

BAUTISTA, LUIS

Provider ID: 517403

Provider Gender: Male

License Number: A97270

NPI: 1295712206

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

COMMUNITY REGIONAL

MEDICAL CENTER-FRESNO,

ST AGNES MEDICAL CENTER

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH 25TH ST

FAMILY MEDICINE

316 25TH ST

SAN DIEGO, CA 92102

Phone: (619) 238-5551

After Hours Phone: (619)
238-5551

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

BAUTISTA, LUIS

Provider ID: 517403

Provider Gender: Male

License Number: A97270

NPI: 1295712206

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

COMMUNITY REGIONAL

MEDICAL CENTER-FRESNO,

ST AGNES MEDICAL CENTER

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH 25TH ST

FAMILY MEDICINE

316 25TH ST

SAN DIEGO, CA 92102

Phone: (619) 238-5551

After Hours Phone: (619)
238-5551

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

BISHOP, MELISSA

Provider ID: 403583

Provider Gender: Female

License Number: C137521

NPI: 1578667077

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR

MEDICAL CENTER

Board Certified Specialty: No

IHP of Southern Cal-PHP

ST VINCENT DE PAUL VILLAGE

FAMILY HEALTH CENTER

1501 IMPERIAL AVE

SAN DIEGO, CA 92101

Phone: (619) 645-6405

After Hours Phone: (619)
645-6405

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

FAMILY PRACTICE

BISHOP, MELISSA

Provider ID: 403583

Provider Gender: Female

License Number: C137521

NPI: 1578667077

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR

MEDICAL CENTER

Board Certified Specialty: No

IHP of Southern Cal-PHP

ST VINCENT DE PAUL VILLAGE

FAMILY HEALTH CENTER

1501 IMPERIAL AVE

SAN DIEGO, CA 92101

Phone: (619) 645-6405

After Hours Phone: (619)
645-6405

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

FAMILY PRACTICE

BODIFORD, SAMANTHA

D2. Directorio de atención primaria

Provider ID: 214492

Provider Gender: Female

License Number: A165398


NPI: 1730684200


Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

NESTOR COMMUNITY
HEALTH CENTER

 1016 OUTER RD
SAN DIEGO, CA 92154

 Phone: (619) 429-3733


 After Hours Phone: (619)
429-3733

 Website: www.ibclinic.org
Email: avaldez@ibclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:00PM

TU-TH 8:30AM-8:00PM

F 8:30AM-5:00PM

FAMILY PRACTICE

BODIFORD, SAMANTHA

Provider ID: 214492

Provider Gender: Female

License Number: A165398


NPI: 1730684200


Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

NESTOR COMMUNITY
HEALTH CENTER

 1016 OUTER RD
SAN DIEGO, CA 92154

 Phone: (619) 429-3733

 After Hours Phone: (619)
429-3733

 Website: www.ibclinic.org
Email: avaldez@ibclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:00PM

TU-TH 8:30AM-8:00PM

F 8:30AM-5:00PM

FAMILY PRACTICE

BORTNER, ADAM

Provider ID: 417937

Provider Gender: Male

License Number: A164879

NPI: 1811491749

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San
Diego


FAMILY HLTH CTR SD

HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545


 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

FAMILY PRACTICE

BORTNER, ADAM

Provider ID: 417937

Provider Gender: Male

License Number: A164879

NPI: 1811491749

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

FAMILY PRACTICE

BORTNER, ADAM


Provider ID: 206363

Provider Gender: Male

License Number: A164879

D2. Directorio de atención primaria

NPI: 1811491749

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org


Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


BORTNER, ADAM

Provider ID: 206363

Provider Gender: Male

License Number: A164879

NPI: 1811491749

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


BRADY, PATRICIA

Provider ID: 403583

Provider Gender: Female

License Number: C53121

NPI: 1952390437

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Board Certified Specialty: No


IHP of Southern Cal-PHP

ST VINCENT DE PAUL VILLAGE

FAMILY HEALTH CENTER

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 Phone: (619) 233-8500

 After Hours Phone: (619)
233-8500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-W 8:30AM-5:00PM

TH 8:30AM-9:00PM

F 8:30AM-5:00PM

FAMILY PRACTICE

BRADY, PATRICIA

Provider ID: 403583

Provider Gender: Female

License Number: C53121

NPI: 1952390437

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Board Certified Specialty: No


IHP of Southern Cal-PHP


ST VINCENT DE PAUL VILLAGE

FAMILY HEALTH CENTER

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 Phone: (619) 233-8500

 After Hours Phone: (619)
233-8500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-W 8:30AM-5:00PM

TH 8:30AM-9:00PM

F 8:30AM-5:00PM

FAMILY PRACTICE

BRODSKY, MARK

Provider ID: 402851

Provider Gender: Male

License Number: C53623

NPI: 1346337904

 Provider English Spoken: Y

D2. Directorio de atención primaria

Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

3705 MISSION BLVD
SAN DIEGO, CA 92109

Phone: (619) 515-2444

After Hours Phone: (619) 515-2444

Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-W 8:30AM-5:30PM

TH 9:00AM-6:00PM

F 8:30AM-5:30PM

FAMILY PRACTICE

BRODSKY, MARK

Provider ID: 402851

Provider Gender: Male

License Number: C53623

NPI: 1346337904

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

3705 MISSION BLVD
SAN DIEGO, CA 92109

Phone: (619) 515-2444

After Hours Phone: (619) 515-2444

Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-W 8:30AM-5:30PM

TH 9:00AM-6:00PM

F 8:30AM-5:30PM

FAMILY PRACTICE

BROWN, BRANDON

Provider ID: 206360

Provider Gender: Male

License Number: A148499

NPI: 1013399559

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M 8:00AM-7:00PM

TU-TH 8:00AM-6:00PM

F 8:00AM-5:30PM

SA 8:00AM-5:00PM

FAMILY PRACTICE

BROWN, BRANDON

Provider ID: 206360

Provider Gender: Male

License Number: A148499

NPI: 1013399559

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M 8:00AM-7:00PM

TU-TH 8:00AM-6:00PM

F 8:00AM-5:30PM

SA 8:00AM-5:00PM

FAMILY PRACTICE

BURTON, LUCAS

Provider ID: 206362

Provider Gender: Male

D2. Directorio de atención primaria

License Number: 20A20786

NPI: 1376171520

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3544 30TH ST

SAN DIEGO, CA 92104

 Phone: (619) 515-2424


 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

BURTON, LUCAS

Provider ID: 206362

Provider Gender: Male

License Number: 20A20786

NPI: 1376171520

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3544 30TH ST

SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

BURTON, LUCAS

Provider ID: 206362

Provider Gender: Male

License Number: 20A20786

NPI: 1376171520

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3544 30TH ST

SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

BURTON, LUCAS

Provider ID: 206362

Provider Gender: Male

License Number: 20A20786

NPI: 1376171520

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3544 30TH ST

SAN DIEGO, CA 92104

 Phone: (619) 515-2424


 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

CAMPBELL, BRIANNA

Provider ID: 451167

Provider Gender: Female

License Number: A157488

NPI: 1316479892

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: CHULA
VISTA COMM HOSP

D2. Directorio de atención primaria



Board Certified Specialty: No
IHP of Southern Cal-PHP
KING CHAVEZ HEALTH
CENTER

 950 S EUCLID AVE
SAN DIEGO, CA 92114
 Phone: (619) 662-4194
 After Hours Phone: (619)
662-4194
 Website: www.syhealth.org/clinics/king-chavez-health-center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER


FAMILY PRACTICE

CAMPBELL, BRIANNA

Provider ID: 451167
Provider Gender: Female
License Number: A157488
NPI: 1316479892
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish



Cultural Competency: N
Hospital Affiliation: CHULA
VISTA COMM HOSP
Board Certified Specialty: No
IHP of Southern Cal-PHP
KING CHAVEZ HEALTH
CENTER

 950 S EUCLID AVE
SAN DIEGO, CA 92114
 Phone: (619) 662-4194
 After Hours Phone: (619)
662-4194
 Website: www.syhealth.org/clinics/king-chavez-health-center

h- center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER




FAMILY PRACTICE


CAMPOS, PRISCILLA


Provider ID: 206360
Provider Gender: Female
License Number: A152651
NPI: 1508217399
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300



 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER




FAMILY PRACTICE



CAMPOS, PRISCILLA

Provider ID: 206360
Provider Gender: Female

License Number: A152651
NPI: 1508217399
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego



LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

CARRIEDO-CENICEROS, MARIA

Provider ID: 227409
Provider Gender: Female
License Number: A78373
NPI: 1295746618
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHC -
OCEAN VIEW

 3177 OCEAN VIEW BLVD

D2. Directorio de atención primaria

SAN DIEGO, CA 92113
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

CARRIEDO-CENICEROS, MARIA

Provider ID: 227409
Provider Gender: Female
License Number: A78373
NPI: 1295746618
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHC - OCEAN VIEW

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

CHOU, BILL

Provider ID: 206362
Provider Gender: Male
License Number: 20A14794
NPI: 1730448101
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

CHOU, BILL

Provider ID: 206362
Provider Gender: Male
License Number: 20A14794
NPI: 1730448101
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

3544 30TH ST
SAN DIEGO, CA 92104

Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

CHOU, BILL

Provider ID: 206362
Provider Gender: Male
License Number: 20A14794
NPI: 1730448101
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

CHOU, BILL

Provider ID: 206362
Provider Gender: Male

D2. Directorio de atención primaria

License Number: 20A14794


NPI: 1730448101


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619) 515-2424

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

CHOU, BILL

Provider ID: 417937

Provider Gender: Male

License Number: 20A14794


NPI: 1730448101


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619) 515-2545

 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

CHOU, BILL

Provider ID: 417937

Provider Gender: Male

License Number: 20A14794


NPI: 1730448101


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619) 515-2545

 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

CHUN, HYUN


Provider ID: 206360

Provider Gender: Male

License Number: A163978

NPI: 1083118988

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Korean


Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

CHUN, HYUN

Provider ID: 206360

Provider Gender: Male

License Number: A163978

NPI: 1083118988

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Korean


Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego



LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

D2. Directorio de atención primaria

515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

COLLINS, WILLIAM

Provider ID: 417937
Provider Gender: Male
License Number: 20A15413
NPI: 1417361973
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SD
HILLCREST
 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619) 515-2545
 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: SU-SA 8:00AM-9:00PM

FAMILY PRACTICE





COLLINS, WILLIAM

Provider ID: 417937
Provider Gender: Male
License Number: 20A15413
NPI: 1417361973
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SD
HILLCREST
 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619) 515-2545
 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: SU-SA 8:00AM-9:00PM
FAMILY PRACTICE
COLLINS, WILLIAM
Provider ID: 206362
Provider Gender: Male
License Number: 20A15413
NPI: 1417361973
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD



MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Board Certified Specialty: No
Family Health Centers of San Diego
NORTH PARK FAMILY HEALTH CENTERS
 3544 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: SU-SA 8:30AM-5:30PM

FAMILY PRACTICE

COLLINS, WILLIAM

Provider ID: 206362
Provider Gender: Male
License Number: 20A15413
NPI: 1417361973
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Board Certified Specialty: No
Family Health Centers of San Diego
NORTH PARK FAMILY HEALTH CENTERS
 3544 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619)




D2. Directorio de atención primaria

515-2424
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: SU-SA 8:30AM-5:30PM

FAMILY PRACTICE

COLLINS, WILLIAM




Provider ID: 206362
Provider Gender: Male
License Number: 20A15413
NPI: 1417361973
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Board Certified Specialty: No
Family Health Centers of San
Diego
NORTH PARK FAMILY HEALTH
CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619)
515-2424
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: SU-SA 8:30AM-5:30PM

FAMILY PRACTICE



COLLINS, WILLIAM

Provider ID: 206362
Provider Gender: Male
License Number: 20A15413
NPI: 1417361973
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Board Certified Specialty: No
Family Health Centers of San
Diego
NORTH PARK FAMILY HEALTH
CENTERS




 3544 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619)
515-2424
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: SU-SA 8:30AM-5:30PM

FAMILY PRACTICE

CORMAN, DANIEL







Provider ID: 402851
Provider Gender: Male
License Number: 20A13060
NPI: 1629339593
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San

Diego

FAMILY HLTH CTR SAN
DIEGO-BEACH AREA
 3705 MISSION BLVD
SAN DIEGO, CA 92109
 Phone: (619) 515-2444
 After Hours Phone: (619)
515-2444
 Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

CORMAN, DANIEL

Provider ID: 402851
Provider Gender: Male
License Number: 20A13060
NPI: 1629339593
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HLTH CTR SAN
DIEGO-BEACH AREA
 3705 MISSION BLVD
SAN DIEGO, CA 92109
 Phone: (619) 515-2444
 After Hours Phone: (619)
515-2444
 Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

D2. Directorio de atención primaria

- N**
 *Accessibility: CONTACT PROVIDER*
- FAMILY PRACTICE**
DAPPEN, AMANDA
Provider ID: 227409
Provider Gender: Female
License Number: A153414
NPI: 1689037111
 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHC - OCEAN VIEW
 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*
 *Website: <https://www.syhealth.org/locations>*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM
- FAMILY PRACTICE**
DAPPEN, AMANDA
Provider ID: 227409
Provider Gender: Female
License Number: A153414
NPI: 1689037111
 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
- SAN YSIDRO HEALTH CHC - OCEAN VIEW**
 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*
 *Website: <https://www.syhealth.org/locations>*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM
- FAMILY PRACTICE**
DAVIS, DEIRDRE
Provider ID: 451167
Provider Gender: Female
License Number: A165432
NPI: 1265921365
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
KING CHAVEZ HEALTH CENTER
 950 S EUCLID AVE
SAN DIEGO, CA 92114
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*
 *Website: www.syhealth.org/clinics/king-chavez-health-center*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
- N**
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:00PM
- FAMILY PRACTICE**
DAVIS, DEIRDRE
Provider ID: 451167
Provider Gender: Female
License Number: A165432
NPI: 1265921365
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
KING CHAVEZ HEALTH CENTER
 950 S EUCLID AVE
SAN DIEGO, CA 92114
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*
 *Website: www.syhealth.org/clinics/king-chavez-health-center*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:00PM
- FAMILY PRACTICE**
DOSCAS, MICHELLE
Provider ID: 206360
Provider Gender: Female

D2. Directorio de atención primaria

License Number: A163633

NPI: 1306343421


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, UCSD
LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR


Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300


 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

DOSCAS, MICHELLE

Provider ID: 206360

Provider Gender: Female

License Number: A163633

NPI: 1306343421

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, UCSD
LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL


CTR


Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

FAMBRO, CYNTHIA


Provider ID: 451167

Provider Gender: Female

License Number: A153223

NPI: 1710331707

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

KING CHAVEZ HEALTH
CENTER

 950 S EUCLID AVE
SAN DIEGO, CA 92114

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org
[/clinics/king-
chavez-
health-
center](http://www.syhealth.org/clinics/king-chavez-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

FAMBRO, CYNTHIA


Provider ID: 451167

Provider Gender: Female

License Number: A153223

NPI: 1710331707

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

KING CHAVEZ HEALTH
CENTER

 950 S EUCLID AVE
SAN DIEGO, CA 92114

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org
[/clinics/king-
chavez-
health-
center](http://www.syhealth.org/clinics/king-chavez-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

FLORES, JOE

Provider ID: 417937

Provider Gender: Male

License Number: A171135

D2. Directorio de atención primaria


NPI: 1033647409


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

FAMILY PRACTICE

FLORES, JOE

Provider ID: 417937

Provider Gender: Male

License Number: A171135


NPI: 1033647409

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego


FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)

515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

FAMILY PRACTICE


GLEASON ROHRER, GWEN

Provider ID: 233532

Provider Gender: Female

License Number: A112176

NPI: 1710140462

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR


Board Certified Specialty: No


IHP of Southern Cal-PHP

MID-CITY COMMUNITY CLINIC

 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

 Phone: (619) 280-2058

 After Hours Phone: (619)
280-2058

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


GLEASON ROHRER, GWEN

Provider ID: 233597

Provider Gender: Female

License Number: A112176

NPI: 1710140462

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR


Board Certified Specialty: No


IHP of Southern Cal-PHP

MID-CITY COMMUNITY CLINIC

 4290 POLK AVE
SAN DIEGO, CA 92105

 Phone: (619) 563-0250

 After Hours Phone: (619)
563-0250

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

GLEASON ROHRER, GWEN

Provider ID: 233597

Provider Gender: Female

License Number: A112176

NPI: 1710140462

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

D2. Directorio de atención primaria

Board Certified Specialty: No
IHP of Southern Cal-PHP

MID-CITY COMMUNITY CLINIC

4290 POLK AVE
SAN DIEGO, CA 92105

Phone: (619) 563-0250

After Hours Phone: (619)
563-0250

Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

GLEASON ROHRER, GWEN

Provider ID: 233532

Provider Gender: Female

License Number: A112176

NPI: 1710140462

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Board Certified Specialty: No

IHP of Southern Cal-PHP

MID-CITY COMMUNITY CLINIC

4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

Phone: (619) 280-2058

After Hours Phone: (619)
280-2058

Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL): NPI: 1760563068

N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

GRIFFITHS, KENNETH

Provider ID: 417937

Provider Gender: Male

License Number: C52451

NPI: 1760563068

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD

HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619)
515-2545

Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

FAMILY PRACTICE

GRIFFITHS, KENNETH

Provider ID: 417937

Provider Gender: Male

License Number: C52451

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD
HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619)
515-2545

Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

FAMILY PRACTICE

GUTIERREZ, TANIA

Provider ID: 417987

Provider Gender: Female

License Number: 20A19345

NPI: 1285196311

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HEALTH CTR IBARRA

4874 POLK AVE

D2. Directorio de atención primaria

SAN DIEGO, CA 92105
Phone: (619) 515-2426
After Hours Phone: (619) 515-2426
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

GUTIERREZ, TANIA

Provider ID: 417987
Provider Gender: Female
License Number: 20A19345
NPI: 1285196311
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HEALTH CTR IBARRA

4874 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 515-2426
After Hours Phone: (619) 515-2426
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

HAMILTON, LISA MARIE
Provider ID: 206363
Provider Gender: Female
License Number: 20A14772
NPI: 1235576059
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

HAMILTON, LISA MARIE

Provider ID: 206363
Provider Gender: Female
License Number: 20A14772
NPI: 1235576059
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

HAMILTON, LISA MARIE

Provider ID: 418142
Provider Gender: Female
License Number: 20A14772
NPI: 1235576059
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HEALTH CTR SAN DIEGO-OAK PARK
5160 FEDERAL BLVD
SAN DIEGO, CA 92105
Phone: (619) 515-2454
After Hours Phone: (619) 515-2454
Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

D2. Directorio de atención primaria

FAMILY PRACTICE


HAMILTON, LISA MARIE

Provider ID: 418142

Provider Gender: Female

License Number: 20A14772

NPI: 1235576059

 Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San Diego

FAMILY HEALTH CTR SAN DIEGO-OAK PARK

 5160 FEDERAL BLVD
SAN DIEGO, CA 92105

 Phone: (619) 515-2454

 After Hours Phone: (619) 515-2454

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE


HEINRICI, ALEKA

Provider ID: 451167

Provider Gender: Female

License Number: A125329

NPI: 1780979120

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
KING CHAVEZ HEALTH
CENTER

 950 S EUCLID AVE
SAN DIEGO, CA 92114

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org/clinics/king-chavez-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:00PM

FAMILY PRACTICE


HEINRICI, ALEKA

Provider ID: 451167

Provider Gender: Female

License Number: A125329

NPI: 1780979120

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
KING CHAVEZ HEALTH
CENTER

 950 S EUCLID AVE
SAN DIEGO, CA 92114

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org/clinics/king-chavez-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:00PM

FAMILY PRACTICE


HENDRIX, JEFFERSON

Provider ID: 631494

Provider Gender: Male

License Number: A32571

NPI: 1235142738


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH
PRECISION PARK

 1666 PRECISION PARK LN
SAN DIEGO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

HENDRIX, JEFFERSON

D2. Directorio de atención primaria

Provider ID: 631494

Provider Gender: Male

License Number: A32571

NPI: 1235142738

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

PRECISION PARK

 1666 PRECISION PARK LN
SAN DIEGO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

KAUFHOLD, ANNE

Provider ID: 227409

Provider Gender: Female

License Number: A88893

NPI: 1164508073

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic, Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA


VISTA


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHC -

OCEAN VIEW

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

KAUFHOLD, ANNE

Provider ID: 227409

Provider Gender: Female

License Number: A88893

NPI: 1164508073

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic, Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA


VISTA


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHC -

OCEAN VIEW

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

KAUFMAN, JENNIFER CHILYN

Provider ID: 417987

Provider Gender: Female

License Number: G149974

NPI: 1407818768

Provider English Spoken: Y

Provider Language(s)
Spoken: Mandarin


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San
Diego

FAMILY HEALTH CTR IBARRA

 4874 POLK AVE
SAN DIEGO, CA 92105

 Phone: (619) 515-2426

 After Hours Phone: (619)
515-2426

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

KAUFMAN, JENNIFER CHILYN

Provider ID: 417987

Provider Gender: Female

License Number: G149974

NPI: 1407818768

Provider English Spoken: Y

Provider Language(s)
Spoken: Mandarin

D2. Directorio de atención primaria

Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HEALTH CTR IBARRA

4874 POLK AVE
SAN DIEGO, CA 92105

Phone: (619) 515-2426

After Hours Phone: (619) 515-2426

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

KEFLEZIGHI, BAHGHI

Provider ID: 206363

Provider Gender: Female

License Number: A100391

NPI: 1124210844

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, RADY CHILDRENS

HOSPITAL SAN DIEGO

Board Certified Specialty: No

Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

Fax: (619) 263-2499

After Hours Phone: (619) 515-2560

Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

KEFLEZIGHI, BAHGHI

Provider ID: 206363

Provider Gender: Female

License Number: A100391

NPI: 1124210844

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, RADY CHILDRENS

HOSPITAL SAN DIEGO

Board Certified Specialty: No

Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

Fax: (619) 263-2499

After Hours Phone: (619) 515-2560

Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

KIDDER, BRENDAN

Provider ID: 227409

Provider Gender: Male

License Number: A112379

NPI: 1275793929

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHC - OCEAN VIEW

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

KIDDER, BRENDAN



Provider ID: 227409



Provider Gender: Male

License Number: A112379

NPI: 1275793929



D2. Directorio de atención primaria




 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHC -
OCEAN VIEW



 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

LACH, REBECCA



Provider ID: 206362
Provider Gender: Female
License Number: A177922
NPI: 1679137780
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
NORTH PARK FAMILY HEALTH
CENTERS






 3544 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

LACH, REBECCA

Provider ID: 206362
Provider Gender: Female
License Number: A177922
NPI: 1679137780
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
NORTH PARK FAMILY HEALTH
CENTERS



 3544 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619)
515-2424
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER






FAMILY PRACTICE

LACH, REBECCA

Provider ID: 206362
Provider Gender: Female
License Number: A177922



NPI: 1679137780

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
NORTH PARK FAMILY HEALTH
CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619)
515-2424
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER



FAMILY PRACTICE

LACH, REBECCA

Provider ID: 206362
Provider Gender: Female
License Number: A177922
NPI: 1679137780
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
NORTH PARK FAMILY HEALTH
CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619)

D2. Directorio de atención primaria

515-2424
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

LACH, REBECCA

Provider ID: 417937
Provider Gender: Female
License Number: A177922
NPI: 1679137780
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SD
HILLCREST
 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619) 515-2545
 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM



FAMILY PRACTICE

LACH, REBECCA

Provider ID: 417937
Provider Gender: Female
License Number: A177922
NPI: 1679137780
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SD
HILLCREST
 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619) 515-2545
 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

FAMILY PRACTICE






LEE, SANDRINE

Provider ID: 206362
Provider Gender: Female
License Number: 20A15068
NPI: 1073909651
 Provider English Spoken: Y
 Provider Language(s)
Spoken: French
Cultural Competency: N
Board Certified Specialty: No

Family Health Centers of San Diego
NORTH PARK FAMILY HEALTH CENTERS
 3544 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

LEE, SANDRINE

Provider ID: 206362
Provider Gender: Female
License Number: 20A15068
NPI: 1073909651
 Provider English Spoken: Y
 Provider Language(s)
Spoken: French
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
NORTH PARK FAMILY HEALTH CENTERS
 3544 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

D2. Directorio de atención primaria

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE


LEE, SANDRINE

Provider ID: 206362

Provider Gender: Female

License Number: 20A15068

NPI: 1073909651

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: French*


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

 *3544 30TH ST
SAN DIEGO, CA 92104*

 *Phone: (619) 515-2424*

 *After Hours Phone: (619) 515-2424*

 *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE


LEE, SANDRINE

Provider ID: 206362

Provider Gender: Female

License Number: 20A15068

NPI: 1073909651

 *Provider English Spoken: Y*


 *Provider Language(s) Spoken: French*


Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

 *3544 30TH ST
SAN DIEGO, CA 92104*

 *Phone: (619) 515-2424*

 *After Hours Phone: (619) 515-2424*

 *Website: www.fhcsd.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE


LINDEMAN, KURTIS

Provider ID: 403583

Provider Gender: Male

License Number: A104052

NPI: 1124155791

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N


Hospital Affiliation: UCSD LA JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

 *1501 IMPERIAL AVE
SAN DIEGO, CA 92101*

 *Phone: (619) 233-8500*

 *After Hours Phone: (619) 233-8500*

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

LINDEMAN, KURTIS

Provider ID: 403583

Provider Gender: Male

License Number: A104052

NPI: 1124155791

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL CTR


Board Certified Specialty: No


IHP of Southern Cal-PHP

ST VINCENT DE PAUL VILLAGE

FAMILY HEALTH CENTER

 *1501 IMPERIAL AVE
SAN DIEGO, CA 92101*

 *Phone: (619) 233-8500*


 *After Hours Phone: (619) 233-8500*

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM

D2. Directorio de atención primaria

FAMILY PRACTICE

LISH, JONATHAN

Provider ID: 206360

Provider Gender: Male

License Number: A177373

NPI: 1811459456

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

LISH, JONATHAN

Provider ID: 206360

Provider Gender: Male

License Number: A177373

NPI: 1811459456

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

LOUGH, MICHELLE

Provider ID: 206363

Provider Gender: Female

License Number: A165872

NPI: 1053816496

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619) 515-2560

Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

LOUGH, MICHELLE

Provider ID: 206363

Provider Gender: Female

License Number: A165872

NPI: 1053816496

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619) 515-2560

Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

LU, JULIE

Provider ID: 418142

Provider Gender: Female

License Number: 20A14804

NPI: 1619210614

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish



Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San Diego



FAMILY HEALTH CTR SAN DIEGO-OAK PARK

D2. Directorio de atención primaria

 5160 FEDERAL BLVD
SAN DIEGO, CA 92105
 Phone: (619) 515-2454
 After Hours Phone: (619)
515-2454
 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE







LU, JULIE

Provider ID: 418142
Provider Gender: Female
License Number: 20A14804
NPI: 1619210614
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HEALTH CTR SAN
DIEGO-OAK PARK
 5160 FEDERAL BLVD
SAN DIEGO, CA 92105
 Phone: (619) 515-2454
 After Hours Phone: (619)
515-2454
 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT

PROVIDER
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

MANDOYAN, AUSTIN


Provider ID: 206360
Provider Gender: Female
License Number: A161682
NPI: 1841726148
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Board Certified Specialty: No
Family Health Centers of San
Diego
LOGAN HEIGHTS FAMILY
HEALTH CENTER
 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER






Hours: M 8:00AM-7:00PM
TU-TH 8:00AM-6:00PM
F 8:00AM-5:30PM
SA 8:00AM-5:00PM

FAMILY PRACTICE

MANDOYAN, AUSTIN



Provider ID: 206360

Provider Gender: Female
License Number: A161682
NPI: 1841726148
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Board Certified Specialty: No
Family Health Centers of San
Diego
LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M 8:00AM-7:00PM
TU-TH 8:00AM-6:00PM
F 8:00AM-5:30PM
SA 8:00AM-5:00PM

FAMILY PRACTICE

MARSTON, JACQUELINE

Provider ID: 206046
Provider Gender: Female
License Number: 20A12402
NPI: 1417205055
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N

D2. Directorio de atención primaria

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE
CTR

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 279-0925

After Hours Phone: (858)
279-0925

Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

MARSTON, JACQUELINE

Provider ID: 206046

Provider Gender: Female

License Number: 20A12402

NPI: 1417205055

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE
CTR

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 279-0925

After Hours Phone: (858)
279-0925

Website: www.sdfamilycare.org

.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

MARSTON, JACQUELINE

Provider ID: 206046

Provider Gender: Female

License Number: 20A12402

NPI: 1417205055

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE
CTR

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 279-0925

After Hours Phone: (858)
279-0925

Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

MARSTON, JACQUELINE

Provider ID: 206046

Provider Gender: Female

License Number: 20A12402

NPI: 1417205055

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE
CTR

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 279-0925

After Hours Phone: (858)
279-0925

Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

MARSTON, JACQUELINE

Provider ID: 482070

Provider Gender: Female

License Number: 20A12402

NPI: 1417205055

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP








D2. Directorio de atención primaria

SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
 After Hours Phone: (858)
810-8700
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


MARSTON, JACQUELINE





Provider ID: 482070
Provider Gender: Female
License Number: 20A12402
NPI: 1417205055
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN DIEGO FAMILY CARE
 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
 After Hours Phone: (858)
810-8700
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT

PROVIDER

FAMILY PRACTICE


MATICH, BRANKO

Provider ID: 482070
Provider Gender: Male
License Number: C174985
NPI: 1023437704
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN DIEGO FAMILY CARE



 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
 After Hours Phone: (858)
810-8700
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-8:30PM
W-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

FAMILY PRACTICE

MATICH, BRANKO


Provider ID: 482070
Provider Gender: Male
License Number: C174985
NPI: 1023437704
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
 After Hours Phone: (858)
810-8700
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-8:30PM
W-F 8:30AM-5:30PM
SA 9:00AM-4:00PM


FAMILY PRACTICE

MATICH, BRANKO

Provider ID: 206046
Provider Gender: Male
License Number: C174985
NPI: 1023437704
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 After Hours Phone: (858)
279-0925
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N


D2. Directorio de atención primaria

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE


MATICH, BRANKO

Provider ID: 206046
Provider Gender: Male
License Number: C174985
NPI: 1023437704

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 *Phone: (858) 279-0925*
 *After Hours Phone: (858) 279-0925*
 *Website: www.sdfamilycare.org*


Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

MATICH, BRANKO


Provider ID: 206046
Provider Gender: Male
License Number: C174985
NPI: 1023437704

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 *Phone: (858) 279-0925*
 *After Hours Phone: (858) 279-0925*
 *Website: www.sdfamilycare.org*


Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

MATICH, BRANKO

Provider ID: 206046
Provider Gender: Male
License Number: C174985
NPI: 1023437704

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 *Phone: (858) 279-0925*
 *After Hours Phone: (858) 279-0925*
 *Website: www.sdfamilycare.org*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

MCLAUGHLIN, ERIK


Provider ID: 207382
Provider Gender: Male
License Number: C176574
NPI: 1861637217

 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN DIEGO AMERICAN
INDIAN HEALTH CENTER

 2630 1ST AVE
SAN DIEGO, CA 92103
 *Phone: (619) 234-2158*
 *After Hours Phone: (619) 234-2158*
 *Website: WWW.SDAIHC.ORG*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM
Indian Health Services: Y

FAMILY PRACTICE

MCLAUGHLIN, ERIK

Provider ID: 207382
Provider Gender: Male
License Number: C176574
NPI: 1861637217

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN DIEGO AMERICAN

D2. Directorio de atención primaria

INDIAN HEALTH CENTER


 2630 1ST AVE
SAN DIEGO, CA 92103
 Phone: (619) 234-2158
 After Hours Phone: (619)
234-2158
 Website: WWW.SDAIHC.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

Indian Health Services: Y

FAMILY PRACTICE


MELGAR, MONICA

Provider ID: 402851

Provider Gender: Female

License Number: A154399

NPI: 1629432174

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619)
515-2444

 Website: www.fhcsd.org
Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-W 8:30AM-5:30PM

TH 9:00AM-6:00PM

F 8:30AM-5:30PM

FAMILY PRACTICE


MELGAR, MONICA

Provider ID: 402851

Provider Gender: Female

License Number: A154399

NPI: 1629432174

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619)
515-2444

 Website: www.fhcsd.org
Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-W 8:30AM-5:30PM

TH 9:00AM-6:00PM

F 8:30AM-5:30PM

FAMILY PRACTICE

MORALES, ALEJANDRA

Provider ID: 227409

Provider Gender: Female

License Number: A162332


NPI: 1063945657


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHC - OCEAN VIEW

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

MORALES, ALEJANDRA

Provider ID: 227409

Provider Gender: Female

License Number: A162332


NPI: 1063945657


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP


SAN YSIDRO HEALTH CHC - OCEAN VIEW

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


D2. Directorio de atención primaria

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

NAVARRO, VANESSAMARIA

Provider ID: 631494

Provider Gender: Female

License Number: A113624

NPI: 1952563421

Provider English Spoken: Y

Provider Language(s)
Spoken: Filipino, Spanish,
Tagalog

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL CHULA
VISTA, SHARP CHULA VISTA
MED CTR


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

PRECISION PARK

 1666 PRECISION PARK LN
SAN DIEGO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

NAVARRO, VANESSAMARIA

Provider ID: 631494

Provider Gender: Female

License Number: A113624

NPI: 1952563421

Provider English Spoken: Y

Provider Language(s)
Spoken: Filipino, Spanish,
Tagalog

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL CHULA
VISTA, SHARP CHULA VISTA
MED CTR


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

PRECISION PARK

 1666 PRECISION PARK LN
SAN DIEGO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

NGUYEN, NGOC

Provider ID: 517998

Provider Gender: Male

License Number: A74094

NPI: 1184668105

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish,

Vietnamese

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

COMMUNITY HEIGHTS FAMILY
MED

 4690 EL CAJON BLVD
SAN DIEGO, CA 92115

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

NGUYEN, NGOC

Provider ID: 517998

Provider Gender: Male

License Number: A74094

NPI: 1184668105

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish,
Vietnamese

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

COMMUNITY HEIGHTS FAMILY
MED

 4690 EL CAJON BLVD

D2. Directorio de atención primaria

SAN DIEGO, CA 92115
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

NGUYEN CLEARY, THAI

Provider ID: 417937

Provider Gender: Male

License Number: A86079

NPI: 1467442624

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation:

HOLLYWOOD PRESBYTERIAN
MED CTR

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD
HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619) 515-2545

Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

FAMILY PRACTICE

NGUYEN CLEARY, THAI

Provider ID: 417937

Provider Gender: Male

License Number: A86079

NPI: 1467442624

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation:

HOLLYWOOD PRESBYTERIAN
MED CTR

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD

HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619) 515-2545

Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

FAMILY PRACTICE

ANIAZI, HARRIS

Provider ID: 206360

Provider Gender: Male

License Number: A146111

NPI: 1174905871

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

ANIAZI, HARRIS

Provider ID: 206360

Provider Gender: Male

License Number: A146111

NPI: 1174905871

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY






D2. Directorio de atención primaria

HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER






FAMILY PRACTICE

NORRIS, JEFFREY

Provider ID: 403583
Provider Gender: Male
License Number: A136275
NPI: 1073870374
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER
 1501 IMPERIAL AVE
SAN DIEGO, CA 92101
 Phone: (619) 233-8500
 After Hours Phone: (619)
233-8500
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER



Hours: M-F 8:00AM-5:00PM



FAMILY HEALTH CENTER



 1501 IMPERIAL AVE
SAN DIEGO, CA 92101
 Phone: (619) 233-8500
 After Hours Phone: (619)
233-8500
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

NORRIS, JEFFREY



Provider ID: 403583
Provider Gender: Male
License Number: A136275
NPI: 1073870374
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101
 Phone: (619) 233-8500
 After Hours Phone: (619)
233-8500


 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

NUQUI, JOSIE



Provider ID: 432308
Provider Gender: Female
License Number: A71544
NPI: 1184773673
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Tagalog
Cultural Competency: N
Board Certified Specialty: No
Operation Samahan


OPERATION SAMAHAN - MIRA MESA

 9855 ERMA RD STE 105
SAN DIEGO, CA 92131
 Phone: (844) 200-2426
 After Hours Phone: (844)
200-2426
 Website: [www.operationsa
mahan.org](http://www.operationsamahan.org)
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:00PM
SA 8:30AM-5:00PM

FAMILY PRACTICE


NUQUI, JOSIE

Provider ID: 432308
Provider Gender: Female
License Number: A71544
NPI: 1184773673
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Tagalog
Cultural Competency: N
Board Certified Specialty: No
Operation Samahan
OPERATION SAMAHAN - MIRA
MESA

 9855 ERMA RD STE 105
SAN DIEGO, CA 92131
 Phone: (844) 200-2426
 After Hours Phone: (844)
200-2426
 Website: [www.operationsa
mahan.org](http://www.operationsamahan.org)
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):


D2. Directorio de atención primaria





N

 **Accessibility:** CONTACT PROVIDER
Hours: M-F 8:30AM-5:00PM
SA 8:30AM-5:00PM


FAMILY PRACTICE

ORTIZ, KENNETH

Provider ID: 517403
Provider Gender: Male
License Number: A156607
NPI: 1356761571
 **Provider English Spoken:** Y
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH 25TH ST
FAMILY MEDICINE

 316 25TH ST
SAN DIEGO, CA 92102
 **Phone:** (619) 662-4100
 **After Hours Phone:** (619)
662-4100
 **Website:** N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\120
American Sign Language (ASL):


N



 **Accessibility:** CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE


ORTIZ, KENNETH

Provider ID: 517403
Provider Gender: Male
License Number: A156607

NPI: 1356761571
 **Provider English Spoken:** Y
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH 25TH ST
FAMILY MEDICINE

 316 25TH ST
SAN DIEGO, CA 92102
 **Phone:** (619) 662-4100
 **After Hours Phone:** (619)
662-4100
 **Website:** N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\120
American Sign Language (ASL):



N



 **Accessibility:** CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE


PAYAMI, MADDIHA

Provider ID: 417429
Provider Gender: Female
License Number: 20A14012
NPI: 1336484104
 **Provider English Spoken:** Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SAN
DIEGO- CITY COLLEGE

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101
 **Phone:** (619) 515-2525


 **After Hours Phone:** (619)
515-2525
 **Website:** www.fhcsd.org
Email: janeta@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

N


 **Accessibility:** CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE


PAYAMI, MADDIHA

Provider ID: 417429
Provider Gender: Female
License Number: 20A14012
NPI: 1336484104
 **Provider English Spoken:** Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN
DIEGO- CITY COLLEGE
 1550 BROADWAY STE 2
SAN DIEGO, CA 92101
 **Phone:** (619) 515-2525
 **After Hours Phone:** (619)
515-2525

 **Website:** www.fhcsd.org
Email: janeta@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

N

 **Accessibility:** CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE

D2. Directorio de atención primaria

PEREZ, PERLITA

Provider ID: 206363

Provider Gender: Female

License Number: A119689

NPI: 1174810972

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No


Family Health Centers of San Diego


DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

 4725 MARKET ST

SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

PEREZ, PERLITA

Provider ID: 206363

Provider Gender: Female

License Number: A119689

NPI: 1174810972

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

 4725 MARKET ST

SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

POSADA, SEAN

Provider ID: 206360

Provider Gender: Male

License Number: A180171

NPI: 1295100691

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE

SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org


Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

POSADA, SEAN

Provider ID: 206360

Provider Gender: Male

License Number: A180171

NPI: 1295100691

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org


Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

PROPST, TOBE

Provider ID: 403583

Provider Gender: Male

License Number: A82123

NPI: 1194814277




Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

D2. Directorio de atención primaria

Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
ST VINCENT DE PAUL VILLAGE

FAMILY HEALTH CENTER



 1501 IMPERIAL AVE
SAN DIEGO, CA 92101
 Phone: (619) 233-8500
 After Hours Phone: (619)
233-8500

 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N




 *Accessibility: CONTACT*
PROVIDER


FAMILY PRACTICE

PROPST, TOBE

Provider ID: 403583
Provider Gender: Male
License Number: A82123
NPI: 1194814277
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish

Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101
 Phone: (619) 233-8500
 After Hours Phone: (619)
233-8500


 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N




 *Accessibility: CONTACT*
PROVIDER


FAMILY PRACTICE


RAGUVEER, VISHAKA

Provider ID: 418535
Provider Gender: Female
License Number: A172736
NPI: 1740609387

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
Operation Samahan
OPERATION SAMAHAN
RANCHO PENASQUITOS

 9995 CARMEL MOUNTAIN
RD STE B10 AND B11
SAN DIEGO, CA 92129
 Phone: (916) 419-7292
 After Hours Phone: (916)
419-7292


 Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N



 *Accessibility: CONTACT*
PROVIDER
Hours: M-TU 8:30AM-5:30PM
W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM


FAMILY PRACTICE

RAGUVEER, VISHAKA

Provider ID: 618164
Provider Gender: Female
NPI: 1740609387


 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No

Community Care IPA LLC
VISHAKA RAGUVEER
 9995 CARMEL MOUNTAIN
RD STE 10-11B
SAN DIEGO, CA 92129
 Phone: (844) 200-2426
Fax: (858) 240-6470
 After Hours Phone: (844)
200-2426
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER
Hours: M-F 8:00AM-5:00PM


FAMILY PRACTICE

RAGUVEER, VISHAKA

Provider ID: 418535
Provider Gender: Female
License Number: A172736
NPI: 1740609387
 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
Operation Samahan
OPERATION SAMAHAN
RANCHO PENASQUITOS

 9995 CARMEL MOUNTAIN
RD STE B10 AND B11
SAN DIEGO, CA 92129
 Phone: (916) 419-7292
 After Hours Phone: (916)
419-7292
 Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N



D2. Directorio de atención primaria

 *Accessibility: CONTACT PROVIDER*
Hours: M-TU 8:30AM-5:30PM
W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM

FAMILY PRACTICE




RAMIREZ, CRISTHIAN

Provider ID: 206360
Provider Gender: Female
License Number: 20A17478
NPI: 1407200942

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*


Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 *Phone: (619) 515-2300*
 *After Hours Phone: (619) 515-2300*

 *Website: www.fhcsd.org*
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL): N



 *Accessibility: CONTACT PROVIDER*

Hours: M 8:00AM-7:00PM
TU-TH 8:00AM-6:00PM
F 8:00AM-5:30PM
SA 8:00AM-5:00PM

FAMILY PRACTICE




RAMIREZ, CRISTHIAN


Provider ID: 206360
Provider Gender: Female
License Number: 20A17478
NPI: 1407200942

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 *Phone: (619) 515-2300*
 *After Hours Phone: (619) 515-2300*

 *Website: www.fhcsd.org*
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*

Hours: M 8:00AM-7:00PM
TU-TH 8:00AM-6:00PM
F 8:00AM-5:30PM
SA 8:00AM-5:00PM

FAMILY PRACTICE


RIDGE, NEAL

Provider ID: 631494
Provider Gender: Male
License Number: 20A6920
NPI: 1053381004

 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH PRECISION PARK

 1666 PRECISION PARK LN
SAN DIEGO, CA 92173
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*


 *Website: www.syhealth.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*



FAMILY PRACTICE


RIDGE, NEAL

Provider ID: 631494
Provider Gender: Male
License Number: 20A6920
NPI: 1053381004


 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No

IHP of Southern Cal-PHP
SAN YSIDRO HEALTH PRECISION PARK

 1666 PRECISION PARK LN
SAN DIEGO, CA 92173
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*

 *Website: www.syhealth.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

RITTER, STEVEN

D2. Directorio de atención primaria

Provider ID: 451167

Provider Gender: Male

License Number: 20A7435

NPI: 1356556021

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

KING CHAVEZ HEALTH

CENTER

950 S EUCLID AVE
SAN DIEGO, CA 92114

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/king-chavez-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

RITTER, STEVEN

Provider ID: 451167

Provider Gender: Male

License Number: 20A7435

NPI: 1356556021

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

KING CHAVEZ HEALTH

CENTER

950 S EUCLID AVE
SAN DIEGO, CA 92114

Phone: (619) 662-4100

After Hours Phone: (619)

662-4100

Website: www.syhealth.org/clinics/king-chavez-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

RODRIGUEZ, SEAN

Provider ID: 227409

Provider Gender: Male

License Number: A120576

NPI: 1780909903

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHC -

OCEAN VIEW

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

RODRIGUEZ, LOUIE

Provider ID: 206360

Provider Gender: Male

License Number: A176144

NPI: 1558823625

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

RODRIGUEZ, SEAN

Provider ID: 227409

Provider Gender: Male

License Number: A120576

NPI: 1780909903

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

D2. Directorio de atención primaria

MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHC -
OCEAN VIEW

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

RODRIGUEZ, LOUIE

Provider ID: 206360

Provider Gender: Male

License Number: A176144

NPI: 1558823625

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

RODRIGUEZ, LOUIE

Provider ID: 417937

Provider Gender: Male

License Number: A176144

NPI: 1558823625

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD
HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619)
515-2545

Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

RODRIGUEZ, LOUIE

Provider ID: 417937

Provider Gender: Male

License Number: A176144

NPI: 1558823625

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD
HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619)
515-2545

Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

ROSADO, IVAN

Provider ID: 517403

Provider Gender: Male

License Number: A169434

NPI: 1316479603

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH 25TH ST
FAMILY MEDICINE

316 25TH ST
SAN DIEGO, CA 92102

Phone: (619) 662-4100

After Hours Phone: (619)

D2. Directorio de atención primaria

662-4100
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\120

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

ROSADO, IVAN

Provider ID: 517403
Provider Gender: Male
License Number: A169434
NPI: 1316479603

Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH 25TH ST
FAMILY MEDICINE

316 25TH ST
SAN DIEGO, CA 92102
Phone: (619) 662-4100
After Hours Phone: (619)
662-4100

Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\120
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

ROSENBAUM, HERBERT

Provider ID: 631494
Provider Gender: Male
License Number: A169694
NPI: 1922532712

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No

IHP of Southern Cal-PHP
SAN YSIDRO HEALTH

PRECISION PARK
1666 PRECISION PARK LN
SAN DIEGO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619)
662-4100

Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

ROSENBAUM, HERBERT

Provider ID: 631494
Provider Gender: Male
License Number: A169694
NPI: 1922532712

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No

IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
PRECISION PARK

1666 PRECISION PARK LN
SAN DIEGO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619)
662-4100

Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

SCHUMAKER, EDWARD

Provider ID: 185268
Provider Gender: Male
License Number: 20A6433
NPI: 1184616872

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 255-9155
Fax: (619) 284-4731
After Hours Phone: (619)
255-9155
Website: www.lamaestra.org
Email:

aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM

FAMILY PRACTICE

SCHUMAKER, EDWARD

Provider ID: 185268

D2. Directorio de atención primaria

Provider Gender: Male

License Number: 20A6433

NPI: 1184616872

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC

INC

📍 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

☎ Phone: (619) 255-9155

Fax: (619) 284-4731

🕒 After Hours Phone: (619)
255-9155

🌐 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-6:00PM

SA 8:00AM-2:00PM

FAMILY PRACTICE

SCOTT, LAGINA

Provider ID: 206360

Provider Gender: Female

License Number: A160489

NPI: 1558897009

☐ Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San

Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

📍 1809 NATIONAL AVE
SAN DIEGO, CA 92113

☎ Phone: (619) 515-2300

🕒 After Hours Phone: (619)
515-2300

🌐 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

SCOTT, LAGINA

Provider ID: 206360

Provider Gender: Female

License Number: A160489

NPI: 1558897009

☐ Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San

Diego

LOGAN HEIGHTS FAMILY

HEALTH CENTER

📍 1809 NATIONAL AVE
SAN DIEGO, CA 92113

☎ Phone: (619) 515-2300

🕒 After Hours Phone: (619)
515-2300

🌐 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

♿ Accessibility: CONTACT

PROVIDER

FAMILY PRACTICE

SCOTT, RYLEE

Provider ID: 402851

Provider Gender: Male

License Number: A162946

NPI: 1457887911

☐ Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San

Diego

FAMILY HLTH CTR SAN

DIEGO-BEACH AREA

📍 3705 MISSION BLVD
SAN DIEGO, CA 92109

☎ Phone: (619) 515-2300

🕒 After Hours Phone: (619)
515-2300

🌐 Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

SCOTT, RYLEE

Provider ID: 402851

Provider Gender: Male

License Number: A162946

NPI: 1457887911

☐ Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No




Family Health Centers of San


Diego

FAMILY HLTH CTR SAN

D2. Directorio de atención primaria

DIEGO-BEACH AREA

 3705 MISSION BLVD
SAN DIEGO, CA 92109
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


SHEIKH, ZARA

Provider ID: 233532

Provider Gender: Female

License Number: A163512

NPI: 1952808727

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Urdu


Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP


MID-CITY COMMUNITY CLINIC

 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

 Phone: (619) 280-2058

 After Hours Phone: (619)
280-2058

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

FAMILY PRACTICE


SHEIKH, ZARA


Provider ID: 233597

Provider Gender: Female

License Number: A163512

NPI: 1952808727

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Urdu


Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP


MID-CITY COMMUNITY CLINIC

 4290 POLK AVE

SAN DIEGO, CA 92105

 Phone: (619) 563-0250

 After Hours Phone: (619)
563-0250

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-2:00PM

FAMILY PRACTICE


SHEIKH, ZARA


Provider ID: 233532

Provider Gender: Female

License Number: A163512

NPI: 1952808727

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Urdu


Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP


MID-CITY COMMUNITY CLINIC

 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

 Phone: (619) 280-2058

 After Hours Phone: (619)
280-2058

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-2:00PM

FAMILY PRACTICE

SHEIKH, ZARA


Provider ID: 233597

Provider Gender: Female

License Number: A163512

NPI: 1952808727

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Urdu


Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

MID-CITY COMMUNITY CLINIC

 4290 POLK AVE

SAN DIEGO, CA 92105

 Phone: (619) 563-0250

 After Hours Phone: (619)
563-0250


 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

D2. Directorio de atención primaria

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

FAMILY PRACTICE


SHIRAKI, JEAN

Provider ID: 417987

Provider Gender: Female

License Number: 20A17577

NPI: 1144684382

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Japanese


Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HEALTH CTR IBARRA

 4874 POLK AVE
SAN DIEGO, CA 92105

 Phone: (619) 515-2426


 After Hours Phone: (619)
515-2426

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


SHIRAKI, JEAN

Provider ID: 417987

Provider Gender: Female

License Number: 20A17577

NPI: 1144684382

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Japanese


Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HEALTH CTR IBARRA

 4874 POLK AVE
SAN DIEGO, CA 92105

 Phone: (619) 515-2426

 After Hours Phone: (619)
515-2426

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE


SHUMILAK, KAILI

Provider ID: 418142

Provider Gender: Female

License Number: 20A12796

NPI: 1831489855

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HEALTH CTR SAN
DIEGO-OAK PARK

 5160 FEDERAL BLVD
SAN DIEGO, CA 92105

 Phone: (619) 515-2454

 After Hours Phone: (619)
515-2454

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

SHUMILAK, KAILI

Provider ID: 418142

Provider Gender: Female

License Number: 20A12796

NPI: 1831489855

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HEALTH CTR SAN
DIEGO-OAK PARK

 5160 FEDERAL BLVD
SAN DIEGO, CA 92105

 Phone: (619) 515-2454

 After Hours Phone: (619)
515-2454

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

SMOOT, CHARLES

Provider ID: 206360

Provider Gender: Male

D2. Directorio de atención primaria

License Number: A97036

NPI: 1245490358

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300


 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

FAMILY PRACTICE

SMOOT, CHARLES

Provider ID: 206360

Provider Gender: Male

License Number: A97036

NPI: 1245490358

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

FAMILY PRACTICE

SMOOT, CHARLES

Provider ID: 356145

Provider Gender: Male

License Number: A97036

NPI: 1245490358

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San
Diego

SHERMAN HEIGHTS FAMILY
HLTH CTRS INC

 2391 ISLAND AVE
SAN DIEGO, CA 92102

 Phone: (619) 515-2435

 After Hours Phone: (619)
515-2435

 Website: N/A

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PROVIDER

FAMILY PRACTICE

SMOOT, CHARLES

Provider ID: 356145

Provider Gender: Male

License Number: A97036

NPI: 1245490358

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San
Diego

SHERMAN HEIGHTS FAMILY
HLTH CTRS INC

 2391 ISLAND AVE
SAN DIEGO, CA 92102

 Phone: (619) 515-2435

 After Hours Phone: (619)
515-2435


 Website: N/A

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

SNYDER, CHRISTOPHER

Provider ID: 517998

Provider Gender: Male

License Number: 20A7502

NPI: 1922041235



Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

Cultural Competency: N


D2. Directorio de atención primaria

*Hospital Affiliation: PIH
Hospital - Downey, JOHN F
KENNEDY MEMORIAL HOSP,
CEDARS SINAI MEDICAL
CENTER, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
EISENHOWER MEDICAL CTR,
GROSSMONT HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
COMMUNITY HEIGHTS FAMILY
MED*

 4690 EL CAJON BLVD
SAN DIEGO, CA 92115
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100



 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\120

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER




FAMILY PRACTICE


SNYDER, CHRISTOPHER

Provider ID: 517998
Provider Gender: Male
License Number: 20A7502
NPI: 1922041235
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PIH

Hospital - Downey, JOHN F
KENNEDY MEMORIAL HOSP,
CEDARS SINAI MEDICAL
CENTER, SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,
EISENHOWER MEDICAL CTR,
GROSSMONT HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
COMMUNITY HEIGHTS FAMILY
MED

 4690 EL CAJON BLVD
SAN DIEGO, CA 92115
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100



 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\120
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

SOPHY, ELIZABETH


Provider ID: 403583
Provider Gender: Female
License Number: A157547
NPI: 1013441203


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
IHP of Southern Cal-PHP
ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101
 Phone: (619) 233-8500

 After Hours Phone: (619)
233-8500



 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:30PM




FAMILY PRACTICE

SOPHY, ELIZABETH


Provider ID: 403583
Provider Gender: Female
License Number: A157547
NPI: 1013441203

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA
Board Certified Specialty: No
IHP of Southern Cal-PHP
ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101
 Phone: (619) 233-8500
 After Hours Phone: (619)
233-8500

 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:30PM

D2. Directorio de atención primaria

FAMILY PRACTICE

SUMMERS-DAY, COURTNEY

Provider ID: 214492

Provider Gender: Female

License Number: A112781

NPI: 1124288873

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
IHP of Southern Cal-PHP
NESTOR COMMUNITY
HEALTH CENTER

 1016 OUTER RD
SAN DIEGO, CA 92154

 Phone: (619) 429-3733

 After Hours Phone: (619)
429-3733

 Website: www.ibclinic.org

Email: avaldez@ibclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

SUMMERS-DAY, COURTNEY

Provider ID: 214492

Provider Gender: Female

License Number: A112781

NPI: 1124288873

Provider English Spoken: Y


Provider Language(s)


Spoken: Spanish
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
IHP of Southern Cal-PHP
NESTOR COMMUNITY
HEALTH CENTER

 1016 OUTER RD
SAN DIEGO, CA 92154

 Phone: (619) 429-3733

 After Hours Phone: (619)
429-3733

 Website: www.ibclinic.org

Email: avaldez@ibclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

SWARTZ, JOHN

Provider ID: 403583

Provider Gender: Male

License Number: G72486

NPI: 1396754131

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MERCY
HOSPITAL, LOS ANGELES
COUNTY HARBOR UCLA
MEDICAL CENTER

Board Certified Specialty: No

IHP of Southern Cal-PHP
ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 Phone: (619) 233-8500


 After Hours Phone: (619)
233-8500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

SWARTZ, JOHN

Provider ID: 403583

Provider Gender: Male

License Number: G72486

NPI: 1396754131

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MERCY
HOSPITAL, LOS ANGELES
COUNTY HARBOR UCLA
MEDICAL CENTER



Board Certified Specialty: No
IHP of Southern Cal-PHP
ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 Phone: (619) 233-8500

 After Hours Phone: (619)

D2. Directorio de atención primaria

233-8500
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

THAI, JUSTIN

Provider ID: 206360
Provider Gender: Male
License Number: A177462
NPI: 1093276198
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER






 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

THAI, JUSTIN

Provider ID: 417937
Provider Gender: Male
License Number: A177462
NPI: 1093276198
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego






FAMILY HLTH CTR SD HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545
 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

FAMILY PRACTICE




THAI, JUSTIN

Provider ID: 417937
Provider Gender: Male
License Number: A177462
NPI: 1093276198
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San

Diego
FAMILY HLTH CTR SD
HILLCREST
 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545
 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

FAMILY PRACTICE

THAI, JUSTIN


Provider ID: 206360
Provider Gender: Male
License Number: A177462
NPI: 1093276198
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
LOGAN HEIGHTS FAMILY
HEALTH CENTER
 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes

D2. Directorio de atención primaria

Min/Max Age: 0\150

American Sign Language (ASL): N

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

THOMAS, ZACHARY

Provider ID: 417987

Provider Gender: Male

License Number: A145023


NPI: 1326453119


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HEALTH CTR IBARRA

 4874 POLK AVE
SAN DIEGO, CA 92105

 Phone: (619) 515-2426

 After Hours Phone: (619) 515-2426


 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

THOMAS, ZACHARY

Provider ID: 417987

Provider Gender: Male

License Number: A145023

NPI: 1326453119

 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San


Diego

FAMILY HEALTH CTR IBARRA

 4874 POLK AVE

SAN DIEGO, CA 92105

 Phone: (619) 515-2426


 After Hours Phone: (619) 515-2426

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


TRAN, TONNIA


Provider ID: 233597

Provider Gender: Female

License Number: 20A7662

NPI: 1982746657

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Vietnamese

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP


MID-CITY COMMUNITY CLINIC

 4290 POLK AVE

SAN DIEGO, CA 92105

 Phone: (619) 563-0250

 After Hours Phone: (619) 563-0250

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

TRAN, TONNIA


Provider ID: 233597

Provider Gender: Female

License Number: 20A7662

NPI: 1982746657

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Vietnamese

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP


MID-CITY COMMUNITY CLINIC

 4290 POLK AVE

SAN DIEGO, CA 92105

 Phone: (619) 563-0250

 After Hours Phone: (619) 563-0250

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


TRAN, UYEN THAO

Provider ID: 206360

Provider Gender: Female

License Number: A76709

NPI: 1891720355

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish,
Vietnamese

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

D2. Directorio de atención primaria

VISTA

Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

Fax: (619) 795-2756

After Hours Phone: (619) 515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

TRAN, UYEN THAO

Provider ID: 206360

Provider Gender: Female

License Number: A76709

NPI: 1891720355

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish,
Vietnamese

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No

Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

Fax: (619) 795-2756

After Hours Phone: (619) 515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

TRUONG, NHA

Provider ID: 417937

Provider Gender: Female

License Number: 20A17836

NPI: 1760975833

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San Diego

FAMILY HLTH CTR SD

HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2400

After Hours Phone: (619) 515-2400

Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

PROVIDER

FAMILY PRACTICE

TRUONG, NHA

Provider ID: 417937

Provider Gender: Female

License Number: 20A17836

NPI: 1760975833

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San

Diego

FAMILY HLTH CTR SD

HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2400

After Hours Phone: (619) 515-2400

Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

TSUCHIYA, KIMIKO

Provider ID: 417782

Provider Gender: Female

License Number: 20A19610

NPI: 1629637285

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San

D2. Directorio de atención primaria

Diego

DOWNTOWN FAMILY CTR AT CONNECTIONS

1250 6TH AVE STE 100
SAN DIEGO, CA 92101

Phone: (619) 515-2430

After Hours Phone: (619) 515-2430

Website: www.fhcsd.org

Email: jinah@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

TSUCHIYA, KIMIKO

Provider ID: 417782

Provider Gender: Female

License Number: 20A19610

NPI: 1629637285

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San Diego

DOWNTOWN FAMILY CTR AT CONNECTIONS

1250 6TH AVE STE 100
SAN DIEGO, CA 92101

Phone: (619) 515-2430

After Hours Phone: (619) 515-2430

Website: www.fhcsd.org

Email: jinah@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

VALENZUELA, TRICIA

Provider ID: 206363

Provider Gender: Female

License Number: A161373

NPI: 1346776358

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619) 515-2560

Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

VALENZUELA, TRICIA

Provider ID: 206363

Provider Gender: Female

License Number: A161373

NPI: 1346776358

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619) 515-2560

Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

VILLA, MARIA

Provider ID: 107710

Provider Gender: Female

NPI: 1861541385

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish, Tagalog

Cultural Competency: N

Board Certified Specialty: No

Community Care IPA LLC

MARIA T VILLA

655 SATURN BLVD STE J
SAN DIEGO, CA 92154

Phone: (619) 575-4442

Fax: (619) 575-1297

After Hours Phone: (619) 575-4442


Website: N/A

Medi-Cal Open Panel: Yes

D2. Directorio de atención primaria

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:00PM

FAMILY PRACTICE

WANG, REGINA

Provider ID: 403583

Provider Gender: Female

License Number: A109828

NPI: 1154554871

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: LONG BEACH MEMORIAL MED CTR, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON

Board Certified Specialty: No
IHP of Southern Cal-PHP
ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101
 Phone: (619) 233-8500
 After Hours Phone: (619) 233-8500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM

FAMILY PRACTICE

WANG, REGINA

Provider ID: 403583

Provider Gender: Female

License Number: A109828

NPI: 1154554871

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: LONG BEACH MEMORIAL MED CTR, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON

Board Certified Specialty: No
IHP of Southern Cal-PHP
ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101
 Phone: (619) 233-8500
 After Hours Phone: (619) 233-8500
 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM

FAMILY PRACTICE

WHITE, KATHERINE

Provider ID: 227409

Provider Gender: Female

License Number: A120447


NPI: 1801112925

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHC - OCEAN VIEW

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

WHITE, KATHERINE

Provider ID: 227409

Provider Gender: Female


License Number: A120447


NPI: 1801112925


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHC - OCEAN VIEW

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: <https://www.syhealth.org/locations>


Medi-Cal Open Panel: Yes

D2. Directorio de atención primaria

Min/Max Age: 0\150

American Sign Language (ASL): N

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


WU, JENNIFER

Provider ID: 403583

Provider Gender: Female

License Number: A54702

NPI: 1215953013

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Mandarin, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Board Certified Specialty: No


IHP of Southern Cal-PHP


ST VINCENT DE PAUL VILLAGE

FAMILY HEALTH CENTER

 1501 IMPERIAL AVE

SAN DIEGO, CA 92101

 Phone: (619) 233-8500

 After Hours Phone: (619)
233-8500


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:00PM

FAMILY PRACTICE


WU, JENNIFER


Provider ID: 403583

Provider Gender: Female

License Number: A54702

NPI: 1215953013

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Mandarin, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Board Certified Specialty: No


IHP of Southern Cal-PHP


ST VINCENT DE PAUL VILLAGE

FAMILY HEALTH CENTER

 1501 IMPERIAL AVE

SAN DIEGO, CA 92101

 Phone: (619) 233-8500

 After Hours Phone: (619)
233-8500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:00PM

FAMILY PRACTICE

ZAHLER, MARVIN

Provider ID: 417937

Provider Gender: Male

License Number: 20A11612

NPI: 1134380710

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL


Board Certified Specialty: No

Family Health Centers of San


Diego

FAMILY HLTH CTR SD

HILLCREST

 4094 4TH AVE

SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

ZAHLER, MARVIN

Provider ID: 417937

Provider Gender: Male

License Number: 20A11612

NPI: 1134380710

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL


Board Certified Specialty: No

Family Health Centers of San


Diego


FAMILY HLTH CTR SD

HILLCREST

 4094 4TH AVE

SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

D2. Directorio de atención primaria

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE


ZINK, IRENE

Provider ID: 227409

Provider Gender: Female

License Number: C54198

NPI: 1215959549

 *Provider English Spoken: Y*


 *Provider Language(s)
Spoken: German*


Cultural Competency: N


*Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL*

*Board Certified Specialty: No
IHP of Southern Cal-PHP*

*SAN YSIDRO HEALTH CHC -
OCEAN VIEW*

 *3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113*

 *Phone: (619) 662-4100*

 *After Hours Phone: (619)
662-4100*

 *Website: <https://www.syhealth.org/locations>*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE


ZINK, IRENE

Provider ID: 227409

Provider Gender: Female

License Number: C54198

NPI: 1215959549

 *Provider English Spoken: Y*


 *Provider Language(s)
Spoken: German*


Cultural Competency: N


*Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL*


*Board Certified Specialty: No
IHP of Southern Cal-PHP*

*SAN YSIDRO HEALTH CHC -
OCEAN VIEW*

 *3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113*

 *Phone: (619) 662-4100*

 *After Hours Phone: (619)
662-4100*

 *Website: <https://www.syhealth.org/locations>*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

 *Accessibility: CONTACT PROVIDER*


Hours: M-F 8:00AM-5:00PM

FQHC

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC,

Provider ID: 206363


NPI: 1982747671

 *Provider English Spoken: Y
Cultural Competency: N*

*Family Health Centers of San
Diego*

*DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC*

 *4725 MARKET ST
SAN DIEGO, CA 92102*

 *Phone: (619) 515-2560*

Fax: (619) 263-2499

 *After Hours Phone: (619)
515-2560*

 *Website: www.fhcsd.org*

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

 *Accessibility: CONTACT PROVIDER*

FQHC

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC,

Provider ID: 206363


NPI: 1982747671

 *Provider English Spoken: Y
Cultural Competency: N*

*Family Health Centers of San
Diego*

*DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC*

 *4725 MARKET ST
SAN DIEGO, CA 92102*

 *Phone: (619) 515-2560*

Fax: (619) 263-2499

 *After Hours Phone: (619)
515-2560*

 *Website: www.fhcsd.org*

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

 *Accessibility: CONTACT PROVIDER*

FQHC

DOWNTOWN FAMILY CTR AT CONNECTIONS,

Provider ID: 417782

NPI: 1588901045

 *Provider English Spoken: Y
Cultural Competency: N*

D2. Directorio de atención primaria

Family Health Centers of San Diego

DOWNTOWN FAMILY CTR AT CONNECTIONS

1250 6TH AVE STE 100
SAN DIEGO, CA 92101

Phone: (619) 515-2430
Fax: (619) 578-2410

After Hours Phone: (619) 515-2430

Website: www.fhcsd.org
Email: jinah@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC

DOWNTOWN FAMILY CTR AT CONNECTIONS,

Provider ID: 417782

NPI: 1588901045

Provider English Spoken: Y
Cultural Competency: N

Family Health Centers of San Diego

DOWNTOWN FAMILY CTR AT CONNECTIONS

1250 6TH AVE STE 100
SAN DIEGO, CA 92101

Phone: (619) 515-2430
Fax: (619) 578-2410

After Hours Phone: (619) 515-2430

Website: www.fhcsd.org
Email: jinah@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC

FAMILY HEALTH CTR IBARRA,

Provider ID: 417987

NPI: 1477953933

Provider English Spoken: Y
Cultural Competency: N

Family Health Centers of San Diego

FAMILY HEALTH CTR IBARRA

4874 POLK AVE
SAN DIEGO, CA 92105

Phone: (619) 515-2426
Fax: (619) 255-8002

After Hours Phone: (619) 515-2426

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

FQHC

FAMILY HEALTH CTR IBARRA,

Provider ID: 417987

NPI: 1477953933

Provider English Spoken: Y
Cultural Competency: N

Family Health Centers of San Diego

FAMILY HEALTH CTR IBARRA

4874 POLK AVE
SAN DIEGO, CA 92105

Phone: (619) 515-2426
Fax: (619) 255-8002

After Hours Phone: (619) 515-2426

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

FQHC

FAMILY HEALTH CTR OF SD-ELM ST,

Provider ID: 419167

NPI: 1316419070

Provider English Spoken: Y
Cultural Competency: N

Family Health Centers of San Diego

FAMILY HEALTH CTR OF SD-ELM ST

140 ELM ST
SAN DIEGO, CA 92101

Phone: (619) 515-2520
Fax: (619) 231-0431

After Hours Phone: (619) 515-2520

Website: www.fhcsd.org
Email: jinah@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC

D2. Directorio de atención primaria

FAMILY HEALTH CTR OF SD-ELM ST,

Provider ID: 419167

NPI: 1316419070

☐ Provider English Spoken: Y
Cultural Competency: N

Family Health Centers of San Diego

FAMILY HEALTH CTR OF SD-ELM ST

📍 140 ELM ST
SAN DIEGO, CA 92101

☎ Phone: (619) 515-2520

Fax: (619) 231-0431

🕒 After Hours Phone: (619) 515-2520

🌐 Website: www.fhcsd.org
Email: jinah@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC

FAMILY HEALTH CTR SAN DIEGO-OAK PARK,

Provider ID: 664747

NPI: 1336525906

☐ Provider English Spoken: Y
Cultural Competency: N

Family Health Centers of San Diego

FAMILY HEALTH CTR SAN DIEGO-OAK PARK

📍 2114 NATIONAL AVE
SAN DIEGO, CA 92113

☎ Phone: (619) 515-2406

🕒 After Hours Phone: (619)

515-2406

🌐 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

FQHC

FAMILY HEALTH CTR SAN DIEGO-OAK PARK,

Provider ID: 664747

NPI: 1336525906

☐ Provider English Spoken: Y
Cultural Competency: N

Family Health Centers of San Diego

FAMILY HEALTH CTR SAN DIEGO-OAK PARK

📍 2114 NATIONAL AVE
SAN DIEGO, CA 92113

☎ Phone: (619) 515-2406

🕒 After Hours Phone: (619) 515-2406

🌐 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

FQHC

FAMILY HEALTH CTR SAN DIEGO-OAK PARK,

Provider ID: 418142

NPI: 1336525906

☐ Provider English Spoken: Y

Cultural Competency: N

Family Health Centers of San Diego

FAMILY HEALTH CTR SAN DIEGO-OAK PARK

📍 5160 FEDERAL BLVD
SAN DIEGO, CA 92105

☎ Phone: (619) 515-2454

Fax: (619) 794-2696

🕒 After Hours Phone: (619) 515-2454

🌐 Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

FQHC

FAMILY HEALTH CTR SAN DIEGO-OAK PARK,

Provider ID: 418142

NPI: 1336525906

☐ Provider English Spoken: Y
Cultural Competency: N

Family Health Centers of San Diego

FAMILY HEALTH CTR SAN DIEGO-OAK PARK

📍 5160 FEDERAL BLVD
SAN DIEGO, CA 92105

☎ Phone: (619) 515-2454

Fax: (619) 794-2696

🕒 After Hours Phone: (619) 515-2454


🌐 Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

D2. Directorio de atención primaria

Min/Max Age: 0\150

American Sign Language (ASL): Family Health Centers of San Diego

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

FQHC

FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL,

Provider ID: 419529

NPI: 1235521782


 Provider English Spoken: Y
Cultural Competency: N

Family Health Centers of San Diego

FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL


 2325 COMMERCIAL ST STE 1400

SAN DIEGO, CA 92113

 Phone: (619) 515-2422

Fax: (619) 269-0053

 After Hours Phone: (619) 515-2422

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): Family Health Centers of San Diego

 Accessibility: CONTACT PROVIDER


Hours: M-F 8:00AM-5:00PM

FQHC

FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL,

Provider ID: 419529

NPI: 1235521782

 Provider English Spoken: Y


Cultural Competency: N

Family Health Centers of San Diego

FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL


 2325 COMMERCIAL ST STE 1400

SAN DIEGO, CA 92113

 Phone: (619) 515-2422

Fax: (619) 269-0053


 After Hours Phone: (619) 515-2422

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC

FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE,

Provider ID: 417429


NPI: 1356750376

 Provider English Spoken: Y
Cultural Competency: N

Family Health Centers of San Diego


FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE

 1550 BROADWAY STE 2 SAN DIEGO, CA 92101

 Phone: (619) 515-2525

Fax: (619) 501-5814

 After Hours Phone: (619) 515-2525

 Website: www.fhcsd.org
Email: janeta@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

FQHC

FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE,

Provider ID: 417429


NPI: 1356750376

 Provider English Spoken: Y
Cultural Competency: N

Family Health Centers of San Diego


FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE

 1550 BROADWAY STE 2 SAN DIEGO, CA 92101

 Phone: (619) 515-2525

Fax: (619) 501-5814

 After Hours Phone: (619) 515-2525

 Website: www.fhcsd.org
Email: janeta@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

FQHC

FAMILY HLTH CTR SAN DIEGO-BEACH AREA,

Provider ID: 402851

NPI: 1386689701


 Provider English Spoken: Y

D2. Directorio de atención primaria


Cultural Competency: N
Family Health Centers of San Diego


FAMILY HLTH CTR SAN DIEGO-BEACH AREA

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

Fax: (858) 488-1394

 After Hours Phone: (619) 515-2444

 Website: www.fhcsd.org


Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-W 8:30AM-5:30PM

TH 9:00AM-6:00PM


F 8:30AM-5:30PM

FQHC

FAMILY HLTH CTR SAN DIEGO-BEACH AREA,

Provider ID: 402851

NPI: 1386689701

 *Provider English Spoken: Y*


Cultural Competency: N

Family Health Centers of San Diego

FAMILY HLTH CTR SAN

DIEGO-BEACH AREA

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

Fax: (858) 488-1394

 After Hours Phone: (619) 515-2444

 Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

 *Accessibility: CONTACT PROVIDER*

Hours: M-W 8:30AM-5:30PM

TH 9:00AM-6:00PM

F 8:30AM-5:30PM

FQHC

FAMILY HLTH CTR SD

HILLCREST,

Provider ID: 417937

NPI: 1629456900

 *Provider English Spoken: Y*


Cultural Competency: N

Family Health Centers of San Diego

FAMILY HLTH CTR SD

HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

Fax: (619) 501-9645

 After Hours Phone: (619) 515-2545

 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM


FQHC

FAMILY HLTH CTR SD

HILLCREST,

Provider ID: 417937

NPI: 1629456900

 *Provider English Spoken: Y*

Cultural Competency: N


Family Health Centers of San Diego

FAMILY HLTH CTR SD


HILLCREST

 4094 4TH AVE

SAN DIEGO, CA 92103

 Phone: (619) 515-2545

Fax: (619) 501-9645

 After Hours Phone: (619) 515-2545

 Website: www.fhcsd.org


Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

FQHC

KING CHAVEZ HEALTH CENTER,

Provider ID: 451167

NPI: 1538262092


 *Provider English Spoken: Y*

Cultural Competency: N

IHP of Southern Cal-PHP

KING CHAVEZ HEALTH CENTER



 950 S EUCLID AVE
SAN DIEGO, CA 92114

 Phone: (619) 662-4100

Fax: (619) 205-1952

 After Hours Phone: (619)

D2. Directorio de atención primaria



662-4100
 Website: www.syhealth.org/clinics/king-chavez-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:00PM

FQHC

KING CHAVEZ HEALTH CENTER,

Provider ID: 451167
NPI: 1538262092
 Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
KING CHAVEZ HEALTH CENTER
 950 S EUCLID AVE
SAN DIEGO, CA 92114
 Phone: (619) 662-4100
Fax: (619) 205-1952

 After Hours Phone: (619) 662-4100


 Website: www.syhealth.org/clinics/king-chavez-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:00PM

FQHC

LA MAESTRA FAMILY CLINIC INC,

Provider ID: 185268
NPI: 1336353721
 Provider English Spoken: Y
Cultural Competency: N
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC INC
 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
 Phone: (619) 280-4213
Fax: (619) 795-9849

 After Hours Phone: (619) 280-4213




 Website: www.lamaestra.org
Email: aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FQHC

LA MAESTRA FAMILY CLINIC INC,


Provider ID: 185268
NPI: 1336353721
 Provider English Spoken: Y
Cultural Competency: N
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC INC
 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
 Phone: (619) 280-4213
Fax: (619) 795-9849



 After Hours Phone: (619) 280-4213
 Website: www.lamaestra.org
Email: aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FQHC

LINDA VISTA HEALTH CARE CTR,

Provider ID: 206046
NPI: 1609905215
 Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE CTR
 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
Fax: (858) 633-4680

 After Hours Phone: (858) 279-0925

 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FQHC

D2. Directorio de atención primaria

LINDA VISTA HEALTH CARE CTR,

Provider ID: 206046

NPI: 1780665877

☐ Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE
CTR

📍 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

☎ Phone: (858) 279-0925

Fax: (858) 633-4680

🕒 After Hours Phone: (858)
279-0925

🌐 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

FQHC

LINDA VISTA HEALTH CARE CTR,

Provider ID: 206046

NPI: 1780665877

☐ Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE
CTR

📍 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

☎ Phone: (858) 279-0925

Fax: (858) 633-4680

🕒 After Hours Phone: (858)
279-0925

🌐 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N
♿ Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

FQHC

LINDA VISTA HEALTH CARE CTR,

Provider ID: 206046

NPI: 1609905215

☐ Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE
CTR

📍 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

☎ Phone: (858) 279-0925

Fax: (858) 633-4680

🕒 After Hours Phone: (858)
279-0925

🌐 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N
♿ Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

FQHC

LOGAN HEIGHTS FAMILY HEALTH CENTER,

Provider ID: 206360

NPI: 1447281936

☐ Provider English Spoken: Y
Cultural Competency: N

Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

📍 1809 NATIONAL AVE
SAN DIEGO, CA 92113

☎ Phone: (619) 515-2300

Fax: (619) 234-2447

🕒 After Hours Phone: (619)
515-2300

🌐 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N
♿ Accessibility: CONTACT
PROVIDER

FQHC

LOGAN HEIGHTS FAMILY HEALTH CENTER,

Provider ID: 206360

NPI: 1447281936

☐ Provider English Spoken: Y
Cultural Competency: N

Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

📍 1809 NATIONAL AVE
SAN DIEGO, CA 92113

☎ Phone: (619) 515-2300

Fax: (619) 234-2447

🕒 After Hours Phone: (619)
515-2300

🌐 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

D2. Directorio de atención primaria

Min/Max Age: 0\150

American Sign Language (ASL):  2204 NATIONAL AVE

N

 Accessibility: CONTACT PROVIDER

FQHC

LOGAN HEIGHTS FAMILY HEALTH CENTER,

Provider ID: 624977


NPI: 1447281936

 Provider English Spoken: Y
Cultural Competency: N


Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 2204 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2355
Fax: (619) 232-7011


 After Hours Phone: (619) 515-2355

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FQHC

LOGAN HEIGHTS FAMILY HEALTH CENTER,

Provider ID: 624977

NPI: 1447281936


 Provider English Spoken: Y
Cultural Competency: N

Family Health Centers of San Diego


LOGAN HEIGHTS FAMILY

HEALTH CENTER

 2204 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2355
Fax: (619) 232-7011

 After Hours Phone: (619) 515-2355

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FQHC

MID-CITY COMMUNITY CLINIC,

Provider ID: 233532


NPI: 1962483040

 Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

MID-CITY COMMUNITY CLINIC

 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105
 Phone: (619) 280-2058

Fax: (858) 633-4682

 After Hours Phone: (619) 280-2058

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-2:00PM

FQHC

MID-CITY COMMUNITY CLINIC,

Provider ID: 233597


NPI: 1962483040

 Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

MID-CITY COMMUNITY CLINIC

 4290 POLK AVE
SAN DIEGO, CA 92105

 Phone: (619) 563-0250
Fax: (858) 633-4681

 After Hours Phone: (619) 563-0250


 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-2:00PM

FQHC

MID-CITY COMMUNITY CLINIC,

Provider ID: 233532


NPI: 1962483040

 Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP


MID-CITY COMMUNITY CLINIC

 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105
 Phone: (619) 280-2058

Fax: (858) 633-4682

 After Hours Phone: (619) 280-2058

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

D2. Directorio de atención primaria

Min/Max Age: 0\22

American Sign Language (ASL): HEALTH CENTER

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

FQHC

MID-CITY COMMUNITY CLINIC,

Provider ID: 233597


NPI: 1962483040

 Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

MID-CITY COMMUNITY CLINIC

 4290 POLK AVE
SAN DIEGO, CA 92105

 Phone: (619) 563-0250
Fax: (858) 633-4681

 After Hours Phone: (619)
563-0250

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

FQHC

NESTOR COMMUNITY HEALTH CENTER,

Provider ID: 214492

NPI: 1215246996


 Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

NESTOR COMMUNITY

HEALTH CENTER

 1016 OUTER RD
SAN DIEGO, CA 92154

 Phone: (619) 429-3733
Fax: (619) 628-5550

 After Hours Phone: (619)
429-3733

 Website: www.ibclinic.org

Email: avaldez@ibclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M 8:30AM-5:00PM

TU-TH 8:30AM-8:00PM

F 8:30AM-5:00PM

FQHC

NESTOR COMMUNITY HEALTH CENTER,

Provider ID: 214492

NPI: 1215246996


 Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

NESTOR COMMUNITY

HEALTH CENTER

 1016 OUTER RD
SAN DIEGO, CA 92154

 Phone: (619) 429-3733
Fax: (619) 628-5550

 After Hours Phone: (619)
429-3733

 Website: www.ibclinic.org

Email: avaldez@ibclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M 8:30AM-5:00PM

TU-TH 8:30AM-8:00PM

F 8:30AM-5:00PM

FQHC

NORTH PARK FAMILY HEALTH CENTERS,

Provider ID: 416831


NPI: 1700821303

 Provider English Spoken: Y
Cultural Competency: N

Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

 3514 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424
Fax: (619) 683-7586

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-5:00PM

FQHC

NORTH PARK FAMILY HEALTH CENTERS,

Provider ID: 206362

NPI: 1700821303

 Provider English Spoken: Y
Cultural Competency: N

D2. Directorio de atención primaria

Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
Fax: (619) 501-0627
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

FQHC

NORTH PARK FAMILY HEALTH CENTERS,

Provider ID: 206362
NPI: 1184169963

Provider English Spoken: Y
Cultural Competency: N
Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
Fax: (619) 501-0627
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

FQHC

NORTH PARK FAMILY HEALTH CENTERS,

Provider ID: 416831
NPI: 1700821303

Provider English Spoken: Y
Cultural Competency: N
Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
Fax: (619) 683-7586

After Hours Phone: (619) 515-2424

Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-5:00PM

FQHC

NORTH PARK FAMILY HEALTH CENTERS,

Provider ID: 206362
NPI: 1700821303

Provider English Spoken: Y
Cultural Competency: N
Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

3544 30TH ST

SAN DIEGO, CA 92104

Phone: (619) 515-2424

Fax: (619) 501-0627

After Hours Phone: (619) 515-2424

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

FQHC

NORTH PARK FAMILY HEALTH CENTERS,

Provider ID: 206362

NPI: 1184169963

Provider English Spoken: Y
Cultural Competency: N

Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

3544 30TH ST
SAN DIEGO, CA 92104

Phone: (619) 515-2424

Fax: (619) 501-0627

After Hours Phone: (619) 515-2424

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

FQHC

OPERATION SAMAHAN - MIRA MESA,

D2. Directorio de atención primaria

Provider ID: 432308


NPI: 1861933897

 Provider English Spoken: Y
Cultural Competency: N

Operation Samahan


OPERATION SAMAHAN - MIRA
MESA

 9855 ERMA RD STE 105
SAN DIEGO, CA 92131

 Phone: (844) 200-2426

Fax: (858) 536-8034


 After Hours Phone: (844)
200-2426

 Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FQHC

**OPERATION SAMAHAN - MIRA
MESA,**

Provider ID: 432308


NPI: 1861933897

 Provider English Spoken: Y
Cultural Competency: N

Operation Samahan


OPERATION SAMAHAN - MIRA
MESA

 9855 ERMA RD STE 105
SAN DIEGO, CA 92131

 Phone: (844) 200-2426

Fax: (858) 536-8034

 After Hours Phone: (844)
200-2426

 Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): MESA

N

 Accessibility: CONTACT
PROVIDER

FQHC

**OPERATION SAMAHAN - MIRA
MESA,**

Provider ID: 417101

NPI: 1871680397


 Provider English Spoken: Y
Cultural Competency: N

Operation Samahan

OPERATION SAMAHAN - MIRA
MESA


 10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

 Phone: (844) 200-2426

Fax: (858) 578-4417

 After Hours Phone: (844)
200-2426

 Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-4:30PM

FQHC

**OPERATION SAMAHAN - MIRA
MESA,**

Provider ID: 417101

NPI: 1871680397


 Provider English Spoken: Y
Cultural Competency: N

Operation Samahan

OPERATION SAMAHAN - MIRA


 10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

 Phone: (844) 200-2426

Fax: (858) 578-4417

 After Hours Phone: (844)
200-2426

 Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-4:30PM

FQHC

**OPERATION SAMAHAN
RANCHO PENASQUITOS,**

Provider ID: 418535

NPI: 1699216622


 Provider English Spoken: Y
Cultural Competency: N

Operation Samahan

OPERATION SAMAHAN
RANCHO PENASQUITOS


 9995 CARMEL MOUNTAIN
RD STE B10 AND B11

SAN DIEGO, CA 92129

 Phone: (844) 200-2426

Fax: (858) 695-9074

 After Hours Phone: (844)
200-2426

 Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT

D2. Directorio de atención primaria

PROVIDER
Hours: M-TU 8:30AM-5:30PM
W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM

FQHC


OPERATION SAMAHAN RANCHO PENASQUITOS,


Provider ID: 418535
NPI: 1699216622

 Provider English Spoken: Y
Cultural Competency: N


Operation Samahan

OPERATION SAMAHAN RANCHO PENASQUITOS

 9995 CARMEL MOUNTAIN
RD STE B10 AND B11
SAN DIEGO, CA 92129

 Phone: (844) 200-2426
Fax: (858) 695-9074

 After Hours Phone: (844)
200-2426

 Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TU 8:30AM-5:30PM

W 10:00AM-7:00PM

TH-F 8:30AM-5:30PM

FQHC

SAN DIEGO AMERICAN INDIAN HEALTH CENTER,

Provider ID: 207382


NPI: 1003902917

 Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP
SAN DIEGO AMERICAN
INDIAN HEALTH CENTER

 2630 1ST AVE

SAN DIEGO, CA 92103

 Phone: (619) 234-2158

Fax: (619) 234-0206

 After Hours Phone: (619)
234-2158

 Website: WWW.SDAIHC.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

Indian Health Services: Y

FQHC

SAN DIEGO AMERICAN INDIAN HEALTH CENTER,

Provider ID: 207382

NPI: 1003902917


 Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

SAN DIEGO AMERICAN INDIAN HEALTH CENTER

 2630 1ST AVE

SAN DIEGO, CA 92103

 Phone: (619) 234-2158

Fax: (619) 234-0206

 After Hours Phone: (619)
234-2158

 Website: WWW.SDAIHC.ORG

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

Indian Health Services: Y

FQHC

SAN DIEGO FAMILY CARE,

Provider ID: 482070

NPI: 1457724858


 Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD

SAN DIEGO, CA 92111

 Phone: (858) 810-8700

Fax: (858) 633-4680


 After Hours Phone: (858)
810-8700

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM

TU 8:30AM-8:30PM

W-F 8:30AM-5:30PM

SA 9:00AM-4:00PM

FQHC

SAN DIEGO FAMILY CARE,

Provider ID: 482070

NPI: 1457724858

 Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD

D2. Directorio de atención primaria

SAN DIEGO, CA 92111
☎ Phone: (858) 810-8700
Fax: (858) 633-4680
📞 After Hours Phone: (858) 810-8700
🌐 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-8:30PM
W-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

FQHC

SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE,

Provider ID: 517403
NPI: 1598308926
☑ Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE

📍 316 25TH ST
SAN DIEGO, CA 92102
☎ Phone: (619) 238-5551
Fax: (619) 238-3807
📞 After Hours Phone: (619) 238-5551
🌐 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\120
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FQHC

SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE,

Provider ID: 517403
NPI: 1598308926
☑ Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE

📍 316 25TH ST
SAN DIEGO, CA 92102
☎ Phone: (619) 238-5551
Fax: (619) 238-3807

📞 After Hours Phone: (619) 238-5551

🌐 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\120

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FQHC

SAN YSIDRO HEALTH CHC - OCEAN VIEW,

Provider ID: 227409
NPI: 1326225632
☑ Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHC - OCEAN VIEW

📍 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
☎ Phone: (619) 662-4100
Fax: (619) 595-0258

📞 After Hours Phone: (619)

662-4100
🌐 Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FQHC

SAN YSIDRO HEALTH CHC - OCEAN VIEW,

Provider ID: 227409
NPI: 1326225632
☑ Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHC - OCEAN VIEW

📍 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
☎ Phone: (619) 662-4100
Fax: (619) 595-0258

📞 After Hours Phone: (619) 662-4100

🌐 Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM


FQHC

SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED,

D2. Directorio de atención primaria

Provider ID: 517998

NPI: 1205477841

 Provider English Spoken: Y

Cultural Competency: N

IHP of Southern Cal-PHP


SAN YSIDRO HEALTH

COMMUNITY HEIGHTS FAMILY

MED

 4690 EL CAJON BLVD

SAN DIEGO, CA 92115

 Phone: (619) 662-4100

Fax: (619) 824-9076

 After Hours Phone: (619)
662-4100


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC


SAN YSIDRO HEALTH

COMMUNITY HEIGHTS FAMILY

MED,

Provider ID: 517998

NPI: 1205477841

 Provider English Spoken: Y

Cultural Competency: N

IHP of Southern Cal-PHP


SAN YSIDRO HEALTH

COMMUNITY HEIGHTS FAMILY

MED

 4690 EL CAJON BLVD

SAN DIEGO, CA 92115

 Phone: (619) 662-4100

Fax: (619) 824-9076

 After Hours Phone: (619)
662-4100

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM


FQHC

SAN YSIDRO HEALTH

PRECISION PARK,

Provider ID: 631494

NPI: 1124782685

 Provider English Spoken: Y

Cultural Competency: N


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH


PRECISION PARK

 1666 PRECISION PARK LN

SAN DIEGO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 600-4870

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM


FQHC

SAN YSIDRO HEALTH

PRECISION PARK,

Provider ID: 631494

NPI: 1124782685

 Provider English Spoken: Y

Cultural Competency: N


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

PRECISION PARK

 1666 PRECISION PARK LN

SAN DIEGO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 600-4870

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC

SHERMAN HEIGHTS FAMILY

HLTH CTRS INC,

Provider ID: 356145

NPI: 1174549232

 Provider English Spoken: Y

Cultural Competency: N

Family Health Centers of San


Diego

SHERMAN HEIGHTS FAMILY

HLTH CTRS INC

 2391 ISLAND AVE

SAN DIEGO, CA 92102

 Phone: (619) 515-2435

Fax: (619) 515-2435

 After Hours Phone: (619)
515-2435

 Website: N/A

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

D2. Directorio de atención primaria


 *Accessibility: CONTACT PROVIDER*

FQHC

SHERMAN HEIGHTS FAMILY HLTH CTRS INC,


Provider ID: 356145

NPI: 1174549232

 *Provider English Spoken: Y*
Cultural Competency: N
Family Health Centers of San Diego

SHERMAN HEIGHTS FAMILY HLTH CTRS INC

 2391 ISLAND AVE
SAN DIEGO, CA 92102

 *Phone: (619) 515-2435*

Fax: (619) 515-2435

 *After Hours Phone: (619) 515-2435*

 *Website: N/A*

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N


 *Accessibility: CONTACT PROVIDER*

FQHC

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER,


Provider ID: 403583

NPI: 1659415131

 *Provider English Spoken: Y*
Cultural Competency: N
IHP of Southern Cal-PHP

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 *Phone: (619) 233-8500*
Fax: (619) 687-1067

 *After Hours Phone: (619) 233-8500*

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

 *Accessibility: CONTACT PROVIDER*


Hours: M-F 8:00AM-5:30PM

FQHC

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER,


Provider ID: 403583

NPI: 1659415131

 *Provider English Spoken: Y*
Cultural Competency: N
IHP of Southern Cal-PHP

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 *Phone: (619) 233-8500*

Fax: (619) 687-1067

 *After Hours Phone: (619) 233-8500*

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:30PM

GASTROENTEROLOGY


FRENETTE, CATHERINE

Provider ID: 417937

Provider Gender: Female

License Number: A80461

NPI: 1417935081

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: SCRIPPS

GREEN HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, CALIFORNIA


PACIFIC MED CTR

Board Certified Specialty: No


Family Health Centers of San Diego


FAMILY HLTH CTR SD

HILLCREST

 4094 4TH AVE

SAN DIEGO, CA 92103

 *Phone: (619) 515-2545*

 *After Hours Phone: (619) 515-2545*

 *Website: www.fhcsd.org*

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

GASTROENTEROLOGY

FRENETTE, CATHERINE

Provider ID: 417937

Provider Gender: Female

License Number: A80461

NPI: 1417935081

 *Provider English Spoken: Y*
Cultural Competency: N

D2. Directorio de atención primaria

Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, CALIFORNIA PACIFIC MED CTR

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD
HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619) 515-2545

Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

GASTROENTEROLOGY

GADDIPATI, KISHORE

Provider ID: 417937

Provider Gender: Male

License Number: A111638

NPI: 1720114093

Provider English Spoken: Y

Provider Language(s)

Spoken: Faroese, Hindi, Spanish, Telugu, Urdu

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL

Board Certified Specialty: No

Family Health Centers of San Diego

FAMILY HLTH CTR SD

HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619) 515-2545

Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

GASTROENTEROLOGY

GADDIPATI, KISHORE

Provider ID: 417937

Provider Gender: Male

License Number: A111638

NPI: 1720114093

Provider English Spoken: Y

Provider Language(s)

Spoken: Faroese, Hindi, Spanish, Telugu, Urdu

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL

Board Certified Specialty: No

Family Health Centers of San

Diego

FAMILY HLTH CTR SD

HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619)

515-2545

Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

GASTROENTEROLOGY

HAI, FAIZI

Provider ID: 417937

Provider Gender: Male

License Number: A159324

NPI: 1639523228

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San

Diego

FAMILY HLTH CTR SD

HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619) 515-2545

Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

D2. Directorio de atención primaria

GASTROENTEROLOGY

HAI, FAIZI

Provider ID: 417937

Provider Gender: Male

License Number: A159324

NPI: 1639523228

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego

FAMILY HLTH CTR SD

HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

GASTROENTEROLOGY

STIPHO, SALLY

Provider ID: 417937

Provider Gender: Female

License Number: A104647

NPI: 1467642215

Provider English Spoken: Y

Provider Language(s)
Spoken: French

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, KINDRED

HOSPITAL SAN DIEGO,

SCRIPPS MERCY HOSPITAL
CHULA VISTA


Board Certified Specialty: No


Family Health Centers of San Diego

FAMILY HLTH CTR SD

HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

GASTROENTEROLOGY

STIPHO, SALLY

Provider ID: 417937

Provider Gender: Female

License Number: A104647

NPI: 1467642215

Provider English Spoken: Y

Provider Language(s)
Spoken: French

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, KINDRED

HOSPITAL SAN DIEGO,

SCRIPPS MERCY HOSPITAL

CHULA VISTA

Board Certified Specialty: No


Family Health Centers of San


Diego

FAMILY HLTH CTR SD

HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

GENERAL PRACTICE

BELLO, OSAGIE

Provider ID: 417101

Provider Gender: Male

License Number: A115182

NPI: 1164726378

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: PIONEERS
MEMORIAL HOSPITAL, SHARP

CHULA VISTA MED CTR,

PARADISE VALLEY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS MERCY

HOSPITAL, SCRIPPS GREEN

HOSPITAL

Board Certified Specialty: No

Operation Samahan

D2. Directorio de atención primaria

OPERATION SAMAHAN - MIRA
MESA

10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

Phone: (844) 200-2426

After Hours Phone: (844)
200-2426

Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-4:30PM

GENERAL PRACTICE

BELLO, OSAGIE

Provider ID: 417101

Provider Gender: Male

License Number: A115182

NPI: 1164726378

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PIONEERS
MEMORIAL HOSPITAL, SHARP

CHULA VISTA MED CTR,
PARADISE VALLEY HOSPITAL,

SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS MERCY

HOSPITAL, SCRIPPS GREEN
HOSPITAL

Board Certified Specialty: No

Operation Samahan

OPERATION SAMAHAN - MIRA
MESA

10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

Phone: (844) 200-2426

After Hours Phone: (844)
200-2426

Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-4:30PM

GENERAL PRACTICE

DOAN STEPHENS, CRYSTAL

Provider ID: 233532

Provider Gender: Female

License Number: A152267

NPI: 1730570144

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

MID-CITY COMMUNITY CLINIC

4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

Phone: (619) 280-2058

After Hours Phone: (619)
280-2058

Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

GENERAL PRACTICE

DOAN STEPHENS, CRYSTAL

Provider ID: 233532

Provider Gender: Female

License Number: A152267

NPI: 1730570144

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

MID-CITY COMMUNITY CLINIC

4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

Phone: (619) 280-2058

After Hours Phone: (619)
280-2058

Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

GENERAL PRACTICE

RECALDE, FRANCISCO

Provider ID: 13850

Provider Gender: Male

NPI: 1538309067

Provider English Spoken: Y
Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL

Board Certified Specialty: No

Imperial Health Holdings

Medical Group-SD

FRANCISCO J RECALDE

3811 EL CAJON BLVD


SAN DIEGO, CA 92105

Phone: (619) 284-5622

Fax: (619) 566-4655

D2. Directorio de atención primaria

 After Hours Phone: (619)
507-3050

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 16\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:00PM


GENERAL PRACTICE

RECALDE, FRANCISCO

Provider ID: 13850

Provider Gender: Male

NPI: 1538309067

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL

Board Certified Specialty: No

Community Care IPA LLC


FRANCISCO J RECALDE

 3811 EL CAJON BLVD
SAN DIEGO, CA 92105

 Phone: (619) 284-5622

Fax: (619) 566-4655

 After Hours Phone: (619)
507-3050

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:00PM

HEPATOLOGY


GISH, ROBERT


Provider ID: 185268

Provider Gender: Male

License Number: G45632

NPI: 1548281322

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Dutch, French,
Spanish, Vietnamese


Cultural Competency: N


Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 255-9155

 After Hours Phone: (619)
255-9155

 Website: www.lamaestra.or
g


Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

HEPATOLOGY


GISH, ROBERT


Provider ID: 185268

Provider Gender: Male

License Number: G45632

NPI: 1548281322

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Dutch, French,
Spanish, Vietnamese


Cultural Competency: N


Board Certified Specialty: No


La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 255-9155

 After Hours Phone: (619)
255-9155

 Website: www.lamaestra.or
g

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

ALASSIL, SALLY


Provider ID: 419529

Provider Gender: Female

License Number: A122238

NPI: 1982044483

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San
Diego


FAMILY HLTH CTR OF SD SAN
DIEGO COMMERCIAL

 2325 COMMERCIAL ST STE
1400

SAN DIEGO, CA 92113

 Phone: (619) 515-2422

 After Hours Phone: (619)
515-2422

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

D2. Directorio de atención primaria

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE


ALASSIL, SALLY

Provider ID: 419529

Provider Gender: Female

License Number: A122238

NPI: 1982044483

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego

FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL

 2325 COMMERCIAL ST STE 1400

SAN DIEGO, CA 92113

 Phone: (619) 515-2422

 After Hours Phone: (619) 515-2422

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE


ALASSIL, SALLY

Provider ID: 206360

Provider Gender: Female

License Number: A122238

NPI: 1982044483

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic


Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE


ALASSIL, SALLY

Provider ID: 206360

Provider Gender: Female

License Number: A122238

NPI: 1982044483

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE

SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

ALDOUS, JEANNETTE

Provider ID: 451167

Provider Gender: Female

License Number: A101017

NPI: 1073650339

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: UCSD MEDICAL CTR


Board Certified Specialty: No


IHP of Southern Cal-PHP

KING CHAVEZ HEALTH CENTER

 950 S EUCLID AVE
SAN DIEGO, CA 92114

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org/clinics/king-chavez-health-center
























Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

D2. Directorio de atención primaria

<p><i>PROVIDER</i></p> <p><u>INTERNAL MEDICINE</u> ALDOUS, JEANNETTE Provider ID: 451167 Provider Gender: Female License Number: A101017 NPI: 1073650339</p> <p><input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s) Spoken: Spanish Cultural Competency: N Hospital Affiliation: UCSD MEDICAL CTR Board Certified Specialty: No IHP of Southern Cal-PHP KING CHAVEZ HEALTH CENTER</p> <p> 950 S EUCLID AVE SAN DIEGO, CA 92114</p> <p> Phone: (619) 662-4100  After Hours Phone: (619) 662-4100</p> <p> Website: www.syhealth.org/clinics/king-chavez-health-center Medi-Cal Open Panel: Yes Min/Max Age: 0\150 American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER</p> <p><u>INTERNAL MEDICINE</u> ANDERSON, KENDELL Provider ID: 417937 Provider Gender: Female License Number: 20A15598 NPI: 1285028191</p> <p><input type="checkbox"/> Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: SCRIPPS MERCY HOSPITAL Board Certified Specialty: No Family Health Centers of San Diego FAMILY HLTH CTR SD HILLCREST</p> <p> 4094 4TH AVE SAN DIEGO, CA 92103</p> <p> Phone: (619) 515-2545  After Hours Phone: (619) 515-2545</p>	<p>Hospital Affiliation: SCRIPPS MERCY HOSPITAL Board Certified Specialty: No Family Health Centers of San Diego FAMILY HLTH CTR SD HILLCREST</p> <p> 4094 4TH AVE SAN DIEGO, CA 92103</p> <p> Phone: (619) 515-2545  After Hours Phone: (619) 515-2545</p> <p> Website: www.fhcsd.org Email: fabianm@fhcsd.org Medi-Cal Open Panel: Yes Min/Max Age: 0\150 American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER</p> <p><u>INTERNAL MEDICINE</u> ANDERSON, KENDELL Provider ID: 417937 Provider Gender: Female License Number: 20A15598 NPI: 1285028191</p> <p><input type="checkbox"/> Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: SCRIPPS MERCY HOSPITAL Board Certified Specialty: No Family Health Centers of San Diego FAMILY HLTH CTR SD HILLCREST</p> <p> 4094 4TH AVE SAN DIEGO, CA 92103</p> <p> Phone: (619) 515-2545  After Hours Phone: (619) 515-2545</p>	<p> Website: www.fhcsd.org Email: fabianm@fhcsd.org Medi-Cal Open Panel: Yes Min/Max Age: 0\150 American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER</p> <p><u>INTERNAL MEDICINE</u> ANDREWS, JOHN Provider ID: 403583 Provider Gender: Male License Number: G71080 NPI: 1003164302</p> <p><input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s) Spoken: Spanish Cultural Competency: N Board Certified Specialty: No IHP of Southern Cal-PHP ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER</p> <p> 1501 IMPERIAL AVE SAN DIEGO, CA 92101</p> <p> Phone: (619) 233-8500  After Hours Phone: (619) 233-8500</p> <p> Website: N/A Medi-Cal Open Panel: Yes Min/Max Age: 0\999 American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Hours: M-F 8:00AM-5:00PM</p> <p><u>INTERNAL MEDICINE</u> ANDREWS, JOHN Provider ID: 403583 Provider Gender: Male</p>
--	--	--

D2. Directorio de atención primaria

License Number: G71080
NPI: 1003164302
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

1501 IMPERIAL AVE
SAN DIEGO, CA 92101
 Phone: (619) 233-8500
 After Hours Phone: (619)
233-8500
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE

BENITEZ, MARTHA

Provider ID: 206362
Provider Gender: Female
License Number: 20A19248
NPI: 1124521901
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
NORTH PARK FAMILY HEALTH
CENTERS

3544 30TH ST
SAN DIEGO, CA 92104

Phone: (619) 515-2424
 After Hours Phone: (619)
515-2424
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

BENITEZ, MARTHA

Provider ID: 206362
Provider Gender: Female
License Number: 20A19248
NPI: 1124521901
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

3544 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619)
515-2424
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

BENITEZ, MARTHA

Provider ID: 206362

Provider Gender: Female
License Number: 20A19248
NPI: 1124521901
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

3544 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619)
515-2424
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

BENITEZ, MARTHA

Provider ID: 206362
Provider Gender: Female
License Number: 20A19248
NPI: 1124521901
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

3544 30TH ST

D2. Directorio de atención primaria

SAN DIEGO, CA 92104
☎ Phone: (619) 515-2424
🕒 After Hours Phone: (619) 515-2424
🌐 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

BOHR, CHRISTINA

Provider ID: 417937
Provider Gender: Female
License Number: 20A17702
NPI: 1841794344
☑ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SD
HILLCREST

📍 4094 4TH AVE
SAN DIEGO, CA 92103
☎ Phone: (619) 515-2545
🕒 After Hours Phone: (619) 515-2545
🌐 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

BOHR, CHRISTINA

Provider ID: 417937
Provider Gender: Female
License Number: 20A17702
NPI: 1841794344
☑ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SD
HILLCREST

📍 4094 4TH AVE
SAN DIEGO, CA 92103
☎ Phone: (619) 515-2545
🕒 After Hours Phone: (619) 515-2545
🌐 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

BRIONES COLMAN, FELICIA

Provider ID: 417937
Provider Gender: Female
License Number: A80153
NPI: 1962517367
☑ Provider English Spoken: Y
☑ Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SD
HILLCREST
📍 4094 4TH AVE


SAN DIEGO, CA 92103
☎ Phone: (619) 515-2545
🕒 After Hours Phone: (619) 515-2545
🌐 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

INTERNAL MEDICINE

BRIONES COLMAN, FELICIA

Provider ID: 417937
Provider Gender: Female
License Number: A80153
NPI: 1962517367
☑ Provider English Spoken: Y
☑ Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SD
HILLCREST
📍 4094 4TH AVE
SAN DIEGO, CA 92103
☎ Phone: (619) 515-2545
🕒 After Hours Phone: (619) 515-2545
🌐 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

D2. Directorio de atención primaria

 *Accessibility: CONTACT PROVIDER*
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

INTERNAL MEDICINE


CHAN, ANDY

Provider ID: 417937

Provider Gender: Male

License Number: 20A20352

NPI: 1104480912

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*


Cultural Competency: N

Board Certified Specialty: No


Family Health Centers of San Diego


FAMILY HLTH CTR SD

HILLCREST

 *4094 4TH AVE*

SAN DIEGO, CA 92103

 *Phone: (619) 515-2545*

 *After Hours Phone: (619) 515-2545*

 *Website: www.fhcsd.org*

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

INTERNAL MEDICINE


CHAN, ANDY

Provider ID: 417937

Provider Gender: Male

License Number: 20A20352

NPI: 1104480912

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*


Cultural Competency: N

Board Certified Specialty: No


Family Health Centers of San Diego


FAMILY HLTH CTR SD

HILLCREST

 *4094 4TH AVE*

SAN DIEGO, CA 92103

 *Phone: (619) 515-2545*

 *After Hours Phone: (619) 515-2545*

 *Website: www.fhcsd.org*

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

INTERNAL MEDICINE

CHANDRADAS, SAJIV


Provider ID: 417937

Provider Gender: Male

License Number: A122474

NPI: 1720350465

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N

Hospital Affiliation: SCRIPPS

GREEN HOSPITAL, SCRIPPS

MERCY HOSPITAL


Board Certified Specialty: No

Family Health Centers of San


Diego


FAMILY HLTH CTR SD

HILLCREST

 *4094 4TH AVE*

SAN DIEGO, CA 92103

 *Phone: (619) 515-2545*

 *After Hours Phone: (619) 515-2545*

 *Website: www.fhcsd.org*

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

INTERNAL MEDICINE

CHANDRADAS, SAJIV

Provider ID: 417937

Provider Gender: Male

License Number: A122474

NPI: 1720350465

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N

Hospital Affiliation: SCRIPPS

GREEN HOSPITAL, SCRIPPS


MERCY HOSPITAL

Board Certified Specialty: No


Family Health Centers of San Diego

FAMILY HLTH CTR SD

HILLCREST

 *4094 4TH AVE*


SAN DIEGO, CA 92103

 *Phone: (619) 515-2545*

 *After Hours Phone: (619)*

D2. Directorio de atención primaria

515-2545
 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

INTERNAL MEDICINE

CHEN, JAMES

Provider ID: 417937
Provider Gender: Male
License Number: A86644
NPI: 1265495691


Provider English Spoken: Y
 Provider Language(s)
Spoken: Chinese

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

CHEN, JAMES

Provider ID: 417937
Provider Gender: Male
License Number: A86644
NPI: 1265495691


Provider English Spoken: Y
 Provider Language(s)
Spoken: Chinese

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

CSAPOCZI, PETER


Provider ID: 451167

Provider Gender: Male


License Number: A96919
NPI: 1841357118

Provider English Spoken: Y
 Provider Language(s)
Spoken: Hungarian,
Spanish, Ukrainian

Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
KING CHAVEZ HEALTH
CENTER

 950 S EUCLID AVE
SAN DIEGO, CA 92114
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/king-chavez-health-center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:00PM

INTERNAL MEDICINE

CSAPOCZI, PETER

Provider ID: 451167
Provider Gender: Male
License Number: A96919
NPI: 1841357118

Provider English Spoken: Y
 Provider Language(s)
Spoken: Hungarian,
Spanish, Ukrainian

Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
KING CHAVEZ HEALTH

D2. Directorio de atención primaria

CENTER


 950 S EUCLID AVE
SAN DIEGO, CA 92114
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/king-chavez-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-4:00PM

INTERNAL MEDICINE

CUMMINS, ANDREW

Provider ID: 417937

Provider Gender: Male

License Number: A102764

NPI: 1699917096

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MEMORIAL

HOSPITAL ENCINITAS


Board Certified Specialty: No

Family Health Centers of San Diego


FAMILY HLTH CTR SD

HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

CUMMINS, ANDREW

Provider ID: 417937

Provider Gender: Male

License Number: A102764

NPI: 1699917096

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MEMORIAL

HOSPITAL ENCINITAS


Board Certified Specialty: No


Family Health Centers of San Diego


FAMILY HLTH CTR SD

HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

CURTIS, MEGAN

Provider ID: 206360

Provider Gender: Female

License Number: A187390


NPI: 1699138115


Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300


 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

CURTIS, MEGAN

Provider ID: 206360

Provider Gender: Female

License Number: A187390

NPI: 1699138115

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San

D2. Directorio de atención primaria

Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

DAHMS, ERIC

Provider ID: 417937

Provider Gender: Male

License Number: G80316

NPI: 1306808464

Provider English Spoken: Y

Provider Language(s)
Spoken: German

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD

HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619)
515-2545

Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

DAHMS, ERIC

Provider ID: 417937

Provider Gender: Male

License Number: G80316

NPI: 1306808464

Provider English Spoken: Y

Provider Language(s)
Spoken: German

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD

HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619)
515-2545

Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

DIEP, KEVIN

Provider ID: 417937

Provider Gender: Male

License Number: 20A17657

NPI: 1083117865

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD

HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619)
515-2545

Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

INTERNAL MEDICINE

DIEP, KEVIN

Provider ID: 417937

Provider Gender: Male

License Number: 20A17657

NPI: 1083117865

Provider English Spoken: Y



D2. Directorio de atención primaria


Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
Family Health Centers of San
Diego


FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 *Phone: (619) 515-2545*
 *After Hours Phone: (619)*
515-2545

 *Website: www.fhcsd.org*
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150



American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

INTERNAL MEDICINE


DIXIT, SHUBHAM

Provider ID: 417937
Provider Gender: Male
License Number: 20A21421
NPI: 1932785367


 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Hindi

Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego


FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE

SAN DIEGO, CA 92103
 *Phone: (619) 515-2545*
 *After Hours Phone: (619)*
515-2545

 *Website: www.fhcsd.org*
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150



American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

INTERNAL MEDICINE

DIXIT, SHUBHAM


Provider ID: 417937
Provider Gender: Male
License Number: 20A21421
NPI: 1932785367

 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Hindi


Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103
 *Phone: (619) 515-2545*
 *After Hours Phone: (619)*
515-2545

 *Website: www.fhcsd.org*
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150



American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

INTERNAL MEDICINE

DODGE, JOHN


Provider ID: 417937
Provider Gender: Male
License Number: G67831
NPI: 1770510489

 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103
 *Phone: (619) 515-2545*
 *After Hours Phone: (619)*
515-2545

 *Website: www.fhcsd.org*
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

INTERNAL MEDICINE

DODGE, JOHN

Provider ID: 417937
Provider Gender: Male
License Number: G67831

D2. Directorio de atención primaria

NPI: 1770510489

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD
HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619)
515-2545

Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

DOMINGUEZ, FERNANDO

Provider ID: 417937

Provider Gender: Male

License Number: A154708

NPI: 1972917672

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD
HILLCREST

4094 4TH AVE

SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619)
515-2545

Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

INTERNAL MEDICINE

DOMINGUEZ, FERNANDO

Provider ID: 417937

Provider Gender: Male

License Number: A154708

NPI: 1972917672

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD

HILLCREST

4094 4TH AVE

SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619)
515-2545

Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

INTERNAL MEDICINE

FABELLA, GABRIEL

Provider ID: 9774

Provider Gender: Male

NPI: 1124060827

Provider English Spoken: Y

Provider Language(s)
Spoken: Japanese, Spanish,
Tagalog

Cultural Competency: N

Board Certified Specialty: No

Community Care IPA LLC

GABRIEL T FABELLA

10737 CAMINO RUIZ STE 115
SAN DIEGO, CA 92126

Phone: (858) 695-1262

Fax: (858) 695-2132

After Hours Phone: (858)
695-1262

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-3:00PM

INTERNAL MEDICINE

FARASAT, SADAF

Provider ID: 206360

Provider Gender: Female




License Number: A147939

NPI: 1255696407

Provider English Spoken: Y



Provider Language(s)

D2. Directorio de atención primaria

Spoken: Hindi, Punjabi, Urdu
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, NATIVIDAD MEDICAL CENTER, PALOMAR MEDICAL CENTER
Board Certified Specialty: No Family Health Centers of San Diego
LOGAN HEIGHTS FAMILY HEALTH CENTER
 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 *Phone: (619) 515-2300*
 *After Hours Phone: (619) 515-2300*
 *Website: www.fhcsd.org*
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*

INTERNAL MEDICINE



FARASAT, SADAF






Provider ID: 206360
Provider Gender: Female
License Number: A147939
NPI: 1255696407
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Hindi, Punjabi, Urdu*
Cultural Competency: N
Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, NATIVIDAD MEDICAL CENTER, PALOMAR MEDICAL CENTER
Board Certified Specialty: No Family Health Centers of San Diego
LOGAN HEIGHTS FAMILY HEALTH CENTER
 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 *Phone: (619) 515-2300*
 *After Hours Phone: (619) 515-2300*
 *Website: www.fhcsd.org*
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*

INTERNAL MEDICINE

GEHR, MARC

Provider ID: 417937
Provider Gender: Male
License Number: G67338
NPI: 1306800180
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No Family Health Centers of San Diego
FAMILY HLTH CTR SD
















HILLCREST
 4094 4TH AVE
SAN DIEGO, CA 92103
 *Phone: (619) 515-2545*
 *After Hours Phone: (619) 515-2545*
 *Website: www.fhcsd.org*
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*

INTERNAL MEDICINE

GEHR, MARC

Provider ID: 417937
Provider Gender: Male
License Number: G67338
NPI: 1306800180
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No Family Health Centers of San Diego
FAMILY HLTH CTR SD
HILLCREST
 4094 4TH AVE
SAN DIEGO, CA 92103
 *Phone: (619) 515-2545*
 *After Hours Phone: (619) 515-2545*
 *Website: www.fhcsd.org*
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

D2. Directorio de atención primaria

<p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><u>INTERNAL MEDICINE</u></p> <p>GERWER, JOHANNA</p> <p><i>Provider ID: 206360</i></p> <p><i>Provider Gender: Female</i></p> <p><i>License Number: A169752</i></p> <p><i>NPI: 1043742588</i></p> <p><input type="checkbox"/> <i>Provider English Spoken: Y</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Board Certified Specialty: No</i></p> <p><i>Family Health Centers of San Diego</i></p> <p>LOGAN HEIGHTS FAMILY HEALTH CENTER</p> <p> 1809 NATIONAL AVE SAN DIEGO, CA 92113</p> <p> <i>Phone: (619) 515-2300</i></p> <p> <i>After Hours Phone: (619) 515-2300</i></p> <p> <i>Website: www.fhcsd.org</i></p> <p><i>Email: dalvarado@fhcsd.org</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p> <p><i>Min/Max Age: 0\150</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><u>INTERNAL MEDICINE</u></p> <p>GERWER, JOHANNA</p> <p><i>Provider ID: 206360</i></p> <p><i>Provider Gender: Female</i></p> <p><i>License Number: A169752</i></p> <p><i>NPI: 1043742588</i></p> <p><input type="checkbox"/> <i>Provider English Spoken: Y</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Board Certified Specialty: No</i></p> <p><i>Family Health Centers of San</i></p>	<p><i>Diego</i></p> <p>LOGAN HEIGHTS FAMILY HEALTH CENTER</p> <p> 1809 NATIONAL AVE SAN DIEGO, CA 92113</p> <p> <i>Phone: (619) 515-2300</i></p> <p> <i>After Hours Phone: (619) 515-2300</i></p> <p> <i>Website: www.fhcsd.org</i></p> <p><i>Email: dalvarado@fhcsd.org</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p> <p><i>Min/Max Age: 0\150</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><u>INTERNAL MEDICINE</u></p> <p>GUTIERREZ, ANGELICA</p> <p><i>Provider ID: 233597</i></p> <p><i>Provider Gender: Female</i></p> <p><i>License Number: A175116</i></p> <p><i>NPI: 1982180329</i></p> <p><input type="checkbox"/> <i>Provider English Spoken: Y</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Board Certified Specialty: No</i></p> <p><i>IHP of Southern Cal-PHP</i></p> <p>MID-CITY COMMUNITY CLINIC</p> <p> 4290 POLK AVE SAN DIEGO, CA 92105</p> <p> <i>Phone: (619) 563-0250</i></p> <p> <i>After Hours Phone: (619) 563-0250</i></p> <p> <i>Website: www.sdfamilycare.org</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p> <p><i>Min/Max Age: 0\150</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Hours: M-F 8:00AM-5:00PM</i></p>	<p><i>SA 8:00AM-2:00PM</i></p> <p><u>INTERNAL MEDICINE</u></p> <p>GUTIERREZ, ANGELICA</p> <p><i>Provider ID: 233597</i></p> <p><i>Provider Gender: Female</i></p> <p><i>License Number: A175116</i></p> <p><i>NPI: 1982180329</i></p> <p><input type="checkbox"/> <i>Provider English Spoken: Y</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Board Certified Specialty: No</i></p> <p><i>IHP of Southern Cal-PHP</i></p> <p>MID-CITY COMMUNITY CLINIC</p> <p> 4290 POLK AVE SAN DIEGO, CA 92105</p> <p> <i>Phone: (619) 563-0250</i></p> <p> <i>After Hours Phone: (619) 563-0250</i></p> <p> <i>Website: www.sdfamilycare.org</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p> <p><i>Min/Max Age: 0\150</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Hours: M-F 8:00AM-5:00PM</i></p> <p><i>SA 8:00AM-2:00PM</i></p> <p><u>INTERNAL MEDICINE</u></p> <p>HAN, PAUL</p> <p><i>Provider ID: 417937</i></p> <p><i>Provider Gender: Male</i></p> <p><i>License Number: A116816</i></p> <p><i>NPI: 1053553339</i></p> <p><input type="checkbox"/> <i>Provider English Spoken: Y</i></p> <p><input type="checkbox"/> <i>Provider Language(s) Spoken: Korean</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA</i></p>
--	---	--

D2. Directorio de atención primaria

VISTA, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD
HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619)
515-2545
Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE

HAN, PAUL

Provider ID: 417937

Provider Gender: Male

License Number: A116816

NPI: 1053553339

Provider English Spoken: Y
Provider Language(s)
Spoken: Korean

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD
HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619)
515-2545
Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE

HAZELBAKER, PAUL

Provider ID: 417782

Provider Gender: Male

License Number: 20A7147

NPI: 1831106103

Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

DOWNTOWN FAMILY CTR AT
CONNECTIONS

1250 6TH AVE STE 100
SAN DIEGO, CA 92101
Phone: (619) 515-2430
After Hours Phone: (619)
515-2430
Website: www.fhcsd.org
Email: jinah@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE

HAZELBAKER, PAUL

Provider ID: 417782

Provider Gender: Male

License Number: 20A7147

NPI: 1831106103

Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

DOWNTOWN FAMILY CTR AT
CONNECTIONS

1250 6TH AVE STE 100
SAN DIEGO, CA 92101
Phone: (619) 515-2430
After Hours Phone: (619)
515-2430
Website: www.fhcsd.org
Email: jinah@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE

HENDERSON, PHILIP

Provider ID: 417937

Provider Gender: Male

License Number: A140324


NPI: 1447678834

Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

D2. Directorio de atención primaria


FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

INTERNAL MEDICINE

HENDERSON, PHILIP

Provider ID: 417937

Provider Gender: Male

License Number: A140324



NPI: 1447678834


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD

HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

INTERNAL MEDICINE

HIGGINSON, MICHELLE

Provider ID: 417937

Provider Gender: Female

License Number: A74420

NPI: 1114955879



 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD

HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE


HIGGINSON, MICHELLE

Provider ID: 417937

Provider Gender: Female

License Number: A74420

NPI: 1114955879


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD

HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE



JACKSON, GAVIN

Provider ID: 417937

Provider Gender: Male

License Number: A110647

NPI: 1609033182

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL
Board Certified Specialty: No
Family Health Centers of San

D2. Directorio de atención primaria

Diego

FAMILY HLTH CTR SD

HILLCREST

4094 4TH AVE

SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619) 515-2545

Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 9:00AM-5:00PM

INTERNAL MEDICINE

JACKSON, GAVIN

Provider ID: 417937

Provider Gender: Male

License Number: A110647

NPI: 1609033182

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL

Board Certified Specialty: No

Family Health Centers of San Diego

FAMILY HLTH CTR SD

HILLCREST

4094 4TH AVE

SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619) 515-2545

Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 9:00AM-5:00PM

INTERNAL MEDICINE

JAMISON, KAREN

Provider ID: 417937

Provider Gender: Female

License Number: A95356

NPI: 1285830505

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL

Board Certified Specialty: No

Family Health Centers of San Diego

FAMILY HLTH CTR SD

HILLCREST

4094 4TH AVE

SAN DIEGO, CA 92103

Phone: (619) 515-2545

Fax: (619) 501-9645

After Hours Phone: (619) 515-2545

Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

INTERNAL MEDICINE

JAMISON, KAREN

Provider ID: 417937

Provider Gender: Female

License Number: A95356

NPI: 1285830505

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL

Board Certified Specialty: No

Family Health Centers of San Diego

FAMILY HLTH CTR SD

HILLCREST

4094 4TH AVE

SAN DIEGO, CA 92103

Phone: (619) 515-2545

Fax: (619) 501-9645

After Hours Phone: (619) 515-2545

Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

INTERNAL MEDICINE

KARCHES, KELLI

Provider ID: 417937

Provider Gender: Female

License Number: A80931

NPI: 1891997631

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS

D2. Directorio de atención primaria

MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, UCSD LA JOLLA JOHN
SALLY THORNTON, UCSD
MEDICAL CTR

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD
HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619)
515-2545

Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

INTERNAL MEDICINE

KARCHES, KELLI

Provider ID: 417937

Provider Gender: Female

License Number: A80931

NPI: 1891997631

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, UCSD LA JOLLA JOHN
SALLY THORNTON, UCSD
MEDICAL CTR

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD
HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619)
515-2545

Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

INTERNAL MEDICINE

KHANNA, POORNIMA

Provider ID: 185268

Provider Gender: Female

License Number: A70714

NPI: 1598862583

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL

Board Certified Specialty: No

La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Phone: (619) 280-4213

After Hours Phone: (619)
280-4213

Website: www.lamaestra.org

g
Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

KHANNA, POORNIMA

Provider ID: 185268

Provider Gender: Female

License Number: A70714

NPI: 1598862583

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL

Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Phone: (619) 280-4213

After Hours Phone: (619)
280-4213

Website: www.lamaestra.org

g
Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

D2. Directorio de atención primaria

KRIJGER, LISA

Provider ID: 403583

Provider Gender: Female

License Number: A67762


NPI: 1932278710


Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 Phone: (619) 233-8500

 After Hours Phone: (619)
233-8500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

INTERNAL MEDICINE

KRIJGER, LISA

Provider ID: 403583

Provider Gender: Female

License Number: A67762


NPI: 1932278710

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP


ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 Phone: (619) 233-8500

 After Hours Phone: (619)

233-8500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

INTERNAL MEDICINE

LALITHAKUMARI, ARYA

Provider ID: 206362

Provider Gender: Female

License Number: A140646

NPI: 1265874010

Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: Hemet
Global Medical Center, Menifee


Global Medical Center
Board Certified Specialty: No


Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

LALITHAKUMARI, ARYA

Provider ID: 206362

Provider Gender: Female

License Number: A140646

NPI: 1265874010

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Hemet
Global Medical Center, Menifee


Global Medical Center


Board Certified Specialty: No
Family Health Centers of San

Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424


 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

LALITHAKUMARI, ARYA

Provider ID: 206362

Provider Gender: Female

License Number: A140646

NPI: 1265874010

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Hemet
Global Medical Center, Menifee

Global Medical Center

Board Certified Specialty: No
Family Health Centers of San

D2. Directorio de atención primaria

Diego

NORTH PARK FAMILY HEALTH CENTERS

3544 30TH ST
SAN DIEGO, CA 92104

Phone: (619) 515-2424

After Hours Phone: (619) 515-2424

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

LALITHAKUMARI, ARYA

Provider ID: 206362

Provider Gender: Female

License Number: A140646

NPI: 1265874010

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: Hemet

Global Medical Center, Menifee

Global Medical Center

Board Certified Specialty: No

Family Health Centers of San

Diego

NORTH PARK FAMILY HEALTH CENTERS

3544 30TH ST
SAN DIEGO, CA 92104

Phone: (619) 515-2424

After Hours Phone: (619) 515-2424

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

LAMANTIA, MICHELE

Provider ID: 451167

Provider Gender: Female

License Number: G71855

NPI: 1124176102

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

KING CHAVEZ HEALTH

CENTER

950 S EUCLID AVE
SAN DIEGO, CA 92114

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org/clinics/king-chavez-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

LAMANTIA, MICHELE

Provider ID: 451167

Provider Gender: Female

License Number: G71855

NPI: 1124176102

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

KING CHAVEZ HEALTH

CENTER

950 S EUCLID AVE
SAN DIEGO, CA 92114

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org/clinics/king-chavez-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

LEE, MICHAEL

Provider ID: 206360

Provider Gender: Male

License Number: A71671

NPI: 1760406649

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS GREEN HOSPITAL

Board Certified Specialty: No

Family Health Centers of San

Diego

LOGAN HEIGHTS FAMILY

HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113


Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

D2. Directorio de atención primaria

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150


American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER




INTERNAL MEDICINE


LEE, MICHAEL

Provider ID: 206360
Provider Gender: Male
License Number: A71671
NPI: 1760406649


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS GREEN HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE




MARCINIAK, ROMAN


Provider ID: 206360
Provider Gender: Male
License Number: 20A17072
NPI: 1326579210

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE



MARCINIAK, ROMAN

Provider ID: 206360
Provider Gender: Male
License Number: 20A17072
NPI: 1326579210

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150



American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE


NARANJO, RODRIGO

Provider ID: 206046
Provider Gender: Male
License Number: A119010
NPI: 1609095264


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

NARANJO, RODRIGO

Provider ID: 206046

D2. Directorio de atención primaria



Provider Gender: Male
License Number: A119010
NPI: 1609095264
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 After Hours Phone: (858)
279-0925
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE **NARANJO, RODRIGO**

Provider ID: 482070
Provider Gender: Male
License Number: A119010
NPI: 1609095264
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
 After Hours Phone: (858)

810-8700
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE **NARANJO, RODRIGO**



Provider ID: 206046
Provider Gender: Male
License Number: A119010
NPI: 1609095264
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 After Hours Phone: (858)
279-0925
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE **NARANJO, RODRIGO**

Provider ID: 206046
Provider Gender: Male

License Number: A119010
NPI: 1609095264
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE
CTR


 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 After Hours Phone: (858)
279-0925
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE **NARANJO, RODRIGO**

Provider ID: 482070
Provider Gender: Male
License Number: A119010
NPI: 1609095264
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
 After Hours Phone: (858)
810-8700


D2. Directorio de atención primaria

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE


NARAYANAN, MEENA

Provider ID: 206363

Provider Gender: Female

License Number: A113448

NPI: 1508170697

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, SHARP
CHULA VISTA MED CTR,

Adventist Health and Rideout

Board Certified Specialty: No

Family Health Centers of San


Diego

DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

 4725 MARKET ST

SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE


NARAYANAN, MEENA

Provider ID: 206363

Provider Gender: Female

License Number: A113448

NPI: 1508170697

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, SHARP
CHULA VISTA MED CTR,

Adventist Health and Rideout

Board Certified Specialty: No

Family Health Centers of San


Diego


DIAMOND NEIGHBORHOODS


FAMILY HLTH CTRS INC

 4725 MARKET ST

SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE


PARIKH, MILIND


Provider ID: 206363

Provider Gender: Male

License Number: 20A13745

NPI: 1194161406

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Gujarati, Hindi,
Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR, Sharp
Grossmont Hospital, Adventist

Health and Rideout


Board Certified Specialty: No

Family Health Centers of San

Diego


DIAMOND NEIGHBORHOODS


FAMILY HLTH CTRS INC

 4725 MARKET ST

SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

PARIKH, MILIND


Provider ID: 206363

Provider Gender: Male

License Number: 20A13745

NPI: 1194161406

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Gujarati, Hindi,
Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR, Sharp
Grossmont Hospital, Adventist

D2. Directorio de atención primaria

Health and Rideout

Board Certified Specialty: No
Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619)
515-2560

Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

PREVALLET, ALEXANDER

Provider ID: 417937

Provider Gender: Male

License Number: 20A19716

NPI: 1659833556

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD
HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619)

515-2545

Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

INTERNAL MEDICINE

PREVALLET, ALEXANDER

Provider ID: 417937

Provider Gender: Male

License Number: 20A19716

NPI: 1659833556

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD
HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619)
515-2545

Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

INTERNAL MEDICINE

RAMERS, CHRISTIAN

Provider ID: 417937

Provider Gender: Male

License Number: A119631

NPI: 1730381385

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD
HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619)
515-2545

Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

RAMERS, CHRISTIAN

Provider ID: 417937

Provider Gender: Male

License Number: A119631

NPI: 1730381385

Provider English Spoken: Y

Provider Language(s)

D2. Directorio de atención primaria

Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SD
HILLCREST

4094 4TH AVE

SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619) 515-2545

Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

RESNIKOFF, PAMELA

Provider ID: 417937

Provider Gender: Female

License Number: G80358

NPI: 1841252533

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No

Family Health Centers of San Diego

FAMILY HLTH CTR SD

HILLCREST

4094 4TH AVE

SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619) 515-2545

Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

RESNIKOFF, PAMELA

Provider ID: 417937

Provider Gender: Female

License Number: G80358

NPI: 1841252533

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No

Family Health Centers of San Diego

FAMILY HLTH CTR SD

HILLCREST

4094 4TH AVE

SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619) 515-2545

Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

RIVERA, TANIA

Provider ID: 206363

Provider Gender: Female

License Number: A126958

NPI: 1336346972

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR

MEDICAL CENTER, SCRIPPS

MEMORIAL HOSPITAL

Board Certified Specialty: No

Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

4725 MARKET ST

SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619) 515-2560

Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

RIVERA, TANIA

Provider ID: 206363

Provider Gender: Female

License Number: A126958

NPI: 1336346972

Provider English Spoken: Y



Provider Language(s)


D2. Directorio de atención primaria

Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER, SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
Family Health Centers of San Diego
DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
 4725 MARKET ST
SAN DIEGO, CA 92102
 *Phone: (619) 515-2560*
 *After Hours Phone: (619) 515-2560*
 *Website: www.fhcsd.org*
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*

INTERNAL MEDICINE



ROUEL, WADI






Provider ID: 185268
Provider Gender: Male
License Number: C55979
NPI: 1740254713
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Arabic, Assyrian, Spanish, Syriac*
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL
Board Certified Specialty: No

La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC INC
 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
 *Phone: (619) 255-9155*
 *After Hours Phone: (619) 255-9155*
 *Website: www.lamaestra.org*
Email: aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-6:00PM SA 8:00AM-2:00PM

INTERNAL MEDICINE






ROUEL, WADI

Provider ID: 185268
Provider Gender: Male
License Number: C55979
NPI: 1740254713
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Arabic, Assyrian, Spanish, Syriac*
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL
Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
 *Phone: (619) 255-9155*
 *After Hours Phone: (619) 255-9155*
 *Website: www.lamaestra.org*
Email: aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-6:00PM SA 8:00AM-2:00PM


INTERNAL MEDICINE

SASSIC, JESSICA

Provider ID: 417937
Provider Gender: Female
License Number: A185024
NPI: 1598342529
 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SD HILLCREST
 4094 4TH AVE
SAN DIEGO, CA 92103
 *Phone: (619) 515-2545*
 *After Hours Phone: (619) 515-2545*
 *Website: www.fhcsd.org*
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

D2. Directorio de atención primaria


N

 *Accessibility: CONTACT PROVIDER*
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM



INTERNAL MEDICINE


SASSIC, JESSICA

Provider ID: 417937
Provider Gender: Female
License Number: A185024
NPI: 1598342529


 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103
 *Phone: (619) 515-2545*
 *After Hours Phone: (619) 515-2545*

 *Website: www.fhcsd.org*
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*



Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

INTERNAL MEDICINE

SHAMSINEJAD BABAKI, ARASH

Provider ID: 631494
Provider Gender: Male
License Number: A81206


NPI: 1750498119

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Farsi*

Cultural Competency: N
Hospital Affiliation: ST MARYS MEDICAL CENTER SAN FRANCISCO

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
PRECISION PARK

 1666 PRECISION PARK LN
SAN DIEGO, CA 92173
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*

 *Website: www.syhealth.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999



American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

INTERNAL MEDICINE

SHAMSINEJAD BABAKI, ARASH




Provider ID: 631494
Provider Gender: Male
License Number: A81206
NPI: 1750498119

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Farsi*

Cultural Competency: N
Hospital Affiliation: ST MARYS MEDICAL CENTER SAN FRANCISCO

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH
PRECISION PARK

 1666 PRECISION PARK LN
SAN DIEGO, CA 92173
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*


 *Website: www.syhealth.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

INTERNAL MEDICINE

SHI, RUJING


Provider ID: 417937
Provider Gender: Female
License Number: 20A19399
NPI: 1710446539

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No
Family Health Centers of San Diego


FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103
 *Phone: (619) 515-2545*
 *After Hours Phone: (619) 515-2545*

 *Website: www.fhcsd.org*
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N


D2. Directorio de atención primaria

 *Accessibility: CONTACT PROVIDER*
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM


INTERNAL MEDICINE


SHI, RUJING

Provider ID: 417937
Provider Gender: Female
License Number: 20A19399
NPI: 1710446539


 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD
HILLCREST

 *4094 4TH AVE*
SAN DIEGO, CA 92103
 *Phone: (619) 515-2545*
 *After Hours Phone: (619) 515-2545*

 *Website: www.fhcsd.org*
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150



American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

INTERNAL MEDICINE


SMILDE, RENEE


Provider ID: 417937
Provider Gender: Female
License Number: A70175

NPI: 1427010594
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Dutch*


Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD
HILLCREST

 *4094 4TH AVE*
SAN DIEGO, CA 92103
 *Phone: (619) 515-2545*
 *After Hours Phone: (619) 515-2545*

 *Website: www.fhcsd.org*
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150



American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

INTERNAL MEDICINE

SMILDE, RENEE

Provider ID: 417937
Provider Gender: Female
License Number: A70175
NPI: 1427010594


 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Dutch*
Cultural Competency: N
Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA


Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD
HILLCREST

 *4094 4TH AVE*
SAN DIEGO, CA 92103
 *Phone: (619) 515-2545*
 *After Hours Phone: (619) 515-2545*

 *Website: www.fhcsd.org*
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150



American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

INTERNAL MEDICINE

URIBE-BRUCE, LILIANA

Provider ID: 206360
Provider Gender: Female
License Number: C55724
NPI: 1689010324





 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER



 *1809 NATIONAL AVE*
SAN DIEGO, CA 92113

D2. Directorio de atención primaria

 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

URIBE-BRUCE, LILIANA



Provider ID: 206360
Provider Gender: Female
License Number: C55724
NPI: 1689010324
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER


INTERNAL MEDICINE

VALDEZ, KRYSTAL ANGELI

Provider ID: 417101
Provider Gender: Female
License Number: A156854
NPI: 1629480272
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: TWIN CITIES COMMUNITY HOSPITAL, SIERRA VISTA REGIONAL MED CTR, PARADISE VALLEY HOSPITAL
Board Certified Specialty: No
Operation Samahan
OPERATION SAMAHAN - MIRA MESA


 10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
 Phone: (844) 200-2426
 After Hours Phone: (844) 200-2426
 Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150


American Sign Language (ASL):
N





 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-4:30PM

INTERNAL MEDICINE

VALDEZ, KRYSTAL ANGELI



Provider ID: 417101
Provider Gender: Female
License Number: A156854
NPI: 1629480272
 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: TWIN CITIES COMMUNITY HOSPITAL, SIERRA VISTA REGIONAL MED CTR, PARADISE VALLEY HOSPITAL
Board Certified Specialty: No
Operation Samahan
OPERATION SAMAHAN - MIRA MESA

 10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
 Phone: (844) 200-2426
 After Hours Phone: (844) 200-2426
 Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-4:30PM

INTERNAL MEDICINE

VIDAURRAZAGA, MONICA

Provider ID: 417937
Provider Gender: Female
License Number: A169207
NPI: 1346628310
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

D2. Directorio de atención primaria

FAMILY HLTH CTR SD HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619)
515-2545
Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

VIDAURRAZAGA, MONICA

Provider ID: 417937
Provider Gender: Female
License Number: A169207
NPI: 1346628310
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619)
515-2545
Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

WASTILA, LISA

Provider ID: 403583
Provider Gender: Female
License Number: A60801
NPI: 1043375231
Provider English Spoken: Y
Provider Language(s)
Spoken: German
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Board Certified Specialty: No
IHP of Southern Cal-PHP
ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619)
233-8500
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

WASTILA, LISA

Provider ID: 403583
Provider Gender: Female
License Number: A60801
NPI: 1043375231
Provider English Spoken: Y
Provider Language(s)

Spoken: German
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Board Certified Specialty: No
IHP of Southern Cal-PHP
ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER


1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619)
233-8500
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

WATTANAMANO, PORNTHEP



Provider ID: 206046
Provider Gender: Male
License Number: C186338
NPI: 1295738516
Provider English Spoken: Y
Provider Language(s)
Spoken: Thai
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE
CTR
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858)
279-0925
Website: www.sdfamilycare

D2. Directorio de atención primaria

.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE

WATTANAMANO, PORNTHEP



Provider ID: 206046
Provider Gender: Male
License Number: C186338
NPI: 1295738516
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Thai
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 After Hours Phone: (858)
279-0925
 Website: www.sdfamilycare
.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE

WATTANAMANO, PORNTHEP



Provider ID: 206046

Provider Gender: Male
License Number: C186338
NPI: 1295738516
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Thai
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE
CTR


 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 After Hours Phone: (858)
279-0925
 Website: www.sdfamilycare
.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE

WATTANAMANO, PORNTHEP






Provider ID: 206046
Provider Gender: Male
License Number: C186338
NPI: 1295738516
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Thai
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD

SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 After Hours Phone: (858)
279-0925
 Website: www.sdfamilycare
.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE

WATTS, ELI

Provider ID: 451167
Provider Gender: Male
License Number: A79383
NPI: 1649373739
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
KING CHAVEZ HEALTH
CENTER
 950 S EUCLID AVE
SAN DIEGO, CA 92114
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org
/clinics/king- chavez- healt
h- center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

D2. Directorio de atención primaria

 *Accessibility: CONTACT PROVIDER*

INTERNAL MEDICINE


WATTS, ELI

Provider ID: 451167

Provider Gender: Male

License Number: A79383

NPI: 1649373739

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*


Cultural Competency: N


Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL


Board Certified Specialty: No IHP of Southern Cal-PHP

KING CHAVEZ HEALTH CENTER

 *950 S EUCLID AVE
SAN DIEGO, CA 92114*

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*

 *Website: www.syhealth.org/clinics/king-chavez-health-center*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

INTERNAL MEDICINE


YUNG, STEVEN

Provider ID: 417937

Provider Gender: Male

License Number: G80798

NPI: 1689636656

 *Provider English Spoken: Y*


Cultural Competency: N


Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA


Board Certified Specialty: No Family Health Centers of San Diego

FAMILY HLTH CTR SD HILLCREST

 *4094 4TH AVE
SAN DIEGO, CA 92103*

 *Phone: (619) 515-2545*

 *After Hours Phone: (619) 515-2545*

 *Website: www.fhcsd.org
Email: fabianm@fhcsd.org*

*Medi-Cal Open Panel: Yes
Min/Max Age: 0\150*

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

*Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM*

INTERNAL MEDICINE

YUNG, STEVEN

Provider ID: 417937

Provider Gender: Male

License Number: G80798

NPI: 1689636656

 *Provider English Spoken: Y
Cultural Competency: N*


Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA


Board Certified Specialty: No Family Health Centers of San


Diego

FAMILY HLTH CTR SD HILLCREST

 *4094 4TH AVE
SAN DIEGO, CA 92103*


 *Phone: (619) 515-2545*

 *After Hours Phone: (619) 515-2545*

 *Website: www.fhcsd.org
Email: fabianm@fhcsd.org*

*Medi-Cal Open Panel: Yes
Min/Max Age: 0\150*

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

*Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM*

INTERVENTIONAL CARDIOLOGY



SHETABI, KAMBIZ

Provider ID: 206363

Provider Gender: Male

License Number: A126187

NPI: 1972827806


 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Farsi, Spanish*

*Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, Sharp Grossmont Hospital*

Board Certified Specialty: No Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

 *4725 MARKET ST
SAN DIEGO, CA 92102*

 *Phone: (619) 515-2560*

D2. Directorio de atención primaria

 After Hours Phone: (619) 515-2560


 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

INTERVENTIONAL

CARDIOLOGY


SHETABI, KAMBIZ

Provider ID: 206363

Provider Gender: Male

License Number: A126187

NPI: 1972827806

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi, Spanish

Cultural Competency: N


Hospital Affiliation: SHARP


CHULA VISTA MED CTR, Sharp
Grossmont Hospital


Board Certified Specialty: No
Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

NEUROLOGY


CANTU-REYNA, GUILLERMO

Provider ID: 185268

Provider Gender: Male

License Number: A41375

NPI: 1447389101

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SHARP


CHULA VISTA MED CTR

Board Certified Specialty: No
La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 255-9155

 After Hours Phone: (619)
255-9155

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

NEUROLOGY

CANTU-REYNA, GUILLERMO

Provider ID: 185268

Provider Gender: Male

License Number: A41375

NPI: 1447389101

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SHARP


CHULA VISTA MED CTR


Board Certified Specialty: No
La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 255-9155

 After Hours Phone: (619)
255-9155

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

NEUROLOGY

GRISOLIA, JAMES


Provider ID: 417937

Provider Gender: Male

License Number: G42884

NPI: 1336102359

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA
VISTA, SCRIPPS MERCY

D2. Directorio de atención primaria

HOSPITAL

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD

HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619) 515-2545

Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

NEUROLOGY

GRISOLIA, JAMES

Provider ID: 417937

Provider Gender: Male

License Number: G42884

NPI: 1336102359

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD

HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619) 515-2545

Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

NEUROLOGY

LUHAR, RIYA

Provider ID: 417937

Provider Gender: Female

License Number: 20A19975

NPI: 1235665662

Provider English Spoken: Y

Provider Language(s)
Spoken: Gujarati, Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR
HEALTH, PALOMAR MEDICAL

CENTER, TRI CITY MEDICAL

CTR, SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,

SCRIPPS MEMORIAL

HOSPITAL, SCRIPPS MERCY

HOSPITAL

Board Certified Specialty: No
Family Health Centers of San

Diego

FAMILY HLTH CTR SD

HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619) 515-2545

Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-9:00PM

F 8:00AM-5:00PM

NEUROLOGY

LUHAR, RIYA

Provider ID: 417937

Provider Gender: Female

License Number: 20A19975

NPI: 1235665662

Provider English Spoken: Y

Provider Language(s)
Spoken: Gujarati, Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR
HEALTH, PALOMAR MEDICAL

CENTER, TRI CITY MEDICAL

CTR, SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,

SCRIPPS MEMORIAL

HOSPITAL, SCRIPPS MERCY

HOSPITAL

Board Certified Specialty: No
Family Health Centers of San

Diego

FAMILY HLTH CTR SD

HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619) 515-2545

Website: www.fhcsd.org


Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

D2. Directorio de atención primaria

Min/Max Age: 0\150

N

American Sign Language (ASL):  Accessibility: CONTACT PROVIDER

 Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

NEUROLOGY


MARTIN, FREDERIC

Provider ID: 417937

Provider Gender: Male

License Number: G61965

NPI: 1265582605

 Provider English Spoken: Y

 Provider Language(s)
Spoken: French


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, SELECT
SPECIALTY HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA


Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

NEUROLOGY


MARTIN, FREDERIC

Provider ID: 417937

Provider Gender: Male

License Number: G61965

NPI: 1265582605

 Provider English Spoken: Y

 Provider Language(s)
Spoken: French


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, SELECT
SPECIALTY HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA


Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

NEUROLOGY

TAFRESHI, GILDA

Provider ID: 417937

Provider Gender: Female

License Number: A103111

NPI: 1891946950


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS GREEN HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA


Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

NEUROLOGY

TAFRESHI, GILDA

Provider ID: 417937

Provider Gender: Female

License Number: A103111

D2. Directorio de atención primaria

NPI: 1891946950


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS GREEN HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY


AL-MSHHDANI, AYSER


Provider ID: 185268

Provider Gender: Female

License Number: A172929

NPI: 1679008569

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: PALOMAR

MEDICAL CENTER, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, Sharp Grossmont


Hospital, SCRIPPS MERCY


HOSPITAL


Board Certified Specialty: No
La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 280-4213

 After Hours Phone: (619)
280-4213

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY


AL-MSHHDANI, AYSER


Provider ID: 185268

Provider Gender: Female

License Number: A172929

NPI: 1679008569

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: PALOMAR

MEDICAL CENTER, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, Sharp Grossmont

Hospital, SCRIPPS MERCY


HOSPITAL


Board Certified Specialty: No


La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 280-4213

 After Hours Phone: (619)
280-4213

 Website: www.lamaestra.org

Email:


aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI


Provider ID: 206362

Provider Gender: Female

License Number: 20A14919

NPI: 1619397031

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,

SCRIPPS MERCY HOSPITAL


Board Certified Specialty: No

Family Health Centers of San

Diego

NORTH PARK FAMILY HEALTH


CENTERS

 3544 30TH ST

D2. Directorio de atención primaria

SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Hours: M-TH 8:30AM-5:30PM
F 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI

Provider ID: 206362
Provider Gender: Female
License Number: 20A14919
NPI: 1619397031

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-TH 8:30AM-5:30PM
F 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI

Provider ID: 416831
Provider Gender: Female
License Number: 20A14919
NPI: 1619397031

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3514 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424

 Website: www.fhcsd.org
Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI

Provider ID: 206362

Provider Gender: Female

License Number: 20A14919

NPI: 1619397031

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish



Cultural Competency: N


Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego


NORTH PARK FAMILY HEALTH
CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-TH 8:30AM-5:30PM
F 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI

Provider ID: 206360

Provider Gender: Female

License Number: 20A14919

NPI: 1619397031

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

D2. Directorio de atención primaria

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI

Provider ID: 206360

Provider Gender: Female

License Number: 20A14919

NPI: 1619397031

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI

Provider ID: 206362

Provider Gender: Female

License Number: 20A14919

NPI: 1619397031

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

3544 30TH ST
SAN DIEGO, CA 92104

Phone: (619) 515-2424

After Hours Phone: (619)
515-2424

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

Hours: M-TH 8:30AM-5:30PM
F 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI

Provider ID: 416831

Provider Gender: Female

License Number: 20A14919

NPI: 1619397031

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

3514 30TH ST
SAN DIEGO, CA 92104

Phone: (619) 515-2424

After Hours Phone: (619)
515-2424

Website: www.fhcsd.org
Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI

Provider ID: 402851

Provider Gender: Female

License Number: 20A14919

D2. Directorio de atención primaria

NPI: 1619397031

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-BEACH AREA

3705 MISSION BLVD
SAN DIEGO, CA 92109

Phone: (619) 515-2444

After Hours Phone: (619)
515-2444

Website: www.fhcsd.org
Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI

Provider ID: 402851

Provider Gender: Female

License Number: 20A14919

NPI: 1619397031

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-BEACH AREA

3705 MISSION BLVD
SAN DIEGO, CA 92109

Phone: (619) 515-2444

After Hours Phone: (619)
515-2444

Website: www.fhcsd.org
Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI

Provider ID: 206363

Provider Gender: Female

License Number: 20A14919

NPI: 1619397031

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No
Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619)
515-2560

Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI

Provider ID: 206363

Provider Gender: Female

License Number: 20A14919

NPI: 1619397031

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No
Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619)
515-2560

Website: www.fhcsd.org
Email: nancyl@fhcsd.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N


D2. Directorio de atención primaria

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY


BLAKE, GARY

Provider ID: 206046
Provider Gender: Male
License Number: G44807
NPI: 1497738439

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 *Phone: (858) 279-0925*
 *After Hours Phone: (858) 279-0925*
 *Website: www.sdfamilycare.org*


Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Hours: M 8:30AM-5:30PM
TU 8:30AM-9:00PM
W-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

OBSTETRICS / GYNECOLOGY

BLAKE, GARY


Provider ID: 206046
Provider Gender: Male
License Number: G44807
NPI: 1497738439

 *Provider English Spoken: Y*

Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 *Phone: (858) 279-0925*
 *After Hours Phone: (858) 279-0925*
 *Website: www.sdfamilycare.org*


Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Hours: M 8:30AM-5:30PM
TU 8:30AM-9:00PM
W-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

OBSTETRICS / GYNECOLOGY


BLAKE, GARY

Provider ID: 206046
Provider Gender: Male
License Number: G44807
NPI: 1497738439

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 *Phone: (858) 279-0925*
 *After Hours Phone: (858) 279-0925*
 *Website: www.sdfamilycare.org*

.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Hours: M 8:30AM-5:30PM
TU 8:30AM-9:00PM
W-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

OBSTETRICS / GYNECOLOGY


BLAKE, GARY

Provider ID: 206046
Provider Gender: Male
License Number: G44807
NPI: 1497738439

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 *Phone: (858) 279-0925*
 *After Hours Phone: (858) 279-0925*
 *Website: www.sdfamilycare.org*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Hours: M 8:30AM-5:30PM
TU 8:30AM-9:00PM
W-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

D2. Directorio de atención primaria

OBSTETRICS / GYNECOLOGY


BUECHNER, CHARLENE

Provider ID: 206362

Provider Gender: Female

License Number: A68463

NPI: 1376663831

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SHARP


MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SHARP MARY
BIRCH HOSP FOR WOMEN
AND NEWBORNS

Board Certified Specialty: No
Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY


BUECHNER, CHARLENE

Provider ID: 402851

Provider Gender: Female

License Number: A68463

NPI: 1376663831

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SHARP


MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SHARP MARY
BIRCH HOSP FOR WOMEN
AND NEWBORNS

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-BEACH AREA

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619)
515-2444

 Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY


BUECHNER, CHARLENE


Provider ID: 402851

Provider Gender: Female

License Number: A68463

NPI: 1376663831

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SHARP


MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SHARP MARY
BIRCH HOSP FOR WOMEN
AND NEWBORNS

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-BEACH AREA

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619)
515-2444


 Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE


Provider ID: 206360

Provider Gender: Female

License Number: A68463

NPI: 1376663831

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP




MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SHARP MARY


D2. Directorio de atención primaria

BIRCH HOSP FOR WOMEN AND NEWBORNS

*Board Certified Specialty: No
Family Health Centers of San
Diego*

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

OBSTETRICS / GYNECOLOGY


BUECHNER, CHARLENE

Provider ID: 206362

Provider Gender: Female

License Number: A68463

NPI: 1376663831

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*


Cultural Competency: N


*Hospital Affiliation: SHARP
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SHARP MARY
BIRCH HOSP FOR WOMEN
AND NEWBORNS*


*Board Certified Specialty: No
Family Health Centers of San
Diego*

NORTH PARK FAMILY HEALTH CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

OBSTETRICS / GYNECOLOGY


BUECHNER, CHARLENE

Provider ID: 206362

Provider Gender: Female

License Number: A68463

NPI: 1376663831

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*


Cultural Competency: N

*Hospital Affiliation: SHARP
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SHARP MARY
BIRCH HOSP FOR WOMEN
AND NEWBORNS*

*Board Certified Specialty: No
Family Health Centers of San
Diego*


NORTH PARK FAMILY HEALTH CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)

515-2424


 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

Provider ID: 416831

Provider Gender: Female

License Number: A68463

NPI: 1376663831

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N


Hospital Affiliation: SHARP


*MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SHARP MARY
BIRCH HOSP FOR WOMEN
AND NEWBORNS*


*Board Certified Specialty: No
Family Health Centers of San
Diego*

NORTH PARK FAMILY HEALTH CENTERS

 3514 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org
Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

D2. Directorio de atención primaria

<p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p>	<p><i>Provider ID: 416831</i></p> <p><i>Provider Gender: Female</i></p> <p><i>License Number: A68463</i></p> <p><i>NPI: 1376663831</i></p>	<p><input type="checkbox"/> <i>Provider Language(s) Spoken: Spanish</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS</i></p> <p><i>Board Certified Specialty: No</i></p> <p><i>Family Health Centers of San Diego</i></p> <p><i>DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC</i></p> <p> 4725 MARKET ST SAN DIEGO, CA 92102</p> <p> <i>Phone: (619) 515-2420</i></p> <p> <i>After Hours Phone: (619) 515-2420</i></p> <p> <i>Website: www.fhcsd.org</i></p> <p><i>Email: nancyl@fhcsd.org</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p> <p><i>Min/Max Age: 0\150</i></p> <p><i>American Sign Language (ASL):</i></p>
<p><u>OBSTETRICS / GYNECOLOGY</u></p> <p>BUECHNER, CHARLENE</p> <p><i>Provider ID: 206362</i></p> <p><i>Provider Gender: Female</i></p> <p><i>License Number: A68463</i></p> <p><i>NPI: 1376663831</i></p>	<p><input type="checkbox"/> <i>Provider English Spoken: Y</i></p> <p><input type="checkbox"/> <i>Provider Language(s) Spoken: Spanish</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS</i></p> <p><i>Board Certified Specialty: No</i></p> <p><i>Family Health Centers of San Diego</i></p> <p><i>NORTH PARK FAMILY HEALTH CENTERS</i></p> <p> 3514 30TH ST SAN DIEGO, CA 92104</p> <p> <i>Phone: (619) 515-2424</i></p> <p> <i>After Hours Phone: (619) 515-2424</i></p> <p> <i>Website: www.fhcsd.org</i></p> <p><i>Email: jenanm@fhcsd.org</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p> <p><i>Min/Max Age: 0\18</i></p> <p><i>American Sign Language (ASL):</i></p>	<p>N</p> <p><input type="checkbox"/> <i>Provider English Spoken: Y</i></p> <p><input type="checkbox"/> <i>Provider Language(s) Spoken: Spanish</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Hospital Affiliation: SHARP MEMORIAL HOSPITAL,</i></p>
<p><u>OBSTETRICS / GYNECOLOGY</u></p> <p>BUECHNER, CHARLENE</p> <p><i>Provider ID: 206362</i></p> <p><i>Provider Gender: Female</i></p> <p><i>License Number: A68463</i></p> <p><i>NPI: 1376663831</i></p>	<p><input type="checkbox"/> <i>Provider English Spoken: Y</i></p> <p><input type="checkbox"/> <i>Provider Language(s) Spoken: Spanish</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Hospital Affiliation: SHARP MEMORIAL HOSPITAL,</i></p>	<p><u>OBSTETRICS / GYNECOLOGY</u></p> <p>BUECHNER, CHARLENE</p> <p><i>Provider ID: 206360</i></p> <p><i>Provider Gender: Female</i></p> <p><i>License Number: A68463</i></p> <p><i>NPI: 1376663831</i></p>
<p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p>	<p><u>OBSTETRICS / GYNECOLOGY</u></p> <p>BUECHNER, CHARLENE</p> <p><i>Provider ID: 206363</i></p> <p><i>Provider Gender: Female</i></p> <p><i>License Number: A68463</i></p> <p><i>NPI: 1376663831</i></p>	<p><input type="checkbox"/> <i>Provider English Spoken: Y</i></p> <p><input type="checkbox"/> <i>Provider Language(s) Spoken: Spanish</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Hospital Affiliation: SHARP MEMORIAL HOSPITAL,</i></p>

D2. Directorio de atención primaria

SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SHARP MARY
BIRCH HOSP FOR WOMEN
AND NEWBORNS

Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

Provider ID: 206363

Provider Gender: Female

License Number: A68463

NPI: 1376663831

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SHARP MARY

BIRCH HOSP FOR WOMEN

AND NEWBORNS

Board Certified Specialty: No
Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2420

After Hours Phone: (619)
515-2420

Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

Provider ID: 206363

Provider Gender: Male

License Number: A113001

NPI: 1225231582

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,

GROSSMONT HOSPITAL, TRI

CITY MEDICAL CTR

Board Certified Specialty: No
Family Health Centers of San

Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2420

After Hours Phone: (619)
515-2420

Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

Provider ID: 206360

Provider Gender: Male

License Number: A113001

NPI: 1225231582

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,

GROSSMONT HOSPITAL, TRI

CITY MEDICAL CTR

Board Certified Specialty: No
Family Health Centers of San

Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

D2. Directorio de atención primaria

N

 *Accessibility: CONTACT PROVIDER*

Hours: M 8:00AM-7:00PM

TU-TH 8:00AM-6:00PM

F 8:00AM-5:30PM

SA 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY


CARTER, KHALIL

Provider ID: 206363

Provider Gender: Male

License Number: A113001

NPI: 1225231582

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N


Hospital Affiliation: SCRIPPS MERCY HOSPITAL,


GROSSMONT HOSPITAL, TRI CITY MEDICAL CTR


Board Certified Specialty: No Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

 *4725 MARKET ST
SAN DIEGO, CA 92102*

 *Phone: (619) 515-2420*

 *After Hours Phone: (619) 515-2420*

 *Website: www.fhcsd.org*
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY


CARTER, KHALIL

Provider ID: 416831

Provider Gender: Male

License Number: A113001

NPI: 1225231582

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N


Hospital Affiliation: SCRIPPS MERCY HOSPITAL,


GROSSMONT HOSPITAL, TRI CITY MEDICAL CTR


Board Certified Specialty: No Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

 *3514 30TH ST
SAN DIEGO, CA 92104*

 *Phone: (619) 515-2424*

 *After Hours Phone: (619) 515-2424*

 *Website: www.fhcsd.org*
Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

Provider ID: 206362

Provider Gender: Male

License Number: A113001

NPI: 1225231582

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*


Cultural Competency: N


Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, TRI CITY MEDICAL CTR


Board Certified Specialty: No Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

 *3544 30TH ST
SAN DIEGO, CA 92104*

 *Phone: (619) 515-2424*

 *After Hours Phone: (619) 515-2424*

 *Website: www.fhcsd.org*
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*

*Hours: M-TH 8:30AM-5:30PM
F 8:30AM-5:00PM*

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

Provider ID: 416831

Provider Gender: Male

License Number: A113001

NPI: 1225231582

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL,

GROSSMONT HOSPITAL, TRI CITY MEDICAL CTR

D2. Directorio de atención primaria

Board Certified Specialty: No
Family Health Centers of San Diego
NORTH PARK FAMILY HEALTH CENTERS

3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18

American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY **CARTER, KHALIL**

Provider ID: 206362
Provider Gender: Male
License Number: A113001
NPI: 1225231582

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, TRI CITY MEDICAL CTR
Board Certified Specialty: No
Family Health Centers of San Diego
NORTH PARK FAMILY HEALTH CENTERS

3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424

After Hours Phone: (619) 515-2424

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-TH 8:30AM-5:30PM
F 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY **CARTER, KHALIL**

Provider ID: 206362
Provider Gender: Male
License Number: A113001
NPI: 1225231582

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, TRI CITY MEDICAL CTR

Board Certified Specialty: No
Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

3544 30TH ST
SAN DIEGO, CA 92104

Phone: (619) 515-2424
After Hours Phone: (619) 515-2424

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-TH 8:30AM-5:30PM
F 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY **CARTER, KHALIL**

Provider ID: 206360
Provider Gender: Male
License Number: A113001
NPI: 1225231582

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, TRI CITY MEDICAL CTR

Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300
After Hours Phone: (619) 515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M 8:00AM-7:00PM
TU-TH 8:00AM-6:00PM

F 8:00AM-5:30PM
SA 8:00AM-5:00PM

D2. Directorio de atención primaria

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

Provider ID: 402851

Provider Gender: Male

License Number: A113001

NPI: 1225231582

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS


MERCY HOSPITAL,
GROSSMONT HOSPITAL, TRI
CITY MEDICAL CTR

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-BEACH AREA

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619)
515-2444

 Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-W 8:30AM-5:00PM
TH 9:30AM-6:00PM

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

Provider ID: 402851

Provider Gender: Male

License Number: A113001

NPI: 1225231582

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS


MERCY HOSPITAL,
GROSSMONT HOSPITAL, TRI
CITY MEDICAL CTR


Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-BEACH AREA

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619)
515-2444

 Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-W 8:30AM-5:00PM
TH 9:30AM-6:00PM

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

Provider ID: 206362

Provider Gender: Male

License Number: A113001

NPI: 1225231582

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL,


GROSSMONT HOSPITAL, TRI
CITY MEDICAL CTR

Board Certified Specialty: No
Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424


 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:30AM-5:30PM
F 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA

Provider ID: 402851

Provider Gender: Female

License Number: A163464

NPI: 1326531401

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp


Grossmont Hospital

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-BEACH AREA

D2. Directorio de atención primaria

 3705 MISSION BLVD
SAN DIEGO, CA 92109
 Phone: (619) 515-2444
 After Hours Phone: (619)
515-2444
 Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Hours: M-W 8:30AM-5:30PM
TH 9:00AM-6:00PM
F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY


CHAKRABARTI, PRIYA

Provider ID: 402851
Provider Gender: Female
License Number: A163464
NPI: 1326531401
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, Sharp
Grossmont Hospital
Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-BEACH AREA

 3705 MISSION BLVD
SAN DIEGO, CA 92109
 Phone: (619) 515-2444
 After Hours Phone: (619)
515-2444
 Website: www.fhcsd.org
Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-W 8:30AM-5:30PM
TH 9:00AM-6:00PM
F 8:30AM-5:30PM




OBSTETRICS / GYNECOLOGY


CHAKRABARTI, PRIYA

Provider ID: 206360
Provider Gender: Female
License Number: A163464
NPI: 1326531401
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, Sharp
Grossmont Hospital
Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER




OBSTETRICS / GYNECOLOGY


CHAKRABARTI, PRIYA

Provider ID: 416831
Provider Gender: Female
License Number: A163464
NPI: 1326531401
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, Sharp
Grossmont Hospital
Board Certified Specialty: No
Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3514 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org
Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
Hours: M-TH 8:00AM-5:00PM



OBSTETRICS / GYNECOLOGY


CHAKRABARTI, PRIYA

Provider ID: 416831
Provider Gender: Female
License Number: A163464
NPI: 1326531401
 Provider English Spoken: Y


D2. Directorio de atención primaria

 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, Sharp
Grossmont Hospital
Board Certified Specialty: No
Family Health Centers of San
Diego
NORTH PARK FAMILY HEALTH
CENTERS

 3514 30TH ST
SAN DIEGO, CA 92104
 *Phone: (619) 515-2424*
 *After Hours Phone: (619)*
515-2424

 *Website: www.fhcsd.org*
Email: jenanm@fhcsd.org



Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER
Hours: M-TH 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY


CHAKRABARTI, PRIYA

Provider ID: 206363
Provider Gender: Female
License Number: A163464
NPI: 1326531401

 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, Sharp
Grossmont Hospital
Board Certified Specialty: No
Family Health Centers of San

Diego
DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102
 *Phone: (619) 515-2560*
 *After Hours Phone: (619)*
515-2560

 *Website: www.fhcsd.org*
Email: nancyl@fhcsd.org



Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA


Provider ID: 206363
Provider Gender: Female
License Number: A163464
NPI: 1326531401


 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, Sharp
Grossmont Hospital
Board Certified Specialty: No
Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102
 *Phone: (619) 515-2560*
 *After Hours Phone: (619)*
515-2560



 *Website: www.fhcsd.org*
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER

OBSTETRICS / GYNECOLOGY




CHAKRABARTI, PRIYA


Provider ID: 206360
Provider Gender: Female
License Number: A163464
NPI: 1326531401

 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, Sharp
Grossmont Hospital
Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 *Phone: (619) 515-2300*
 *After Hours Phone: (619)*
515-2300

 *Website: www.fhcsd.org*
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS

D2. Directorio de atención primaria

Provider ID: 206363

Provider Gender: Male

License Number: A108228

NPI: 1629277322


Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560


 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS

Provider ID: 206363

Provider Gender: Male

License Number: A108228

NPI: 1629277322


Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No


Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS

Provider ID: 416831

Provider Gender: Male

License Number: A108228

NPI: 1629277322


Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3514 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org
Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS

Provider ID: 206360

Provider Gender: Male

License Number: A108228

NPI: 1629277322


Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS

Provider ID: 206360

Provider Gender: Male

License Number: A108228

NPI: 1629277322


Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San Diego



LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300


 After Hours Phone: (619)

D2. Directorio de atención primaria

515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS


Provider ID: 402851
Provider Gender: Male
License Number: A108228
NPI: 1629277322
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SAN DIEGO-BEACH AREA

 3705 MISSION BLVD
SAN DIEGO, CA 92109
 Phone: (619) 515-2444
 After Hours Phone: (619) 515-2444
 Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS

Provider ID: 402851
Provider Gender: Male

License Number: A108228
NPI: 1629277322
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SAN DIEGO-BEACH AREA



 3705 MISSION BLVD
SAN DIEGO, CA 92109
 Phone: (619) 515-2444
 After Hours Phone: (619) 515-2444
 Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS



Provider ID: 416831
Provider Gender: Male
License Number: A108228
NPI: 1629277322
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
NORTH PARK FAMILY HEALTH CENTERS

 3514 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424

 Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY

Provider ID: 402851
Provider Gender: Female
License Number: A178499
NPI: 1033613732
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SAN DIEGO-BEACH AREA
 3705 MISSION BLVD
SAN DIEGO, CA 92109
 Phone: (619) 515-2444
 After Hours Phone: (619) 515-2444
 Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

D2. Directorio de atención primaria

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY

Provider ID: 402851

Provider Gender: Female

License Number: A178499

NPI: 1033613732

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp

Grossmont Hospital


Board Certified Specialty: No


Family Health Centers of San
Diego

FAMILY HLTH CTR SAN

DIEGO-BEACH AREA

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619)
515-2444

 Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY

Provider ID: 206360

Provider Gender: Female

License Number: A178499

NPI: 1033613732

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp


Grossmont Hospital


Board Certified Specialty: No

Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY

Provider ID: 416831

Provider Gender: Female

License Number: A178499

NPI: 1033613732

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL, Sharp

Grossmont Hospital


Board Certified Specialty: No


Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3514 30TH ST

SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424


 Website: www.fhcsd.org

Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY

Provider ID: 416831

Provider Gender: Female

License Number: A178499

NPI: 1033613732

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL, Sharp

Grossmont Hospital


Board Certified Specialty: No


Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3514 30TH ST

SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

D2. Directorio de atención primaria

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY


DORUELO, ASHLEY

Provider ID: 206363

Provider Gender: Female

License Number: A178499

NPI: 1033613732

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp

Grossmont Hospital


Board Certified Specialty: No


Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org


Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY


DORUELO, ASHLEY

Provider ID: 206363

Provider Gender: Female

License Number: A178499

NPI: 1033613732

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp

Grossmont Hospital


Board Certified Specialty: No


Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY


DORUELO, ASHLEY

Provider ID: 206360

Provider Gender: Female

License Number: A178499

NPI: 1033613732

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp


Grossmont Hospital


Board Certified Specialty: No

Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

FOLCHTORRES-AGUIAR,

BEATRIZ


Provider ID: 206360

Provider Gender: Female

License Number: A148014

NPI: 1457794752

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Yue Chinese

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,

SCRIPPS MERCY HOSPITAL,

Sharp Grossmont Hospital,

SCRIPPS MERCY HOSPITAL






CHULA VISTA

Board Certified Specialty: No

Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER





D2. Directorio de atención primaria

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M 8:00AM-7:00PM
TU-TH 8:00AM-6:00PM
F 8:00AM-5:30PM
SA 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

FOLCHTORRES-AGUIAR, BEATRIZ




Provider ID: 206360
Provider Gender: Female
License Number: A148014
NPI: 1457794752
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Yue
Chinese
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
Sharp Grossmont Hospital,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
Family Health Centers of San
Diego
LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M 8:00AM-7:00PM
TU-TH 8:00AM-6:00PM
F 8:00AM-5:30PM
SA 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY


FOLCHTORRES-AGUIAR, BEATRIZ

Provider ID: 402851
Provider Gender: Female
License Number: A148014
NPI: 1457794752
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Yue
Chinese
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
Sharp Grossmont Hospital,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HLTH CTR SAN
DIEGO-BEACH AREA


 3705 MISSION BLVD
SAN DIEGO, CA 92109
 Phone: (619) 515-2444
 After Hours Phone: (619)
515-2444
 Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM


OBSTETRICS / GYNECOLOGY

FOLCHTORRES-AGUIAR, BEATRIZ

Provider ID: 402851
Provider Gender: Female
License Number: A148014
NPI: 1457794752
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Yue
Chinese
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
Sharp Grossmont Hospital,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
Family Health Centers of San
Diego
FAMILY HLTH CTR SAN
DIEGO-BEACH AREA
 3705 MISSION BLVD
SAN DIEGO, CA 92109
 Phone: (619) 515-2444

D2. Directorio de atención primaria

 After Hours Phone: (619) 515-2444

 Website: www.fhcsd.org
Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

GRANT, REBEKAH

Provider ID: 206360

Provider Gender: Female

License Number: C159737

NPI: 1326243833

Provider English Spoken: Y

Provider Language(s)

Spoken: French,
Portuguese, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, Sharp

Grossmont Hospital, SCRIPPS

MERCY HOSPITAL, RIVERSIDE

COMMUNITY HOSP, HOAG

HOSPITAL IRVINE


Board Certified Specialty: No


Family Health Centers of San Diego


LOGAN HEIGHTS FAMILY

HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

N

 Accessibility: CONTACT PROVIDER

Hours: M 8:00AM-7:00PM

TU-TH 8:00AM-6:00PM

F 8:00AM-5:30PM

SA 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

GRANT, REBEKAH

Provider ID: 206360

Provider Gender: Female

License Number: C159737

NPI: 1326243833

Provider English Spoken: Y

Provider Language(s)

Spoken: French,
Portuguese, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, Sharp

Grossmont Hospital, SCRIPPS

MERCY HOSPITAL, RIVERSIDE

COMMUNITY HOSP, HOAG

HOSPITAL IRVINE


Board Certified Specialty: No


Family Health Centers of San Diego


LOGAN HEIGHTS FAMILY

HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M 8:00AM-7:00PM

TU-TH 8:00AM-6:00PM

F 8:00AM-5:30PM

SA 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN

Provider ID: 206360

Provider Gender: Female

License Number: C174771

NPI: 1053392035

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp

Grossmont Hospital


Board Certified Specialty: No


Family Health Centers of San Diego


LOGAN HEIGHTS FAMILY

HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

D2. Directorio de atención primaria

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN

Provider ID: 206363

Provider Gender: Female

License Number: C174771

NPI: 1053392035

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No

Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619)
515-2560

Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN

Provider ID: 206363

Provider Gender: Female

License Number: C174771

NPI: 1053392035

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No

Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619)
515-2560

Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN

Provider ID: 206360

Provider Gender: Female

License Number: C174771

NPI: 1053392035

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No

Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY

HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN

Provider ID: 416831

Provider Gender: Female

License Number: C174771

NPI: 1053392035

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No

Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH
CENTERS

3514 30TH ST
SAN DIEGO, CA 92104

Phone: (619) 515-2424

After Hours Phone: (619)
515-2424

Website: www.fhcsd.org

Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

D2. Directorio de atención primaria

American Sign Language (ASL): Provider ID: 402851

N

 Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN

Provider ID: 416831

Provider Gender: Female

License Number: C174771

NPI: 1053392035

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, Sharp


Grossmont Hospital

Board Certified Specialty: No
Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3514 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN

Provider Gender: Female

License Number: C174771

NPI: 1053392035

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, Sharp


Grossmont Hospital

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-BEACH AREA

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619)
515-2444

 Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-W 8:30AM-5:30PM

TH 9:00AM-6:00PM

F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN

Provider ID: 402851

Provider Gender: Female

License Number: C174771

NPI: 1053392035

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, Sharp


Grossmont Hospital


Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-BEACH AREA

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619)
515-2444

 Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-W 8:30AM-5:30PM

TH 9:00AM-6:00PM

F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA

Provider ID: 402851

Provider Gender: Female

License Number: A72005

NPI: 1649208711

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP
CORONADO HOSP AND

HEALTHCARE CTR, SCRIPPS
MERCY HOSPITAL,

D2. Directorio de atención primaria

GROSSMONT HOSPITAL

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

3705 MISSION BLVD
SAN DIEGO, CA 92109

Phone: (619) 515-2444

After Hours Phone: (619) 515-2444

Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-W 8:30AM-5:00PM

TH 9:30AM-6:00PM

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA

Provider ID: 206362

Provider Gender: Female

License Number: A72005

NPI: 1649208711

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND

HEALTHCARE CTR, SCRIPPS

MERCY HOSPITAL,

GROSSMONT HOSPITAL

Board Certified Specialty: No

Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH

CENTERS

3544 30TH ST

SAN DIEGO, CA 92104

Phone: (619) 515-2424

After Hours Phone: (619) 515-2424

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-TH 8:30AM-5:30PM

F 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA

Provider ID: 402851

Provider Gender: Female

License Number: A72005

NPI: 1649208711

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND

HEALTHCARE CTR, SCRIPPS

MERCY HOSPITAL,

GROSSMONT HOSPITAL

Board Certified Specialty: No

Family Health Centers of San Diego

FAMILY HLTH CTR SAN

DIEGO-BEACH AREA

3705 MISSION BLVD

SAN DIEGO, CA 92109

Phone: (619) 515-2444

After Hours Phone: (619) 515-2444

Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-W 8:30AM-5:00PM

TH 9:30AM-6:00PM

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA

Provider ID: 416831

Provider Gender: Female

License Number: A72005

NPI: 1649208711

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND

HEALTHCARE CTR, SCRIPPS

MERCY HOSPITAL,

GROSSMONT HOSPITAL

Board Certified Specialty: No

Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

3514 30TH ST

SAN DIEGO, CA 92104

Phone: (619) 515-2424

After Hours Phone: (619) 515-2424

Website: www.fhcsd.org










Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

D2. Directorio de atención primaria

<p>N  <i>Accessibility: CONTACT PROVIDER</i></p>	<p><i>Provider ID: 416831</i> <i>Provider Gender: Female</i> <i>License Number: A72005</i> <i>NPI: 1649208711</i></p>	<p><i>Cultural Competency: N</i> <i>Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL</i> <i>Board Certified Specialty: No</i> <i>Family Health Centers of San Diego</i> <i>NORTH PARK FAMILY HEALTH CENTERS</i></p>
<p><u>OBSTETRICS / GYNECOLOGY</u> LIPSCHITZ, LISA <i>Provider ID: 206362</i> <i>Provider Gender: Female</i> <i>License Number: A72005</i> <i>NPI: 1649208711</i></p>	<p><input type="checkbox"/> <i>Provider English Spoken: Y</i> <input type="checkbox"/> <i>Provider Language(s) Spoken: Spanish</i> <i>Cultural Competency: N</i> <i>Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL</i> <i>Board Certified Specialty: No</i> <i>Family Health Centers of San Diego</i> <i>NORTH PARK FAMILY HEALTH CENTERS</i></p>	<p> 3544 30TH ST SAN DIEGO, CA 92104  <i>Phone: (619) 515-2424</i>  <i>After Hours Phone: (619) 515-2424</i>  <i>Website: www.fhcsd.org</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\150</i> <i>American Sign Language (ASL):</i></p>
<p><i>Board Certified Specialty: No</i> <i>Family Health Centers of San Diego</i> <i>NORTH PARK FAMILY HEALTH CENTERS</i></p>	<p> 3514 30TH ST SAN DIEGO, CA 92104  <i>Phone: (619) 515-2424</i>  <i>After Hours Phone: (619) 515-2424</i>  <i>Website: www.fhcsd.org</i> <i>Email: jenanm@fhcsd.org</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\18</i> <i>American Sign Language (ASL):</i></p>	<p>N  <i>Accessibility: CONTACT PROVIDER</i> <i>Hours: M-TH 8:30AM-5:30PM</i> <i>F 8:30AM-5:00PM</i></p>
<p><i>American Sign Language (ASL):</i></p>	<p><u>OBSTETRICS / GYNECOLOGY</u> LIPSCHITZ, LISA <i>Provider ID: 206362</i> <i>Provider Gender: Female</i> <i>License Number: A72005</i> <i>NPI: 1649208711</i></p>	<p><u>OBSTETRICS / GYNECOLOGY</u> LIPSCHITZ, LISA <i>Provider ID: 206362</i> <i>Provider Gender: Female</i> <i>License Number: A72005</i> <i>NPI: 1649208711</i></p>
<p>N  <i>Accessibility: CONTACT PROVIDER</i> <i>Hours: M-TH 8:30AM-5:30PM</i> <i>F 8:30AM-5:00PM</i></p>	<p><input type="checkbox"/> <i>Provider English Spoken: Y</i> <input type="checkbox"/> <i>Provider Language(s) Spoken: Spanish</i> <i>Cultural Competency: N</i> <i>Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL</i></p>	<p><input type="checkbox"/> <i>Provider English Spoken: Y</i> <input type="checkbox"/> <i>Provider Language(s) Spoken: Spanish</i> <i>Cultural Competency: N</i> <i>Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL</i></p>
<p><u>OBSTETRICS / GYNECOLOGY</u> LIPSCHITZ, LISA</p>	<p><input type="checkbox"/> <i>Provider English Spoken: Y</i> <input type="checkbox"/> <i>Provider Language(s) Spoken: Spanish</i></p>	

D2. Directorio de atención primaria

Board Certified Specialty: No
Family Health Centers of San Diego
NORTH PARK FAMILY HEALTH CENTERS

3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER
Hours: M-TH 8:30AM-5:30PM
F 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY **LIPSCHITZ, LISA**

Provider ID: 206360
Provider Gender: Female
License Number: A72005
NPI: 1649208711
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL
Board Certified Specialty: No
Family Health Centers of San Diego
LOGAN HEIGHTS FAMILY HEALTH CENTER
1809 NATIONAL AVE

SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA
Provider ID: 206363
Provider Gender: Female
License Number: A72005
NPI: 1649208711
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL
Board Certified Specialty: No
Family Health Centers of San Diego
DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY **LIPSCHITZ, LISA**

Provider ID: 206363
Provider Gender: Female
License Number: A72005
NPI: 1649208711
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL
Board Certified Specialty: No
Family Health Centers of San Diego
DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER

D2. Directorio de atención primaria

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA

Provider ID: 206360

Provider Gender: Female

License Number: A72005

NPI: 1649208711

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND
HEALTHCARE CTR, SCRIPPS
MERCY HOSPITAL,

GROSSMONT HOSPITAL

Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON

Provider ID: 206360

Provider Gender: Female

License Number: A116680

NPI: 1700073962

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-7:00PM

TU-TH 8:00AM-6:00PM

F 8:00AM-5:30PM

SA 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON

Provider ID: 206363

Provider Gender: Female

License Number: A116680

NPI: 1700073962

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No
Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619)
515-2560

Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON

Provider ID: 206363

Provider Gender: Female

License Number: A116680

NPI: 1700073962

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,

D2. Directorio de atención primaria

SCRIPPS MERCY HOSPITAL CHULA VISTA

Board Certified Specialty: No
Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560

Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON

Provider ID: 206360
Provider Gender: Female
License Number: A116680
NPI: 1700073962

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY

HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M 8:00AM-7:00PM
TU-TH 8:00AM-6:00PM
F 8:00AM-5:30PM
SA 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON

Provider ID: 206362
Provider Gender: Female
License Number: A116680
NPI: 1700073962

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No
Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

3544 30TH ST
SAN DIEGO, CA 92104

Phone: (619) 515-2424
After Hours Phone: (619) 515-2424

Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON

Provider ID: 416831
Provider Gender: Female
License Number: A116680
NPI: 1700073962

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No
Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

3514 30TH ST
SAN DIEGO, CA 92104


Phone: (619) 515-2424
After Hours Phone: (619) 515-2424

Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18

American Sign Language (ASL):

D2. Directorio de atención primaria

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON

Provider ID: 206362

Provider Gender: Female

License Number: A116680

NPI: 1700073962

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation:


GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No
Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON

Provider ID: 206362

Provider Gender: Female

License Number: A116680

NPI: 1700073962

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation:


GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA


Board Certified Specialty: No
Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON

Provider ID: 416831

Provider Gender: Female

License Number: A116680

NPI: 1700073962

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:


GROSSMONT HOSPITAL,


SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No
Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3514 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON

Provider ID: 402851

Provider Gender: Female

License Number: A116680

NPI: 1700073962

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN

D2. Directorio de atención primaria


DIEGO-BEACH AREA

 3705 MISSION BLVD
SAN DIEGO, CA 92109
 Phone: (619) 515-2444
 After Hours Phone: (619)
515-2444
 Website: www.fhcsd.org
Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY


LOEFFLER, ALLISON

Provider ID: 402851

Provider Gender: Female

License Number: A116680

NPI: 1700073962

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-BEACH AREA

 3705 MISSION BLVD
SAN DIEGO, CA 92109
 Phone: (619) 515-2444
 After Hours Phone: (619)
515-2444
 Website: www.fhcsd.org
Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY


LOEFFLER, ALLISON

Provider ID: 206362

Provider Gender: Female

License Number: A116680

NPI: 1700073962

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish



Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No
Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

PHAN, TIFFANI

Provider ID: 417101

Provider Gender: Female

License Number: A161105

NPI: 1134515695

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP

CHULA VISTA MED CTR,

SCRIPPS MEMORIAL

HOSPITAL, SCRIPPS MERCY

HOSPITAL CHULA VISTA


Board Certified Specialty: No


Operation Samahan


OPERATION SAMAHAN - MIRA
MESA

 10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

 Phone: (844) 200-2426


 After Hours Phone: (844)
200-2426

 Website: [www.operationsa
mahan.org](http://www.operationsamahan.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

PHAN, TIFFANI

Provider ID: 417101

Provider Gender: Female





License Number: A161105

NPI: 1134515695

 Provider English Spoken: Y



D2. Directorio de atención primaria

 *Provider Language(s)*
Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP CHULA VISTA MED CTR, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
Operation Samahan
OPERATION SAMAHAN - MIRA MESA


 10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
 *Phone: (844) 200-2426*
 *After Hours Phone: (844) 200-2426*
 *Website: www.operationsamahan.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA





Provider ID: 402851
Provider Gender: Female
License Number: A164859
NPI: 1952751711
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Hindi
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No




Family Health Centers of San Diego
FAMILY HLTH CTR SAN DIEGO-BEACH AREA
 3705 MISSION BLVD
SAN DIEGO, CA 92109
 *Phone: (619) 515-2444*
 *After Hours Phone: (619) 515-2444*
 *Website: www.fhcsd.org*
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Hours: M-W 8:30AM-5:30PM
TH 9:00AM-6:00PM
F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA

Provider ID: 402851
Provider Gender: Female
License Number: A164859
NPI: 1952751711
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Hindi
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SAN DIEGO-BEACH AREA
 3705 MISSION BLVD
SAN DIEGO, CA 92109
 *Phone: (619) 515-2444*

 *After Hours Phone: (619) 515-2444*
 *Website: www.fhcsd.org*
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Hours: M-W 8:30AM-5:30PM
TH 9:00AM-6:00PM
F 8:30AM-5:30PM


OBSTETRICS / GYNECOLOGY

SAPRA, SONIA

Provider ID: 416831
Provider Gender: Female
License Number: A164859
NPI: 1952751711
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Hindi
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
Family Health Centers of San Diego
NORTH PARK FAMILY HEALTH CENTERS
 3514 30TH ST
SAN DIEGO, CA 92104
 *Phone: (619) 515-2424*
 *After Hours Phone: (619) 515-2424*
 *Website: www.fhcsd.org*
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL):

D2. Directorio de atención primaria

N

 *Accessibility: CONTACT PROVIDER*
Hours: M-TH 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY



SAPRA, SONIA

Provider ID: 416831

Provider Gender: Female

License Number: A164859

NPI: 1952751711

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Hindi*


Cultural Competency: N


Hospital Affiliation: SCRIPPS MERCY HOSPITAL


Board Certified Specialty: No
Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

 *3514 30TH ST*
SAN DIEGO, CA 92104

 *Phone: (619) 515-2424*

 *After Hours Phone: (619) 515-2424*


 *Website: www.fhcsd.org*
Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-TH 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY


SAPRA, SONIA


Provider ID: 206360

Provider Gender: Female

License Number: A164859

NPI: 1952751711

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Hindi*


Cultural Competency: N


Hospital Affiliation: SCRIPPS MERCY HOSPITAL


Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 *1809 NATIONAL AVE*
SAN DIEGO, CA 92113

 *Phone: (619) 515-2300*

 *After Hours Phone: (619) 515-2300*

 *Website: www.fhcsd.org*
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

OBSTETRICS / GYNECOLOGY


SAPRA, SONIA

Provider ID: 206363

Provider Gender: Female

License Number: A164859

NPI: 1952751711

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Hindi*

Cultural Competency: N


Hospital Affiliation: SCRIPPS MERCY HOSPITAL


Board Certified Specialty: No
Family Health Centers of San


Diego

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

 *4725 MARKET ST*
SAN DIEGO, CA 92102

 *Phone: (619) 515-2560*

 *After Hours Phone: (619) 515-2560*

 *Website: www.fhcsd.org*
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA


Provider ID: 206363

Provider Gender: Female

License Number: A164859

NPI: 1952751711

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Hindi*


Cultural Competency: N


Hospital Affiliation: SCRIPPS MERCY HOSPITAL


Board Certified Specialty: No
Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

 *4725 MARKET ST*
SAN DIEGO, CA 92102

 *Phone: (619) 515-2560*

 *After Hours Phone: (619) 515-2560*

 *Website: www.fhcsd.org*
Email: nancyl@fhcsd.org


Medi-Cal Open Panel: Yes

D2. Directorio de atención primaria

Min/Max Age: 0\150

American Sign Language (ASL): N

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY


SAPRA, SONIA


Provider ID: 206360

Provider Gender: Female

License Number: A164859

NPI: 1952751711

 Provider English Spoken: Y

 Provider Language(s) Spoken: Hindi

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL


Board Certified Specialty: No


Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY


STABEN, REBECCA

Provider ID: 206363

Provider Gender: Female

License Number: 20A13958

NPI: 1932269198

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: Sharp


Grossmont Hospital


Board Certified Specialty: No

Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619) 515-2560

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY


STABEN, REBECCA

Provider ID: 206363

Provider Gender: Female

License Number: 20A13958

NPI: 1932269198

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: Sharp


Grossmont Hospital


Board Certified Specialty: No

Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619) 515-2560

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA

Provider ID: 206360

Provider Gender: Female

License Number: 20A13958

NPI: 1932269198

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: Sharp


Grossmont Hospital


Board Certified Specialty: No


Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

N

 Accessibility: CONTACT

D2. Directorio de atención primaria

<i>PROVIDER</i>	<i>Board Certified Specialty: No</i>	<i>Email: jenanm@fhcsd.org</i>
<u>OBSTETRICS / GYNECOLOGY</u>	<i>Family Health Centers of San Diego</i>	<i>Medi-Cal Open Panel: Yes</i>
STABEN, REBECCA	<i>NORTH PARK FAMILY HEALTH CENTERS</i>	<i>Min/Max Age: 0\18</i>
<i>Provider ID: 206360</i>	 3514 30TH ST	<i>American Sign Language (ASL): N</i>
<i>Provider Gender: Female</i>	SAN DIEGO, CA 92104	 <i>Accessibility: CONTACT PROVIDER</i>
<i>License Number: 20A13958</i>	 <i>Phone: (619) 515-2424</i>	<i>Hours: M-TH 8:00AM-5:00PM</i>
<i>NPI: 1932269198</i>	 <i>After Hours Phone: (619) 515-2424</i>	<u>OBSTETRICS / GYNECOLOGY</u>
 <i>Provider English Spoken: Y</i>	 <i>Website: www.fhcsd.org</i>	STABEN, REBECCA
<i>Cultural Competency: N</i>	<i>Email: jenanm@fhcsd.org</i>	<i>Provider ID: 402851</i>
<i>Hospital Affiliation: Sharp Grossmont Hospital</i>	<i>Medi-Cal Open Panel: Yes</i>	<i>Provider Gender: Female</i>
<i>Board Certified Specialty: No</i>	<i>Min/Max Age: 0\18</i>	<i>License Number: 20A13958</i>
<i>Family Health Centers of San Diego</i>	<i>American Sign Language (ASL): N</i>	<i>NPI: 1932269198</i>
<i>LOGAN HEIGHTS FAMILY HEALTH CENTER</i>	 <i>Accessibility: CONTACT PROVIDER</i>	 <i>Provider English Spoken: Y</i>
 1809 NATIONAL AVE	<i>Hours: M-TH 8:00AM-5:00PM</i>	<i>Cultural Competency: N</i>
SAN DIEGO, CA 92113	<u>OBSTETRICS / GYNECOLOGY</u>	<i>Hospital Affiliation: Sharp Grossmont Hospital</i>
 <i>Phone: (619) 515-2300</i>	STABEN, REBECCA	<i>Board Certified Specialty: No</i>
 <i>After Hours Phone: (619) 515-2300</i>	<i>Provider ID: 416831</i>	<i>Family Health Centers of San Diego</i>
 <i>Website: www.fhcsd.org</i>	<i>Provider Gender: Female</i>	<i>FAMILY HLTH CTR SAN DIEGO-BEACH AREA</i>
<i>Email: dalvarado@fhcsd.org</i>	<i>License Number: 20A13958</i>	 3705 MISSION BLVD
<i>Medi-Cal Open Panel: Yes</i>	<i>NPI: 1932269198</i>	SAN DIEGO, CA 92109
<i>Min/Max Age: 0\150</i>	 <i>Provider English Spoken: Y</i>	 <i>Phone: (619) 515-2444</i>
<i>American Sign Language (ASL): N</i>	<i>Cultural Competency: N</i>	 <i>After Hours Phone: (619) 515-2444</i>
 <i>Accessibility: CONTACT PROVIDER</i>	<i>Hospital Affiliation: Sharp Grossmont Hospital</i>	 <i>Website: www.fhcsd.org</i>
<u>OBSTETRICS / GYNECOLOGY</u>	<i>Board Certified Specialty: No</i>	<i>Email: sabay@fhcsd.org</i>
STABEN, REBECCA	<i>Family Health Centers of San Diego</i>	<i>Medi-Cal Open Panel: Yes</i>
<i>Provider ID: 416831</i>	<i>NORTH PARK FAMILY HEALTH CENTERS</i>	<i>Min/Max Age: 0\150</i>
<i>Provider Gender: Female</i>	 3514 30TH ST	<i>American Sign Language (ASL): N</i>
<i>License Number: 20A13958</i>	SAN DIEGO, CA 92104	 <i>Accessibility: CONTACT PROVIDER</i>
<i>NPI: 1932269198</i>	 <i>Phone: (619) 515-2424</i>	<i>Hours: M-W 8:30AM-5:30PM</i>
 <i>Provider English Spoken: Y</i>	 <i>After Hours Phone: (619) 515-2424</i>	<i>TH 9:00AM-6:00PM</i>
<i>Cultural Competency: N</i>	 <i>Website: www.fhcsd.org</i>	<i>F 8:30AM-5:30PM</i>
<i>Hospital Affiliation: Sharp Grossmont Hospital</i>		

D2. Directorio de atención primaria

OBSTETRICS / GYNECOLOGY


STABEN, REBECCA

Provider ID: 402851

Provider Gender: Female

License Number: 20A13958

NPI: 1932269198

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: Sharp

Grossmont Hospital


Board Certified Specialty: No


Family Health Centers of San Diego

FAMILY HLTH CTR SAN

DIEGO-BEACH AREA

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619)
515-2444

 Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-W 8:30AM-5:30PM

TH 9:00AM-6:00PM

F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY


TRUJILLO, JENNIFER

Provider ID: 451167

Provider Gender: Female

License Number: 20A8204

NPI: 1053407593

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SHARP CHULA VISTA

MED CTR


Board Certified Specialty: No


IHP of Southern Cal-PHP


KING CHAVEZ HEALTH

CENTER

 950 S EUCLID AVE
SAN DIEGO, CA 92114

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org
/clinics/king- chavez- healt
h- center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY


TRUJILLO, JENNIFER

Provider ID: 451167

Provider Gender: Female

License Number: 20A8204

NPI: 1053407593

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SHARP CHULA VISTA

MED CTR


Board Certified Specialty: No


IHP of Southern Cal-PHP


KING CHAVEZ HEALTH

CENTER

 950 S EUCLID AVE
SAN DIEGO, CA 92114

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org
/clinics/king- chavez- healt
h- center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

WINESBURG, JENNIFER

Provider ID: 206360

Provider Gender: Female

License Number: 20A11535

NPI: 1811162456

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP

CORONADO HOSP AND

HEALTHCARE CTR,

GROSSMONT HOSPITAL,

DESERT REGIONAL MED CTR

Board Certified Specialty: No


Family Health Centers of San


Diego

LOGAN HEIGHTS FAMILY

HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113


 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

D2. Directorio de atención primaria

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

WINESBURG, JENNIFER

Provider ID: 402851

Provider Gender: Female

License Number: 20A11535

NPI: 1811162456

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP

CORONADO HOSP AND

HEALTHCARE CTR,

GROSSMONT HOSPITAL,

DESERT REGIONAL MED CTR

Board Certified Specialty: No


Family Health Centers of San


Diego

FAMILY HLTH CTR SAN

DIEGO-BEACH AREA

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619)
515-2444

 Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-TH 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY

WINESBURG, JENNIFER

Provider ID: 402851

Provider Gender: Female

License Number: 20A11535

NPI: 1811162456

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP

CORONADO HOSP AND

HEALTHCARE CTR,

GROSSMONT HOSPITAL,

DESERT REGIONAL MED CTR

Board Certified Specialty: No


Family Health Centers of San


Diego

FAMILY HLTH CTR SAN

DIEGO-BEACH AREA

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619)
515-2444

 Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-TH 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY

WINESBURG, JENNIFER

Provider ID: 206360

Provider Gender: Female

License Number: 20A11535

NPI: 1811162456

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP

CORONADO HOSP AND

HEALTHCARE CTR,

GROSSMONT HOSPITAL,

DESERT REGIONAL MED CTR

Board Certified Specialty: No


Family Health Centers of San


Diego

LOGAN HEIGHTS FAMILY

HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 206360

Provider Gender: Male

License Number: G78814

D2. Directorio de atención primaria

NPI: 1699790634

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation:


GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA


Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300


 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 416831

Provider Gender: Male

License Number: G78814

NPI: 1699790634

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation:


GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA


Board Certified Specialty: No
Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3514 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org
Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 206362

Provider Gender: Male

License Number: G78814

NPI: 1699790634

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:


GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,


SCRIPPS MERCY HOSPITAL
CHULA VISTA


Board Certified Specialty: No
Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424


 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 416831

Provider Gender: Male

License Number: G78814

NPI: 1699790634

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA


Board Certified Specialty: No
Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH

D2. Directorio de atención primaria

CENTERS

 3514 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 206362

Provider Gender: Male

License Number: G78814

NPI: 1699790634

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N


Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No
Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)

515-2424

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 206362

Provider Gender: Male

License Number: G78814

NPI: 1699790634

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N


Hospital Affiliation:


GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA


Board Certified Specialty: No
Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 402851

Provider Gender: Male

License Number: G78814

NPI: 1699790634

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N


Hospital Affiliation:


GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA


Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-BEACH AREA

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619)
515-2444

 Website: www.fhcsd.org
Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

D2. Directorio de atención primaria

ZIEG, ALAN

Provider ID: 206362

Provider Gender: Male

License Number: G78814

NPI: 1699790634

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No
Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

3544 30TH ST
SAN DIEGO, CA 92104

Phone: (619) 515-2424

After Hours Phone: (619)
515-2424

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 402851

Provider Gender: Male

License Number: G78814

NPI: 1699790634

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO-BEACH AREA

3705 MISSION BLVD
SAN DIEGO, CA 92109

Phone: (619) 515-2444

After Hours Phone: (619)
515-2444

Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 206360

Provider Gender: Male

License Number: G78814

NPI: 1699790634

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 206363

Provider Gender: Male

License Number: G78814

NPI: 1699790634

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL

D2. Directorio de atención primaria

CHULA VISTA

Board Certified Specialty: No
Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560

Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 206363

Provider Gender: Male

License Number: G78814

NPI: 1699790634

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No
Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560
After Hours Phone: (619) 515-2560

Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):

N
Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

OPHTHALMOLOGY

NAJAFI, DAVID

Provider ID: 206360

Provider Gender: Male

License Number: A68124

NPI: 1396715991

Provider English Spoken: Y
Provider Language(s)
Spoken: Farsi, Persian,
Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL, SHARP MEMORIAL
HOSPITAL

Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300
After Hours Phone: (619) 515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):

N
Accessibility: CONTACT PROVIDER

Hours: M-TU 8:30AM-6:00PM
TH 8:30AM-6:00PM

F 8:30AM-5:00PM

SA 8:30AM-5:00PM

OPHTHALMOLOGY

NAJAFI, DAVID

Provider ID: 206360

Provider Gender: Male

License Number: A68124

NPI: 1396715991

Provider English Spoken: Y
Provider Language(s)
Spoken: Farsi, Persian,
Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL, SHARP MEMORIAL
HOSPITAL

Board Certified Specialty: No
Family Health Centers of San Diego


LOGAN HEIGHTS FAMILY HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

D2. Directorio de atención primaria

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): Provider Gender: Male

N

 Accessibility: CONTACT PROVIDER

Hours: M-TU 8:30AM-6:00PM

TH 8:30AM-6:00PM

F 8:30AM-5:00PM

SA 8:30AM-5:00PM

OPHTHALMOLOGY


SHAW, BLAKE

Provider ID: 206363

Provider Gender: Male

License Number: G61394

NPI: 1649206541

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San


Diego


DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619) 515-2560

 Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): NPI: 1649206541

N

 Accessibility: CONTACT PROVIDER

OPHTHALMOLOGY


SHAW, BLAKE

Provider ID: 206360

Provider Gender: Male

License Number: G61394

NPI: 1649206541

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San


Diego


LOGAN HEIGHTS FAMILY

HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): NPI: 1649206541

N

 Accessibility: CONTACT PROVIDER

Hours: M 8:30AM-7:30PM

TU-F 8:30AM-5:30PM

OPHTHALMOLOGY

SHAW, BLAKE

Provider ID: 206363

Provider Gender: Male

License Number: G61394

NPI: 1649206541

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San


Diego

DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619) 515-2560


 Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): NPI: 1649206541

N

 Accessibility: CONTACT PROVIDER

OPHTHALMOLOGY

SHAW, BLAKE

Provider ID: 206360

Provider Gender: Male

License Number: G61394

NPI: 1649206541

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San


Diego

LOGAN HEIGHTS FAMILY

HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

D2. Directorio de atención primaria

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M 8:30AM-7:30PM

TU-F 8:30AM-5:30PM

OPHTHALMOLOGY


ZABLIT, KARIM

Provider ID: 403583

Provider Gender: Male

License Number: A42127

NPI: 1083700538

 Provider English Spoken: Y

 Provider Language(s)
Spoken: French

Cultural Competency: N

Hospital Affiliation: SCRIPPS

GREEN HOSPITAL

Board Certified Specialty: No


IHP of Southern Cal-PHP


ST VINCENT DE PAUL VILLAGE


FAMILY HEALTH CENTER

 1501 IMPERIAL AVE

SAN DIEGO, CA 92101

 Phone: (619) 233-8500

 After Hours Phone: (619)
233-8500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-4:45PM

OPHTHALMOLOGY


ZABLIT, KARIM

Provider ID: 403583

Provider Gender: Male

License Number: A42127

NPI: 1083700538

 Provider English Spoken: Y

 Provider Language(s)
Spoken: French

Cultural Competency: N

Hospital Affiliation: SCRIPPS

GREEN HOSPITAL

Board Certified Specialty: No


IHP of Southern Cal-PHP


ST VINCENT DE PAUL VILLAGE


FAMILY HEALTH CENTER

 1501 IMPERIAL AVE

SAN DIEGO, CA 92101

 Phone: (619) 233-8500

 After Hours Phone: (619)
233-8500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-4:45PM

OTOLARYNGOLOGY


CRAWFORD, KAYVA

Provider ID: 206360

Provider Gender: Female

License Number: A165819

NPI: 1396241824

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego


LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE

SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OTOLARYNGOLOGY


CRAWFORD, KAYVA

Provider ID: 206360

Provider Gender: Female

License Number: A165819

NPI: 1396241824

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego


LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE

SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org


Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

D2. Directorio de atención primaria

American Sign Language (ASL):  N

 Accessibility: CONTACT PROVIDER

OTOLARYNGOLOGY


DAVIS, MORGAN

Provider ID: 206360

Provider Gender: Female

License Number: A181809

NPI: 1891359154

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300


 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OTOLARYNGOLOGY


DAVIS, MORGAN

Provider ID: 206360

Provider Gender: Female

License Number: A181809

NPI: 1891359154

 Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OTOLARYNGOLOGY


YOUSEF, ANDREW

Provider ID: 206360

Provider Gender: Male

License Number: A186426

NPI: 1275152662

 Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OTOLARYNGOLOGY

YOUSEF, ANDREW

Provider ID: 206360

Provider Gender: Male

License Number: A186426

NPI: 1275152662

 Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PEDIATRICS

ABELL, GEOFFREY

Provider ID: 27341

Provider Gender: Male

NPI: 1245256130

 Provider English Spoken: Y
Cultural Competency: N

D2. Directorio de atención primaria

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, PARADISE VALLEY
HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA,
SHARP MARY BIRCH HOSP
FOR WOMEN AND
NEWBORNS, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No
Rady Childrens Health Network
GEOFFREY A ABELL

292 EUCLID AVE STE 220
SAN DIEGO, CA 92114

Phone: (619) 262-8624

Fax: (619) 262-6639

After Hours Phone: (619)
262-8624

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

ABRAMSON, RACHEL

Provider ID: 185268

Provider Gender: Female

License Number: A104918

NPI: 1588707178

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS GREEN
HOSPITAL, SHARP CHULA

VISTA MED CTR

Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Phone: (619) 280-4213

After Hours Phone: (619)
280-4213

Website: www.lamaestra.or
g

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-6:00PM

SA 8:00AM-2:00PM

PEDIATRICS

ABRAMSON, RACHEL

Provider ID: 185268

Provider Gender: Female

License Number: A104918

NPI: 1588707178

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS GREEN
HOSPITAL, SHARP CHULA
VISTA MED CTR

Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC

INC

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Phone: (619) 280-4213

After Hours Phone: (619)
280-4213

Website: www.lamaestra.or
g

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM

PEDIATRICS

ADJAN, ROULA

Provider ID: 185268

Provider Gender: Female

License Number: A81682

NPI: 1992847263

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic, French,
Spanish

Cultural Competency: N

Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Phone: (619) 255-9155

Fax: (619) 749-5480

After Hours Phone: (619)
255-9155

Website: www.lamaestra.or
g

D2. Directorio de atención primaria

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PEDIATRICS

ADJAN, ROULA

Provider ID: 185268

Provider Gender: Female

License Number: A81682

NPI: 1992847263

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic, French,
Spanish


Cultural Competency: N

Board Certified Specialty: No

La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 255-9155

Fax: (619) 749-5480

 After Hours Phone: (619)
255-9155

 Website: www.lamaestra.org

Email:


aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PEDIATRICS

ADLOUNI, LOUBABA

Provider ID: 230441

Provider Gender: Female

NPI: 1669443685

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, PALOMAR HEALTH,
PALOMAR MEDICAL CENTER


Board Certified Specialty: No

Rady Childrens Health Network

LOUBABA A ADLOUNI

 16918 DOVE CANYON RD
STE 200

SAN DIEGO, CA 92127

 Phone: (858) 924-1960

Fax: (858) 924-1964

 After Hours Phone: (858)
924-1960

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

ALBINO, NICHOLAS

Provider ID: 416831

Provider Gender: Male

License Number: A179851

NPI: 1740843499

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO


Board Certified Specialty: No

Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3514 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-5:00PM

PEDIATRICS

ALBINO, NICHOLAS

Provider ID: 416831

Provider Gender: Male

License Number: A179851

NPI: 1740843499

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No

Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH

D2. Directorio de atención primaria

CENTERS

 3514 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL): License Number: A72833

N

 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-5:00PM

PEDIATRICS


ANDREE, GREGOR


Provider ID: 482070

Provider Gender: Male

License Number: A72833

NPI: 1467436063

 Provider English Spoken: Y

 Provider Language(s)
Spoken: German, Spanish


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 After Hours Phone: (858)
810-8700


 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM

TU 8:30AM-9:00PM

W-F 8:30AM-5:30PM

SA 9:00AM-4:00PM

PEDIATRICS


ANDREE, GREGOR


Provider ID: 482070

Provider Gender: Male

License Number: A72833

NPI: 1467436063

 Provider English Spoken: Y

 Provider Language(s)
Spoken: German, Spanish


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 After Hours Phone: (858)
810-8700


 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM

TU 8:30AM-9:00PM

W-F 8:30AM-5:30PM

SA 9:00AM-4:00PM

PEDIATRICS

ANDREE, GREGOR


Provider ID: 233532

Provider Gender: Male

License Number: A72833

NPI: 1467436063

 Provider English Spoken: Y

 Provider Language(s)
Spoken: German, Spanish

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP


MID-CITY COMMUNITY CLINIC

 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

 Phone: (619) 280-2058

 After Hours Phone: (619)
280-2058

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

ANDREE, GREGOR

Provider ID: 233532

Provider Gender: Male

License Number: A72833

NPI: 1467436063

 Provider English Spoken: Y

 Provider Language(s)
Spoken: German, Spanish

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

MID-CITY COMMUNITY CLINIC

 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

 Phone: (619) 280-2058

 After Hours Phone: (619)
280-2058


D2. Directorio de atención primaria

 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\22
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PEDIATRICS

ARCHAMBAULT, CHRISTIAN

Provider ID: 5589
Provider Gender: Male
NPI: 1992776918
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL, PALOMAR HEALTH, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, CHILDRENS HOSPITAL OF ORANGE COUNTY, PARADISE VALLEY HOSPITAL, PARADISE VALLEY HOSPITAL
Board Certified Specialty: No
Rady Childrens Health Network
CHRISTIAN F ARCHAMBAULT
 16918 DOVE CANYON RD STE 200
SAN DIEGO, CA 92127
 Phone: (858) 924-1960
Fax: (858) 924-1964
 After Hours Phone: (858) 924-1960
 Website: N/A

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM








PEDIATRICS

AWDYKOVYCH, MARTA

Provider ID: 206360
Provider Gender: Female
License Number: A44027
NPI: 1447265137
 Provider English Spoken: Y
 Provider Language(s) Spoken: Chinese, French, Spanish, Ukrainian
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL
Board Certified Specialty: No
Family Health Centers of San Diego
LOGAN HEIGHTS FAMILY HEALTH CENTER
 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER


PEDIATRICS

AWDYKOVYCH, MARTA

Provider ID: 206360
Provider Gender: Female
License Number: A44027
NPI: 1447265137
 Provider English Spoken: Y
 Provider Language(s) Spoken: Chinese, French, Spanish, Ukrainian
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL
Board Certified Specialty: No
Family Health Centers of San Diego
LOGAN HEIGHTS FAMILY HEALTH CENTER
 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PEDIATRICS

AYSON, NICOLE

Provider ID: 417429
Provider Gender: Female
License Number: A128091
NPI: 1013278704
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN

D2. Directorio de atención primaria

DIEGO

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE

1550 BROADWAY STE 2
SAN DIEGO, CA 92101

Phone: (619) 515-2525

After Hours Phone: (619) 515-2525

Website: www.fhcsd.org

Email: janeta@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

AYSON, NICOLE

Provider ID: 417429

Provider Gender: Female

License Number: A128091

NPI: 1013278704

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE

1550 BROADWAY STE 2
SAN DIEGO, CA 92101

Phone: (619) 515-2525

After Hours Phone: (619)

515-2525

Website: www.fhcsd.org

Email: janeta@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

AZIMI, AYSUN

Provider ID: 317194

Provider Gender: Female

NPI: 1710246160

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PARADISE VALLEY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA VISTA, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, RADY

CHILDRENS HOSPITAL SAN DIEGO, SHARP CHULA VISTA

MED CTR, COMMUNITY

REGIONAL MEDICAL CENTER-FRESNO, CLOVIS

COMMUNITY HOSPITAL, CLOVIS COMMUNITY

HOSPITAL

Board Certified Specialty: No
Rady Childrens Health Network
AYSUN AZIMI

292 EUCLID AVE STE 220
SAN DIEGO, CA 92114

Phone: (619) 262-8624

Fax: (619) 262-6639

After Hours Phone: (619)

262-8624

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

BONSU, BEMA

Provider ID: 227409

Provider Gender: Male

License Number: C55180

NPI: 1932106986

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN

DIEGO, UCSF BENIOFF

CHILDREN'S HOSPITAL

OAKLAND

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHC -

OCEAN VIEW

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

D2. Directorio de atención primaria

PEDIATRICS

BONSU, BEMA

Provider ID: 227409

Provider Gender: Male


License Number: C55180


NPI: 1932106986


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH CHC -
OCEAN VIEW

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS


CABARLO, JEHRIB


Provider ID: 206360

Provider Gender: Male

License Number: 20A8516

NPI: 1770661340

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Tagalog


Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS


CABARLO, JEHRIB


Provider ID: 206360

Provider Gender: Male

License Number: 20A8516

NPI: 1770661340

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Board Certified Specialty: No
Family Health Centers of San
Diego


LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE

SAN DIEGO, CA 92113

 Phone: (619) 515-2300


 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

CARSON, STEPHEN

Provider ID: 6735

Provider Gender: Male

NPI: 1780719872

 Provider English Spoken: Y

 Provider Language(s)
Spoken: French

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SHARP MEMORIAL
HOSPITAL, SCRIPPS MERCY
HOSPITAL, RADY CHILDRENS
HOSPITAL SAN DIEGO

Board Certified Specialty: Yes
Rady Childrens Health Network
STEPHEN H CARSON

 550 WASHINGTON ST STE
300

SAN DIEGO, CA 92103
 Phone: (619) 297-5437

Fax: (619) 297-4567

 After Hours Phone: (619)
297-5437

 Website: N/A


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

D2. Directorio de atención primaria

N

 **Accessibility: CONTACT PROVIDER**
Hours: M-TH 8:00AM-8:30PM
F 8:00AM-5:00PM
SA 8:00AM-2:00PM

PEDIATRICS

CASTELNOVI, CLAUDIA

Provider ID: 185268
Provider Gender: Female
License Number: A111170
NPI: 1417279324

 Provider English Spoken: Y
 Provider Language(s)
Spoken: French, Italian,
Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA
Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
 Phone: (619) 255-9155
 After Hours Phone: (619)
255-9155
 Website: www.lamaestra.org
g
Email:
aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

N

 **Accessibility: CONTACT PROVIDER**


PEDIATRICS

CASTELNOVI, CLAUDIA

Provider ID: 185268
Provider Gender: Female
License Number: A111170
NPI: 1417279324

 Provider English Spoken: Y
 Provider Language(s)
Spoken: French, Italian,
Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA
Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
 Phone: (619) 255-9155
 After Hours Phone: (619)
255-9155
 Website: www.lamaestra.org
g

Email:
aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):


N

 **Accessibility: CONTACT PROVIDER**


PEDIATRICS

CHEN, EILEEN


Provider ID: 606456
Provider Gender: Female
NPI: 1932660966

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Rady Childrens Health Network
EILEEN CHEN

 7910 FROST ST STE 400
SAN DIEGO, CA 92123

 Phone: (858) 495-0500
Fax: (858) 560-4279

 After Hours Phone: (858)
495-0500

 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):


N
 **Accessibility: CONTACT PROVIDER**

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

CHEN, JENNIFER



Provider ID: 206363
Provider Gender: Female
License Number: A141057
NPI: 1255785150

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Board Certified Specialty: No
Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560
 After Hours Phone: (619)
515-2560

D2. Directorio de atención primaria

 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

PEDIATRICS

CHEN, JENNIFER

Provider ID: 206363

Provider Gender: Female

License Number: A141057

NPI: 1255785150


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified Specialty: No
Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560


 After Hours Phone: (619) 515-2560

 Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

PEDIATRICS


CONE, STEPHANIE

Provider ID: 185268

Provider Gender: Female

License Number: A123929

NPI: 1437444858

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA


VISTA, RADY CHILDRENS


HOSPITAL SAN DIEGO

Board Certified Specialty: No
La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 255-9154

 After Hours Phone: (619) 255-9154

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM

PEDIATRICS

CONE, STEPHANIE

Provider ID: 185268

Provider Gender: Female

License Number: A123929

NPI: 1437444858

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA


VISTA, RADY CHILDRENS


HOSPITAL SAN DIEGO


Board Certified Specialty: No
La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 255-9154

 After Hours Phone: (619) 255-9154

 Website: www.lamaestra.org


Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM

PEDIATRICS

CORDES, WILLIAM


Provider ID: 206360

Provider Gender: Male

License Number: 20A15743

NPI: 1174942544

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

D2. Directorio de atención primaria

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL

Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-7:00PM

TU-TH 8:00AM-6:00PM

F 8:00AM-5:30PM

SA 8:00AM-5:00PM

PEDIATRICS

CORDES, WILLIAM

Provider ID: 206360

Provider Gender: Male

License Number: 20A15743

NPI: 1174942544

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL

Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY

HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-7:00PM

TU-TH 8:00AM-6:00PM

F 8:00AM-5:30PM

SA 8:00AM-5:00PM

PEDIATRICS

DIXON, SARAH

Provider ID: 482070

Provider Gender: Female

License Number: A137415

NPI: 1467751131

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN DIEGO FAMILY CARE

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 810-8700

After Hours Phone: (858)
810-8700

Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM

TU 8:30AM-8:30PM

W-F 8:30AM-5:30PM

SA 9:00AM-4:00PM

PEDIATRICS

DIXON, SARAH

Provider ID: 482070

Provider Gender: Female

License Number: A137415

NPI: 1467751131

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN DIEGO FAMILY CARE

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 810-8700

After Hours Phone: (858)
810-8700

Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM

TU 8:30AM-8:30PM

W-F 8:30AM-5:30PM




SA 9:00AM-4:00PM



PEDIATRICS

FISHMAN, ELENA

D2. Directorio de atención primaria

Provider ID: 524340
Provider Gender: Female
NPI: 1740249432
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Russian
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL ENCINITAS, RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL
Board Certified Specialty: No
Rady Childrens Health Network
ELENA FISHMAN

 11943 EL CAMINO REAL STE
210
SAN DIEGO, CA 92130
 Phone: (858) 793-1011
 After Hours Phone: (858)
793-1011

 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM



PEDIATRICS

FORTUNE, ERIN

Provider ID: 416831
Provider Gender: Male
License Number: A95577
NPI: 1801088422
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,
GROSSMONT HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego
NORTH PARK FAMILY HEALTH
CENTERS

 3514 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PEDIATRICS

FORTUNE, ERIN

Provider ID: 416831
Provider Gender: Male
License Number: A95577
NPI: 1801088422
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,
GROSSMONT HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego
NORTH PARK FAMILY HEALTH
CENTERS

 3514 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619)
515-2424
 Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PEDIATRICS

FORTUNE, ERIN


Provider ID: 206360
Provider Gender: Male
License Number: A95577
NPI: 1801088422
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,
GROSSMONT HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego
LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):



D2. Directorio de atención primaria

N

 **Accessibility: CONTACT PROVIDER**
Hours: M-F 9:00AM-5:00PM

PEDIATRICS

FORTUNE, ERIN


Provider ID: 206360
Provider Gender: Male
License Number: A95577
NPI: 1801088422
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL
Board Certified Specialty: No
Family Health Centers of San Diego
LOGAN HEIGHTS FAMILY HEALTH CENTER






 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 **Accessibility: CONTACT PROVIDER**
Hours: M-F 9:00AM-5:00PM

PEDIATRICS

FRIEDMAN, JAIME


Provider ID: 230500



Provider Gender: Female
NPI: 1144297961
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR HEALTH
Board Certified Specialty: No
Rady Childrens Health Network
JAIME B FRIEDMAN




 16918 DOVE CANYON RD
STE 200
SAN DIEGO, CA 92127
 Phone: (858) 924-1960
Fax: (858) 924-1964
 After Hours Phone: (858) 924-1960
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 **Accessibility: CONTACT PROVIDER**
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

GOGGIN, SAMANTHA

Provider ID: 185268
Provider Gender: Female
License Number: A163693
NPI: 1023506367
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
 Phone: (619) 255-9154

 After Hours Phone: (619) 255-9154
 Website: www.lamaestra.org
g
Email: aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 **Accessibility: CONTACT PROVIDER**
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

GOGGIN, SAMANTHA

Provider ID: 185268
Provider Gender: Female
License Number: A163693
NPI: 1023506367
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC INC
 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
 Phone: (619) 255-9154
 After Hours Phone: (619) 255-9154
 Website: www.lamaestra.org
g
Email: aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 **Accessibility: CONTACT PROVIDER**

D2. Directorio de atención primaria

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

GRAY, SARAH

Provider ID: 206360

Provider Gender: Female

License Number: A151631

NPI: 1508210311


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-7:00PM

TU-TH 8:30AM-6:00PM

F 8:30AM-5:30PM

SA 8:30AM-5:00PM

PEDIATRICS

GRAY, SARAH

Provider ID: 206360

Provider Gender: Female

License Number: A151631

NPI: 1508210311


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-7:00PM

TU-TH 8:30AM-6:00PM

F 8:30AM-5:30PM

SA 8:30AM-5:00PM

PEDIATRICS

GUPTA, VARSHA


Provider ID: 206360

Provider Gender: Female

License Number: A164889

NPI: 1891283214

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hindi, Spanish

Cultural Competency: N


Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO


Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

GUPTA, VARSHA


Provider ID: 206360

Provider Gender: Female

License Number: A164889

NPI: 1891283214

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hindi, Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

D2. Directorio de atención primaria


 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org




Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER

PEDIATRICS

HENDERSON, TREVOR

Provider ID: 58111
Provider Gender: Male
NPI: 1356449425
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SHARP MARY BIRCH HOSP
FOR WOMEN AND
NEWBORNS, RADY
CHILDRENS HOSPITAL SAN
DIEGO, ALVARADO HOSPITAL
LLC
Board Certified Specialty: No
Rady Childrens Health Network
TREVOR H HENDERSON

 6699 ALVARADO RD STE
2200
SAN DIEGO, CA 92120
 Phone: (619) 265-3400
Fax: (619) 265-3407
 After Hours Phone: (619)
265-3400

 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):

N



 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM


PEDIATRICS

HIBBS, NICOLE

Provider ID: 143979
Provider Gender: Female
NPI: 1164627832
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND, SCRIPPS MERCY
HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA
Board Certified Specialty: No
Rady Childrens Health Network
NICOLE M HIBBS

 550 WASHINGTON ST STE
300
SAN DIEGO, CA 92103
 Phone: (619) 297-5437
Fax: (619) 297-4567

 After Hours Phone: (619)
297-5437

 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-8:30PM
F 8:00AM-5:00PM
SA 8:00AM-2:00PM



PEDIATRICS

HOANG, VY


Provider ID: 161902
Provider Gender: Female
NPI: 1649575135

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SHARP MARY BIRCH HOSP
FOR WOMEN AND
NEWBORNS, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No
Rady Childrens Health Network
VY U HOANG

 6699 ALVARADO RD
SAN DIEGO, CA 92120
 Phone: (619) 265-3400
Fax: (619) 265-3407

 After Hours Phone: (619)
265-3400

 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

HORMOZDYARAN, SANAYA

Provider ID: 612398
Provider Gender: Female
NPI: 1750887634

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: Yes
Rady Childrens Health Network

D2. Directorio de atención primaria

SANAYA HORMOZDYARAN

2790 TRUXTUN RD STE
120A

SAN DIEGO, CA 92106

Phone: (619) 222-1253

Fax: (619) 222-1276

After Hours Phone: (619)
222-1253

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

PEDIATRICS

JORDAN, JAMIE

Provider ID: 237831

Provider Gender: Female

NPI: 1275762833

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP

MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,
RADY CHILDRENS HOSPITAL
SAN DIEGO

Board Certified Specialty: No
Rady Childrens Health Network

JAMIE M JORDAN

12036 SCRIPPS
HIGHLANDS DR STE 102
SAN DIEGO, CA 92131

Phone: (858) 566-4444

Fax: (858) 566-3321

After Hours Phone: (858)
566-4444

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): **PEDIATRICS**

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

JUAREZ, PATRICIA

Provider ID: 317641

Provider Gender: Female

NPI: 1205807229

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,
RADY CHILDRENS HOSPITAL
SAN DIEGO, SHARP
MEMORIAL HOSPITAL, UCSF
BENIOFF CHILDREN'S
HOSPITAL OAKLAND

Board Certified Specialty: No

Rady Childrens Health Network

PATRICIA P JUAREZ

7910 FROST ST STE 400
SAN DIEGO, CA 92123

Phone: (858) 495-0500

Fax: (858) 560-4279

After Hours Phone: (858)
495-0500

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

KARMAKAR, KANKA

Provider ID: 417101

Provider Gender: Female

License Number: C54941

NPI: 1972536654

Provider English Spoken: Y

Provider Language(s)
Spoken: Bengali, Hindi,
Polish, Spanish, Tagalog

Cultural Competency: N

Board Certified Specialty: No

Operation Samahan

OPERATION SAMAHAN - MIRA
MESA

10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

Phone: (844) 200-2426

After Hours Phone: (844)
200-2426

Website: www.operationsa
mahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TU 8:30AM-5:30PM

W 10:00AM-7:00PM

TH-F 8:30AM-5:30PM

PEDIATRICS

KARMAKAR, KANKA

Provider ID: 417101

Provider Gender: Female

License Number: C54941


NPI: 1972536654

Provider English Spoken: Y


Provider Language(s)

D2. Directorio de atención primaria

Spoken: Bengali, Hindi, Polish, Spanish, Tagalog
Cultural Competency: N
Board Certified Specialty: No
Operation Samahan
OPERATION SAMAHAN - MIRA MESA



 10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
 *Phone: (844) 200-2426*
 *After Hours Phone: (844) 200-2426*
 *Website: www.operationsamahan.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150






American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Hours: M-TU 8:30AM-5:30PM
W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM

PEDIATRICS


KESANAPALLI, DEEPTHI




Provider ID: 235069
Provider Gender: Female
NPI: 1487948584
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Telugu*
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS
Board Certified Specialty: No
Rady Childrens Health Network



DEEPTHI KESANAPALLI
 7910 FROST ST STE 335
SAN DIEGO, CA 92123
 *Phone: (858) 576-8010*
Fax: (858) 576-7391
 *After Hours Phone: (858) 576-8010*
 *Website: N/A*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Hours: M-TH 8:30AM-6:00PM
F 8:30AM-0:00PM

PEDIATRICS

LAWRIE, ALISA

Provider ID: 660912
Provider Gender: Female
NPI: 1407847908
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL
Board Certified Specialty: No
Rady Childrens Health Network
ALISA J LAWRIE



 550 WASHINGTON ST STE 300
SAN DIEGO, CA 92103
 *Phone: (619) 297-4567*
 *After Hours Phone: (619) 297-4567*





 *Website: N/A*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*

Hours: M-TH 8:00AM-8:00PM
F 8:00AM-5:00PM

PEDIATRICS

LE, NGUYEN

Provider ID: 44952
Provider Gender: Male
NPI: 1548308109
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish, Vietnamese*
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SHARP MEMORIAL HOSPITAL
Board Certified Specialty: No
Rady Childrens Health Network
NGUYEN L LE


 5507 EL CAJON BLVD STE B
SAN DIEGO, CA 92115
 *Phone: (619) 582-8814*
Fax: (619) 582-8813
 *After Hours Phone: (619) 582-8814*
 *Website: N/A*
Email: LANCLEMD@HOTMAIL.COM
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 *Accessibility: CONTACT*



D2. Directorio de atención primaria

PROVIDER
Hours: M-F 9:00AM-5:00PM

PEDIATRICS

LOPER, KAREN

Provider ID: 490610
Provider Gender: Female
NPI: 1619908936
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR
Board Certified Specialty: No
Rady Childrens Health Network
KAREN S LOPER

 550 WASHINGTON ST STE 300
SAN DIEGO, CA 92103
 Phone: (619) 297-5437
Fax: (619) 297-4567


 After Hours Phone: (619) 297-5437

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19


American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS


LUJAN, ARLEEN


Provider ID: 206360
Provider Gender: Female
License Number: A61687
NPI: 1760412431
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS


MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150


American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

PEDIATRICS

LUJAN, ARLEEN


Provider ID: 206360
Provider Gender: Female
License Number: A61687
NPI: 1760412431

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA VISTA

Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300


 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER

PEDIATRICS

MADANY, GEORGE

Provider ID: 318924
Provider Gender: Male
NPI: 1811968837

 Provider English Spoken: Y


 Provider Language(s) Spoken: Arabic, French, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MERCY
HOSPITAL CHULA VISTA

Board Certified Specialty: No
Rady Childrens Health Network
GEORGE H MADANY

 7910 FROST ST STE 400
SAN DIEGO, CA 92123

 Phone: (858) 495-0500
Fax: (858) 560-4279

 After Hours Phone: (858) 495-0500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT

D2. Directorio de atención primaria

PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

MAHENDRAN, SRIVIDYA

Provider ID: 482070

Provider Gender: Female

License Number: A92173

NPI: 1487843454

Provider English Spoken: Y

*Provider Language(s)
Spoken: Spanish*


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 *Phone: (858) 810-8700*

 *After Hours Phone: (858)
810-8700*


 *Website: www.sdfamilycare
.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

PEDIATRICS

MAHENDRAN, SRIVIDYA

Provider ID: 482070

Provider Gender: Female

License Number: A92173

NPI: 1487843454

Provider English Spoken: Y

*Provider Language(s)
Spoken: Spanish*


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 *Phone: (858) 810-8700*

 *After Hours Phone: (858)
810-8700*

 *Website: www.sdfamilycare
.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

PEDIATRICS

MANRIQUEZ-CASTILLO,

ERENDIRA

Provider ID: 185268

Provider Gender: Female

License Number: A75533

NPI: 1356397418

Provider English Spoken: Y

*Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

*Hospital Affiliation: VALLEY
CHILDRENS HOSPITAL, RADY*


*CHILDRENS HOSPITAL SAN
DIEGO*


Board Certified Specialty: No

La Maestra Family Clinic

*LA MAESTRA FAMILY CLINIC
INC*

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 *Phone: (619) 255-9155*

 *After Hours Phone: (619)
255-9155*

 *Website: www.lamaestra.or
g*

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

Hours: M-F 8:00AM-6:00PM

SA 8:00AM-2:00PM

PEDIATRICS

MANRIQUEZ-CASTILLO,

ERENDIRA

Provider ID: 185268

Provider Gender: Female

License Number: A75533

NPI: 1356397418

Provider English Spoken: Y

*Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

*Hospital Affiliation: VALLEY
CHILDRENS HOSPITAL, RADY*


*CHILDRENS HOSPITAL SAN
DIEGO*


Board Certified Specialty: No


La Maestra Family Clinic

*LA MAESTRA FAMILY CLINIC
INC*

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 *Phone: (619) 255-9155*

 *After Hours Phone: (619)
255-9155*

 *Website: www.lamaestra.or
g*

Email:

aschmaltz@lamaestra.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

D2. Directorio de atención primaria

American Sign Language (ASL): NPI: 1760916589

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM

PEDIATRICS

MARTINEZ-ANDREE, INGRID

Provider ID: 319049

Provider Gender: Female

NPI: 1205807203


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SHARP MEMORIAL
HOSPITAL

Board Certified Specialty: No
Rady Childrens Health Network


INGRID L MARTINEZ-ANDREE

 7910 FROST ST STE 400
SAN DIEGO, CA 92123

 Phone: (858) 495-0500

Fax: (858) 560-4279

 After Hours Phone: (858)
495-0500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM


PEDIATRICS

NGUYEN, JANICE

Provider ID: 416831

Provider Gender: Female

License Number: A157335

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Vietnamese


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3514 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-5:00PM

PEDIATRICS


NGUYEN, JANICE

Provider ID: 416831

Provider Gender: Female

License Number: A157335

NPI: 1760916589


 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3514 30TH ST

SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-5:00PM


PEDIATRICS

PARK, TARI

Provider ID: 237711

Provider Gender: Female

NPI: 1285669085

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Korean


Cultural Competency: N


Hospital Affiliation: SHARP

MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,
RADY CHILDRENS HOSPITAL
SAN DIEGO

Board Certified Specialty: No

Rady Childrens Health Network
TARI Y PARK

 12036 SCRIPPS
HIGHLANDS DR STE 102
SAN DIEGO, CA 92131

 Phone: (858) 566-4444

Fax: (858) 566-3321

 After Hours Phone: (858)
566-4444

 Website: N/A


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

D2. Directorio de atención primaria

N


 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM

PEDIATRICS


PARKER, SHERINE

Provider ID: 206360
Provider Gender: Female
License Number: G81658
NPI: 1477626513

Provider English Spoken: Y
 Provider Language(s) Spoken: Arabic, Spanish
Cultural Competency: N
Hospital Affiliation: GLENDALE ADVENTIST MED CTR, GLENDALE MEMORIAL HOSP AND HEALTH CTR, TRI CITY MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, VALLEY CHILDRENS HOSPITAL
Board Certified Specialty: No Family Health Centers of San Diego
LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 *Phone: (619) 515-2300*
 *After Hours Phone: (619) 515-2300*
 *Website: www.fhcsd.org*
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*





Hours: M 8:30AM-7:00PM
TU-TH 8:30AM-6:00PM
F 8:30AM-5:30PM
SA 8:30AM-5:00PM

PEDIATRICS

PARKER, SHERINE

Provider ID: 206360
Provider Gender: Female
License Number: G81658
NPI: 1477626513

Provider English Spoken: Y
 Provider Language(s) Spoken: Arabic, Spanish
Cultural Competency: N
Hospital Affiliation: GLENDALE ADVENTIST MED CTR, GLENDALE MEMORIAL HOSP AND HEALTH CTR, TRI CITY MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, VALLEY CHILDRENS HOSPITAL
Board Certified Specialty: No Family Health Centers of San Diego
LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 *Phone: (619) 515-2300*
 *After Hours Phone: (619) 515-2300*
 *Website: www.fhcsd.org*
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

N

 *Accessibility: CONTACT*

PROVIDER

Hours: M 8:30AM-7:00PM
TU-TH 8:30AM-6:00PM
F 8:30AM-5:30PM
SA 8:30AM-5:00PM

PEDIATRICS

PAVLOVICH, WENDY

Provider ID: 416831
Provider Gender: Female
License Number: A126181
NPI: 1740467299

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No Family Health Centers of San Diego
NORTH PARK FAMILY HEALTH CENTERS

 3514 30TH ST
SAN DIEGO, CA 92104
 *Phone: (619) 515-2424*
 *After Hours Phone: (619) 515-2424*
 *Website: www.fhcsd.org*
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL):

PEDIATRICS

PAVLOVICH, WENDY

Provider ID: 416831
Provider Gender: Female
License Number: A126181

D2. Directorio de atención primaria

NPI: 1740467299


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL


Board Certified Specialty: No
Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3514 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424


 Website: www.fhcsd.org

Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


PEDIATRICS

POWELL, STEPHANIE

Provider ID: 319033

Provider Gender: Female

NPI: 1720059744

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP


MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,
RADY CHILDRENS HOSPITAL
SAN DIEGO

Board Certified Specialty: No

Rady Childrens Health Network


STEPHANIE J POWELL

 7910 FROST ST STE 400
SAN DIEGO, CA 92123

 Phone: (858) 495-0500

Fax: (858) 560-4279

 After Hours Phone: (858)
495-0500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS


PRESKILL, CATALINA

Provider ID: 403583

Provider Gender: Female

License Number: G29879

NPI: 1598088759

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP


ST VINCENT DE PAUL VILLAGE

FAMILY HEALTH CENTER

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 Phone: (619) 233-8500

 After Hours Phone: (619)
233-8500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

PEDIATRICS

PRESKILL, CATALINA

Provider ID: 403583

Provider Gender: Female

License Number: G29879

NPI: 1598088759

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

ST VINCENT DE PAUL VILLAGE

FAMILY HEALTH CENTER

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 Phone: (619) 233-8500


 After Hours Phone: (619)
233-8500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

PEDIATRICS

RODRIGUEZ, ALDO


Provider ID: 451167

Provider Gender: Male

License Number: A134995

NPI: 1508209651

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Portuguese,
Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

D2. Directorio de atención primaria

MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP

KING CHAVEZ HEALTH CENTER

950 S EUCLID AVE
SAN DIEGO, CA 92114

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/king-chavez-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:00PM

PEDIATRICS

RODRIGUEZ, ALDO

Provider ID: 451167

Provider Gender: Male

License Number: A134995

NPI: 1508209651

Provider English Spoken: Y

Provider Language(s)
Spoken: Portuguese,
Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP

KING CHAVEZ HEALTH CENTER

950 S EUCLID AVE
SAN DIEGO, CA 92114



Phone: (619) 662-4100



After Hours Phone: (619)
662-4100



Website: www.syhealth.org/clinics/king-chavez-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:00PM

PEDIATRICS

RODRIGUEZ, JAVIER

Provider ID: 185268

Provider Gender: Male

License Number: A82639

NPI: 1013059385

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC INC

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Phone: (619) 255-9155

After Hours Phone: (619)
255-9155

Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N



Accessibility: CONTACT
PROVIDER

PEDIATRICS

RODRIGUEZ, JAVIER

Provider ID: 185268

Provider Gender: Male

License Number: A82639

NPI: 1013059385

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC INC

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Phone: (619) 255-9155

After Hours Phone: (619)
255-9155

Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

RUBENSTEIN, STUART

Provider ID: 521305

Provider Gender: Male

NPI: 1689633844

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

D2. Directorio de atención primaria

MEMORIAL HOSPITAL
ENCINITAS, RADY CHILDRENS
HOSPITAL SAN DIEGO,
SCRIPPS MEMORIAL
HOSPITAL, SHARP MEMORIAL
HOSPITAL

Board Certified Specialty: No
Rady Childrens Health Network
STUART I RUBENSTEIN

11943 EL CAMINO REAL STE
210
SAN DIEGO, CA 92130
Phone: (858) 793-1011
After Hours Phone: (858)
793-1011

Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

PEDIATRICS

SAMPATH, SRIVIDYA

Provider ID: 416831
Provider Gender: Female
License Number: A132576
NPI: 1275892754

Provider English Spoken: Y
Provider Language(s)
Spoken: French

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH

CENTERS

3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619)
515-2424

Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

PEDIATRICS

SAMPATH, SRIVIDYA

Provider ID: 416831
Provider Gender: Female
License Number: A132576
NPI: 1275892754

Provider English Spoken: Y
Provider Language(s)
Spoken: French

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619)
515-2424

Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM

PEDIATRICS

SEBSO, JODI

Provider ID: 416831
Provider Gender: Female
License Number: A103099
NPI: 1538484316

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619)
515-2424

Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS


SEBSO, JODI

Provider ID: 416831
Provider Gender: Female

D2. Directorio de atención primaria

License Number: A103099

NPI: 1538484316

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL


Board Certified Specialty: No
Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3514 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424


 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org
Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS


SEBSO, JODI

Provider ID: 206360

Provider Gender: Female

License Number: A103099

NPI: 1538484316

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL


Board Certified Specialty: No
Family Health Centers of San


Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

PEDIATRICS


SEBSO, JODI


Provider ID: 206360

Provider Gender: Female

License Number: A103099

NPI: 1538484316

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL


Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

PEDIATRICS

SELLERS, JAIME

Provider ID: 206360

Provider Gender: Female

License Number: A159494

NPI: 1720512015

 Provider English Spoken: Y

Cultural Competency: N


Hospital Affiliation: Sharp


Grossmont Hospital, RADY
CHILDRENS HOSPITAL SAN
DIEGO


Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

SELLERS, JAIME


D2. Directorio de atención primaria

Provider ID: 206360

Provider Gender: Female

License Number: A159494

NPI: 1720512015

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: Sharp


Grossmont Hospital, RADY
CHILDRENS HOSPITAL SAN
DIEGO


Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

SHENOY, ASHVIN

Provider ID: 232392

Provider Gender: Male

NPI: 1619262664


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PARADISE
VALLEY HOSPITAL, SHARP
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL


CHULA VISTA, SHARP MARY
BIRCH HOSP FOR WOMEN
AND NEWBORNS, SCRIPPS
MERCY HOSPITAL


Board Certified Specialty: No
Rady Childrens Health Network
ASHVIN B SHENOY

 292 EUCLID AVE STE 220
SAN DIEGO, CA 92114

 Phone: (619) 262-8624

Fax: (619) 262-6639

 After Hours Phone: (619)
262-8624

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS


SHETH, HASMUKH


Provider ID: 451167

Provider Gender: Male

License Number: A45942

NPI: 1396812236

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Gujarati, Hindi,
Urdu


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
KING CHAVEZ HEALTH
CENTER

 950 S EUCLID AVE
SAN DIEGO, CA 92114

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/king-chavez-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

SHETH, HASMUKH


Provider ID: 451167

Provider Gender: Male

License Number: A45942

NPI: 1396812236

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Gujarati, Hindi,
Urdu


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
KING CHAVEZ HEALTH
CENTER

 950 S EUCLID AVE
SAN DIEGO, CA 92114

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/king-chavez-health-center

D2. Directorio de atención primaria

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): Provider Gender: Female

N

 Accessibility: CONTACT PROVIDER


PEDIATRICS

SHIAU, NANCY

Provider ID: 40852

Provider Gender: Female

NPI: 1750352779

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

GROSSMONT HOSPITAL, RADY

CHILDRENS HOSPITAL SAN

DIEGO, SHARP MARY BIRCH

HOSP FOR WOMEN AND

NEWBORNS


Board Certified Specialty: No

Rady Childrens Health Network

NANCY H SHIAU

 6699 ALVARADO RD STE
2200

SAN DIEGO, CA 92120

 Phone: (619) 265-3400

Fax: (619) 265-3407

 After Hours Phone: (619)
265-3400


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS


SPITZER, MARSHA

Provider ID: 402851

Provider Gender: Female

License Number: A76785

NPI: 1851323315

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,

GROSSMONT HOSPITAL


Board Certified Specialty: No


Family Health Centers of San
Diego

FAMILY HLTH CTR SAN

DIEGO-BEACH AREA

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619)
515-2444

 Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PEDIATRICS


SPITZER, MARSHA

Provider ID: 402851

Provider Gender: Female

License Number: A76785

NPI: 1851323315

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,

GROSSMONT HOSPITAL


Board Certified Specialty: No


Family Health Centers of San
Diego

FAMILY HLTH CTR SAN

DIEGO-BEACH AREA

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619)
515-2444

 Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PEDIATRICS

SPITZER, MARSHA

Provider ID: 417429

Provider Gender: Female

License Number: A76785

NPI: 1851323315

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,

GROSSMONT HOSPITAL

Board Certified Specialty: No

Family Health Centers of San
Diego

FAMILY HLTH CTR SAN

DIEGO- CITY COLLEGE

 1550 BROADWAY STE 2

D2. Directorio de atención primaria

SAN DIEGO, CA 92101
Phone: (619) 515-2525
After Hours Phone: (619) 515-2525
Website: www.fhcsd.org
Email: janeta@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

PEDIATRICS

SPITZER, MARSHA

Provider ID: 417429
Provider Gender: Female
License Number: A76785
NPI: 1851323315
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE
1550 BROADWAY STE 2
SAN DIEGO, CA 92101
Phone: (619) 515-2525
After Hours Phone: (619) 515-2525
Website: www.fhcsd.org
Email: janeta@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

PEDIATRICS

SPITZER, MARSHA

Provider ID: 206360
Provider Gender: Female
License Number: A76785
NPI: 1851323315
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL
Board Certified Specialty: No
Family Health Centers of San Diego
LOGAN HEIGHTS FAMILY HEALTH CENTER
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

PEDIATRICS

SPITZER, MARSHA

Provider ID: 206360






Provider Gender: Female
License Number: A76785
NPI: 1851323315
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL
Board Certified Specialty: No
Family Health Centers of San Diego
LOGAN HEIGHTS FAMILY HEALTH CENTER
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER

PEDIATRICS

STUMP, CHARI


Provider ID: 587747
Provider Gender: Female
NPI: 1265968788
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL
Board Certified Specialty: No
Rady Childrens Health Network
CHARI D STUMP






D2. Directorio de atención primaria

 7910 FROST ST STE 400
SAN DIEGO, CA 92123
 Phone: (858) 495-0500
Fax: (858) 560-4279
 After Hours Phone: (858)
495-0500
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS


SUBRAMANIAN, RAMA

Provider ID: 662343
Provider Gender: Female
NPI: 1932593506
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Tamil
Cultural Competency: N
Board Certified Specialty: No
Rady Childrens Health Network
RAMA V SUBRAMANIAN


 11943 EL CAMINO REAL STE
210
SAN DIEGO, CA 92130
 Phone: (858) 793-1011
 After Hours Phone: (858)
793-1011
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

PEDIATRICS

SULEIMAN QAFITI, KHAWLA


Provider ID: 416831
Provider Gender: Female
License Number: A51318
NPI: 1659303121
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA
Board Certified Specialty: No
Family Health Centers of San
Diego
NORTH PARK FAMILY HEALTH
CENTERS

 3514 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619)
515-2424
 Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18






American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-TH 8:00AM-5:00PM

PEDIATRICS

SULEIMAN QAFITI, KHAWLA



Provider ID: 416831
Provider Gender: Female
License Number: A51318
NPI: 1659303121
 Provider English Spoken: Y

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA
Board Certified Specialty: No
Family Health Centers of San
Diego
NORTH PARK FAMILY HEALTH
CENTERS

 3514 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619)
515-2424
 Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-TH 8:00AM-5:00PM

PEDIATRICS

TAMAYO, MAITHE

Provider ID: 206360
Provider Gender: Female
License Number: A80504
NPI: 1487748430
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA
Board Certified Specialty: No
Family Health Centers of San

D2. Directorio de atención primaria

Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

TAMAYO, MAITHE

Provider ID: 356145

Provider Gender: Female

License Number: A80504

NPI: 1487748430

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No
Family Health Centers of San
Diego

SHERMAN HEIGHTS FAMILY
HLTH CTRS INC

2391 ISLAND AVE
SAN DIEGO, CA 92102

Phone: (619) 515-2435

After Hours Phone: (619)
515-2435

Website: N/A

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

TAMAYO, MAITHE

Provider ID: 356145

Provider Gender: Female

License Number: A80504

NPI: 1487748430

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No
Family Health Centers of San
Diego

SHERMAN HEIGHTS FAMILY
HLTH CTRS INC

2391 ISLAND AVE
SAN DIEGO, CA 92102

Phone: (619) 515-2435

After Hours Phone: (619)
515-2435

Website: N/A

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

TAMAYO, MAITHE

Provider ID: 206360

Provider Gender: Female

License Number: A80504

NPI: 1487748430

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

WASSON, MINA

Provider ID: 524333

Provider Gender: Female

NPI: 1366753022

Provider English Spoken: Y

Provider Language(s)

D2. Directorio de atención primaria

Spoken: Russian
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
Rady Childrens Health Network
MINA K WASSON
📍 11943 EL CAMINO REAL STE 210
SAN DIEGO, CA 92130
☎ *Phone: (858) 793-1011*
📞 *After Hours Phone: (858) 793-1011*
🌐 *Website: N/A*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
♿ *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM SA 8:00AM-0:00PM

PEDIATRICS

WATERS, ELIZABETH

Provider ID: 153090
Provider Gender: Female
NPI: 1730477621
📄 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, PARADISE VALLEY HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SCRIPPS MERCY HOSPITAL, RADY CHILDRENS HOSPITAL

SAN DIEGO
Board Certified Specialty: No
Rady Childrens Health Network
ELIZABETH J WATERS
📍 292 EUCLID AVE STE 220
SAN DIEGO, CA 92114
☎ *Phone: (619) 262-8624*
📞 *Fax: (619) 262-6639*
📞 *After Hours Phone: (619) 262-8624*
🌐 *Website: N/A*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
♿ *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

WEATHERLY, JACOB

Provider ID: 637376
Provider Gender: Male
NPI: 1538520457
📄 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: LUCILE SALTER PACKARD CHILDRENS HOSP, Stanford Health Care
Board Certified Specialty: No
Rady Childrens Health Network
JACOB A WEATHERLY
📍 6699 ALVARADO RD STE 2200
SAN DIEGO, CA 92120
☎ *Phone: (619) 265-3400*
📞 *Fax: (619) 265-3407*
📞 *After Hours Phone: (619) 265-3400*
🌐 *Website: N/A*
Medi-Cal Open Panel: Yes

Min/Max Age: 0\19
American Sign Language (ASL): N
♿ *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM SA 8:30AM-0:00PM

PEDIATRICS

WONG, YOLANDA

Provider ID: 482070
Provider Gender: Female
License Number: A94449
NPI: 1851599872
📄 *Provider English Spoken: Y*
📄 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN DIEGO FAMILY CARE
📍 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
☎ *Phone: (858) 810-8700*
📞 *After Hours Phone: (858) 810-8700*
🌐 *Website: www.sdfamilycare.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
♿ *Accessibility: CONTACT PROVIDER*
Hours: M 8:30AM-5:30PM TU 8:30AM-9:00PM W-F 8:30AM-5:30PM SA 9:00AM-4:00PM

D2. Directorio de atención primaria

PEDIATRICS


WONG, YOLANDA

Provider ID: 482070

Provider Gender: Female

License Number: A94449

NPI: 1851599872

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN DIEGO FAMILY CARE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 After Hours Phone: (858)
810-8700

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM

TU 8:30AM-9:00PM

W-F 8:30AM-5:30PM

SA 9:00AM-4:00PM

PEDIATRICS

WONG, YOLANDA

Provider ID: 233532

Provider Gender: Female

License Number: A94449

NPI: 1851599872

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Board Certified Specialty: No
IHP of Southern Cal-PHP

MID-CITY COMMUNITY CLINIC

 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

 Phone: (619) 280-2058

 After Hours Phone: (619)
280-2058

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

WONG, YOLANDA

Provider ID: 233532

Provider Gender: Female

License Number: A94449

NPI: 1851599872

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Board Certified Specialty: No
IHP of Southern Cal-PHP

MID-CITY COMMUNITY CLINIC

 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

 Phone: (619) 280-2058

 After Hours Phone: (619)
280-2058

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS


ZAHEER, AARON


Provider ID: 233532

Provider Gender: Male

License Number: A61238

NPI: 1902882301

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Persian, Spanish

Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Board Certified Specialty: No
IHP of Southern Cal-PHP

MID-CITY COMMUNITY CLINIC

 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

 Phone: (619) 280-2058

 After Hours Phone: (619)
280-2058

 Website: www.sdfamilycare.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL):

D2. Directorio de atención primaria

N

 *Accessibility: CONTACT PROVIDER*

PEDIATRICS



ZAHEER, AARON

Provider ID: 233532

Provider Gender: Male

License Number: A61238

NPI: 1902882301



 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Persian, Spanish*
Cultural Competency: N


Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified Specialty: No IHP of Southern Cal-PHP

MID-CITY COMMUNITY CLINIC

 *4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105*

 *Phone: (619) 280-2058*
 *After Hours Phone: (619) 280-2058*

 *Website: www.sdfamilycare.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

PEDIATRICS



ZAHEER, AARON

Provider ID: 482070

Provider Gender: Male

License Number: A61238



NPI: 1902882301

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Persian, Spanish*
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified Specialty: No IHP of Southern Cal-PHP SAN DIEGO FAMILY CARE

 *7011 LINDA VISTA RD
SAN DIEGO, CA 92111*

 *Phone: (858) 810-8700*
 *After Hours Phone: (858) 810-8700*

 *Website: www.sdfamilycare.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

PEDIATRICS



ZAHEER, AARON

Provider ID: 482070

Provider Gender: Male

License Number: A61238

NPI: 1902882301



 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Persian, Spanish*
Cultural Competency: N


Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified Specialty: No IHP of Southern Cal-PHP SAN DIEGO FAMILY CARE

 *7011 LINDA VISTA RD*

SAN DIEGO, CA 92111

 *Phone: (858) 810-8700*
 *After Hours Phone: (858) 810-8700*

 *Website: www.sdfamilycare.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

PEDIATRICS



ZAND, FARIBA

Provider ID: 206360

Provider Gender: Female

License Number: A46161

NPI: 1356373674



 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Farsi, Persian, Spanish*
Cultural Competency: N

Hospital Affiliation: MERCY GENERAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, UCSD MEDICAL CTR

Board Certified Specialty: No Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 *1809 NATIONAL AVE
SAN DIEGO, CA 92113*

 *Phone: (619) 515-2300*
 *After Hours Phone: (619) 515-2300*

 *Website: www.fhcsd.org*

D2. Directorio de atención primaria

Email: dalvarado@fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\150

American Sign Language (ASL):
 N

 Accessibility: CONTACT PROVIDER

PEDIATRICS


ZAND, FARIBA


Provider ID: 206360

Provider Gender: Female

License Number: A46161

NPI: 1356373674

 Provider English Spoken: Y

 Provider Language(s)
 Spoken: Farsi, Persian,
 Spanish


Cultural Competency: N


Hospital Affiliation: MERCY
 GENERAL HOSPITAL, RADY
 CHILDRENS HOSPITAL SAN
 DIEGO, SCRIPPS MERCY
 HOSPITAL, SCRIPPS MERCY
 HOSPITAL CHULA VISTA, UCSD
 MEDICAL CTR


Board Certified Specialty: No
 Family Health Centers of San
 Diego

LOGAN HEIGHTS FAMILY
 HEALTH CENTER

 1809 NATIONAL AVE
 SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
 515-2300

 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
 PROVIDER

PHYSICIANS ASSISTANT


ALVARADO, EDMUND

Provider ID: 419529

Provider Gender: Male

License Number: PA20888

NPI: 1720303340

 Provider English Spoken: Y

 Provider Language(s)
 Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
 Family Health Centers of San
 Diego


FAMILY HLTH CTR OF SD SAN
 DIEGO COMMERCIAL

 2325 COMMERCIAL ST STE
 1400

SAN DIEGO, CA 92113

 Phone: (619) 515-2422

 After Hours Phone: (619)
 515-2422

 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

Hours: M-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT

ALVARADO, EDMUND

Provider ID: 419529

Provider Gender: Male

License Number: PA20888

NPI: 1720303340

 Provider English Spoken: Y

 Provider Language(s)
 Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
 Family Health Centers of San
 Diego


FAMILY HLTH CTR OF SD SAN
 DIEGO COMMERCIAL

 2325 COMMERCIAL ST STE
 1400

SAN DIEGO, CA 92113

 Phone: (619) 515-2422

 After Hours Phone: (619)
 515-2422

 Website: www.fhcsd.org
 Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

Hours: M-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT

ARMENTA, JORGE

Provider ID: 185268

Provider Gender: Male

License Number: PA13694


NPI: 1346382611


 Provider English Spoken: Y
 Cultural Competency: N

Board Certified Specialty: No
 La Maestra Family Clinic

LA MAESTRA FAMILY CLINIC
 INC

 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105

 Phone: (619) 255-9155

 After Hours Phone: (619)
 255-9155

D2. Directorio de atención primaria

 Website: www.lamaestra.org SA 8:00AM-2:00PM

g
Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM

PHYSICIANS ASSISTANT

ARMENTA, JORGE

Provider ID: 185268

Provider Gender: Male


License Number: PA13694


NPI: 1346382611

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 255-9155

 After Hours Phone: (619)
255-9155

 Website: www.lamaestra.org
g

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-6:00PM

PHYSICIANS ASSISTANT


BATISTA, OSVALDO

Provider ID: 206360

Provider Gender: Male

License Number: PA17864

NPI: 1245349224

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT


BATISTA, OSVALDO

Provider ID: 206360

Provider Gender: Male

License Number: PA17864

NPI: 1245349224

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

BHAGAN, SHANNA

Provider ID: 206362

Provider Gender: Female

License Number: PA59874


NPI: 1437635943


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424


 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

D2. Directorio de atención primaria

N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

BHAGAN, SHANNA

Provider ID: 206362

Provider Gender: Female

License Number: PA59874

NPI: 1437635943

Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

BHAGAN, SHANNA

Provider ID: 206362

Provider Gender: Female

License Number: PA59874

NPI: 1437635943

Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH **CASTILLO, PATRICIA**
CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

BHAGAN, SHANNA

Provider ID: 206362

Provider Gender: Female

License Number: PA59874

NPI: 1437635943

Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

Provider ID: 206362





Provider Gender: Female

License Number: PA17220

NPI: 1376550657

Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

CASTILLO, PATRICIA

Provider ID: 206362



Provider Gender: Female

License Number: PA17220

NPI: 1376550657

Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424

D2. Directorio de atención primaria

☎ After Hours Phone: (619) 515-2424

🌐 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

CASTILLO, PATRICIA

Provider ID: 206362

Provider Gender: Female

License Number: PA17220

NPI: 1376550657

☐ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San

Diego

NORTH PARK FAMILY HEALTH
CENTERS

📍 3544 30TH ST
SAN DIEGO, CA 92104

☎ Phone: (619) 515-2424

☎ After Hours Phone: (619)
515-2424

🌐 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

CASTILLO, PATRICIA

Provider ID: 206362

Provider Gender: Female

License Number: PA17220

NPI: 1376550657

☐ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

📍 3544 30TH ST
SAN DIEGO, CA 92104

☎ Phone: (619) 515-2424

☎ After Hours Phone: (619)
515-2424

🌐 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

CHAN, TIFFANY

Provider ID: 206360

Provider Gender: Female

License Number: PA23258

NPI: 1790111607

☐ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San

Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

📍 1809 NATIONAL AVE
SAN DIEGO, CA 92113

☎ Phone: (619) 515-2300

☎ After Hours Phone: (619)
515-2300

🌐 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

CHAN, TIFFANY

Provider ID: 206360

Provider Gender: Female

License Number: PA23258

NPI: 1790111607

☐ Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San

Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

📍 1809 NATIONAL AVE
SAN DIEGO, CA 92113

☎ Phone: (619) 515-2300

☎ After Hours Phone: (619)
515-2300

🌐 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

CONDEZ, ESEL

Provider ID: 206360

Provider Gender: Male

License Number: PA53129

NPI: 1073978680

☐ Provider English Spoken: Y

D2. Directorio de atención primaria


Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT


CONDEZ, EDSSEL

Provider ID: 206360
Provider Gender: Male
License Number: PA53129
NPI: 1073978680
 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
LOGAN HEIGHTS FAMILY HEALTH CENTER
 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes


Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER


PHYSICIANS ASSISTANT

CONTRERAS, LORETTA

Provider ID: 403583
Provider Gender: Female
License Number: PA54617
NPI: 1679096341
 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101
 Phone: (619) 233-8500
 After Hours Phone: (619) 233-8500


 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM
TU-W 8:30AM-5:00PM
TH 8:30AM-9:00PM
F 8:30AM-5:00PM


PHYSICIANS ASSISTANT


CONTRERAS, LORETTA

Provider ID: 403583
Provider Gender: Female
License Number: PA54617
NPI: 1679096341

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER


 1501 IMPERIAL AVE
SAN DIEGO, CA 92101
 Phone: (619) 233-8500
 After Hours Phone: (619) 233-8500




 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM
TU-W 8:30AM-5:00PM
TH 8:30AM-9:00PM
F 8:30AM-5:00PM



PHYSICIANS ASSISTANT

DAVID, MARVIC

Provider ID: 206360
Provider Gender: Male
License Number: PA53748
NPI: 1750832317
 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
LOGAN HEIGHTS FAMILY HEALTH CENTER


 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300

D2. Directorio de atención primaria

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 9:00AM-5:00PM

PHYSICIANS ASSISTANT

DAVID, MARVIC



Provider ID: 206360
Provider Gender: Male
License Number: PA53748
NPI: 1750832317
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 9:00AM-5:00PM






PHYSICIANS ASSISTANT

DRAME, SALWA

Provider ID: 417987



Provider Gender: Female
License Number: PA59481
NPI: 1093136426
 Provider English Spoken: Y
 Provider Language(s)
Spoken: French, Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HEALTH CTR IBARRA

 4874 POLK AVE
SAN DIEGO, CA 92105
 Phone: (619) 515-2426
 After Hours Phone: (619)
515-2426
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER



PHYSICIANS ASSISTANT

DRAME, SALWA

Provider ID: 417987
Provider Gender: Female
License Number: PA59481
NPI: 1093136426
 Provider English Spoken: Y
 Provider Language(s)
Spoken: French, Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego


FAMILY HEALTH CTR IBARRA

 4874 POLK AVE
SAN DIEGO, CA 92105
 Phone: (619) 515-2426
 After Hours Phone: (619)

515-2426
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

FINK, PATRICK

Provider ID: 402851
Provider Gender: Male
License Number: PA52704
NPI: 1922380328
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

 3705 MISSION BLVD
SAN DIEGO, CA 92109
 Phone: (619) 515-2444
 After Hours Phone: (619)
515-2444
 Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-W 8:30AM-5:30PM
TH 9:00AM-6:00PM
F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

FINK, PATRICK

D2. Directorio de atención primaria

Provider ID: 402851

Provider Gender: Male

License Number: PA52704


NPI: 1922380328


Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619) 515-2444

 Website: www.fhcsd.org

Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Hours: M-W 8:30AM-5:30PM

TH 9:00AM-6:00PM

F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

GARCIA, DEANA

Provider ID: 416831

Provider Gender: Female

License Number: PA21042

NPI: 1447567995


Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH

CENTERS

 3514 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619) 515-2424

 Website: www.fhcsd.org

Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

GARCIA, DEANA

Provider ID: 416831

Provider Gender: Female

License Number: PA21042


NPI: 1447567995


Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

NORTH PARK FAMILY HEALTH CENTERS

 3514 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619) 515-2424

 Website: www.fhcsd.org

Email: jenanm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

HOXMEIER, KRISTA

Provider ID: 418142

Provider Gender: Female

License Number: PA58505

NPI: 1104203454


Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HEALTH CTR SAN DIEGO-OAK PARK

 5160 FEDERAL BLVD
SAN DIEGO, CA 92105

 Phone: (619) 515-2454

 After Hours Phone: (619) 515-2454

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

HOXMEIER, KRISTA

Provider ID: 418142

Provider Gender: Female

License Number: PA58505

NPI: 1104203454

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San

D2. Directorio de atención primaria

Diego

FAMILY HEALTH CTR SAN
DIEGO-OAK PARK

5160 FEDERAL BLVD
SAN DIEGO, CA 92105

Phone: (619) 515-2454

After Hours Phone: (619)
515-2454

Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

HOXMEIER, KRISTA

Provider ID: 206363

Provider Gender: Female

License Number: PA58505

NPI: 1104203454

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San

Diego

DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619)
515-2560

Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

HOXMEIER, KRISTA

Provider ID: 206363

Provider Gender: Female

License Number: PA58505

NPI: 1104203454

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San

Diego

DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619)
515-2560

Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

LANDIS, SARAH

Provider ID: 417782

Provider Gender: Female

License Number: PA58826

NPI: 1144733676

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No
Family Health Centers of San
Diego

DOWNTOWN FAMILY CTR AT
CONNECTIONS

1250 6TH AVE STE 100
SAN DIEGO, CA 92101

Phone: (619) 515-2430

After Hours Phone: (619)
515-2430

Website: www.fhcsd.org

Email: jinah@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT

LANDIS, SARAH

Provider ID: 417782

Provider Gender: Female

License Number: PA58826

NPI: 1144733676

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No
Family Health Centers of San
Diego

DOWNTOWN FAMILY CTR AT
CONNECTIONS

1250 6TH AVE STE 100
SAN DIEGO, CA 92101

Phone: (619) 515-2430


After Hours Phone: (619)

D2. Directorio de atención primaria

515-2430
 Website: www.fhcsd.org
Email: jinah@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT

LAPINA, LORI

Provider ID: 206362
Provider Gender: Female
License Number: PA23231
NPI: 1245670413
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
NORTH PARK FAMILY HEALTH CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-TH 8:30AM-5:30PM
F 8:00AM-5:00PM

PHYSICIANS ASSISTANT

LAPINA, LORI

Provider ID: 206362
Provider Gender: Female
License Number: PA23231
NPI: 1245670413
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
NORTH PARK FAMILY HEALTH CENTERS



 3544 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-TH 8:30AM-5:30PM
F 8:00AM-5:00PM

PHYSICIANS ASSISTANT

LAPINA, LORI


Provider ID: 206362
Provider Gender: Female
License Number: PA23231
NPI: 1245670413
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
NORTH PARK FAMILY HEALTH CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-TH 8:30AM-5:30PM
F 8:00AM-5:00PM

PHYSICIANS ASSISTANT

LAPINA, LORI

Provider ID: 206362
Provider Gender: Female
License Number: PA23231
NPI: 1245670413
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
NORTH PARK FAMILY HEALTH CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-TH 8:30AM-5:30PM
F 8:00AM-5:00PM

D2. Directorio de atención primaria

PHYSICIANS ASSISTANT

LAPINA, LORI

Provider ID: 417937

Provider Gender: Female

License Number: PA23231


NPI: 1245670413


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

LAPINA, LORI

Provider ID: 417937

Provider Gender: Female


License Number: PA23231

NPI: 1245670413


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego


FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE

SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

LLOYD, MATTHEW

Provider ID: 417429

Provider Gender: Male

License Number: PA62752


NPI: 1487307369


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN
DIEGO- CITY COLLEGE

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101

 Phone: (619) 515-2525

 After Hours Phone: (619)
515-2525

 Website: www.fhcsd.org
Email: janeta@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

LLOYD, MATTHEW

Provider ID: 417429

Provider Gender: Male

License Number: PA62752


NPI: 1487307369


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN
DIEGO- CITY COLLEGE

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101

 Phone: (619) 515-2525

 After Hours Phone: (619)
515-2525

 Website: www.fhcsd.org
Email: janeta@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

LOHNES, ELLIE

Provider ID: 417429

Provider Gender: Female

License Number: PA63071

NPI: 1902580426


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego


FAMILY HLTH CTR SAN

D2. Directorio de atención primaria

DIEGO- CITY COLLEGE

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101

 Phone: (619) 515-2525

 After Hours Phone: (619)
515-2525

 Website: www.fhcsd.org

Email: janeta@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

LOHNES, ELLIE

Provider ID: 417429

Provider Gender: Female

License Number: PA63071


NPI: 1902580426


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO- CITY COLLEGE

 1550 BROADWAY STE 2
SAN DIEGO, CA 92101

 Phone: (619) 515-2525

 After Hours Phone: (619)
515-2525

 Website: www.fhcsd.org

Email: janeta@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

Hours: M-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

LOPEZ, MARIO

Provider ID: 417937

Provider Gender: Male

License Number: PA21385

NPI: 1932335080


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD

HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545

 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

LOPEZ, MARIO

Provider ID: 417937

Provider Gender: Male

License Number: PA21385


NPI: 1932335080


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HLTH CTR SD HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)
515-2545


 Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

LOPEZ, MARIO

Provider ID: 417987

Provider Gender: Male

License Number: PA21385


NPI: 1932335080


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

FAMILY HEALTH CTR IBARRA

 4874 POLK AVE
SAN DIEGO, CA 92105

 Phone: (619) 515-2426


 After Hours Phone: (619)
515-2426

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

D2. Directorio de atención primaria

LOPEZ, MARIO

Provider ID: 417987

Provider Gender: Male

License Number: PA21385


NPI: 1932335080


Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HEALTH CTR IBARRA

 4874 POLK AVE
SAN DIEGO, CA 92105

 Phone: (619) 515-2426

 After Hours Phone: (619)
515-2426

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

MARTINEZ-MURGUIA, IRENE

Provider ID: 185268

Provider Gender: Female

License Number: PA20296

NPI: 1447492889


Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 255-9155

 After Hours Phone: (619)
255-9155

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

MARTINEZ-MURGUIA, IRENE

Provider ID: 185268

Provider Gender: Female

License Number: PA20296

NPI: 1447492889


Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 255-9155

 After Hours Phone: (619)
255-9155

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

MERCER, KELLY

Provider ID: 185268

Provider Gender: Female

License Number: PA21625

NPI: 1154609790


Provider English Spoken: Y


Provider Language(s)
Spoken: Arabic


Cultural Competency: N

Board Certified Specialty: No
La Maestra Family Clinic
LA MAESTRA FAMILY CLINIC
INC

 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

 Phone: (619) 255-9155

 After Hours Phone: (619)
255-9155

 Website: www.lamaestra.org

Email:

aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM

PHYSICIANS ASSISTANT

MERCER, KELLY

Provider ID: 185268

Provider Gender: Female

License Number: PA21625

NPI: 1154609790

Provider English Spoken: Y

Provider Language(s)

D2. Directorio de atención primaria



Spoken: Arabic
Cultural Competency: N
Board Certified Specialty: No
La Maestra Family Clinic
**LA MAESTRA FAMILY CLINIC
INC**
 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
 Phone: (619) 255-9155
 After Hours Phone: (619)
255-9155
 Website: www.lamaestra.org
g
Email:
aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM

PHYSICIANS ASSISTANT

MILLER, LAUREL

Provider ID: 206363
Provider Gender: Female
License Number: PA20378
NPI: 1598992133
 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
*Family Health Centers of San
Diego*
**DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC**

 4725 MARKET ST
SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619)


515-2560
 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

MILLER, LAUREL

Provider ID: 206363
Provider Gender: Female
License Number: PA20378
NPI: 1598992133
 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
*Family Health Centers of San
Diego*
**DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC**

 4725 MARKET ST
SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT


NUNO, JOSE




Provider ID: 206360
Provider Gender: Male

License Number: PA15227
NPI: 1275543068
 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
*Family Health Centers of San
Diego*
**LOGAN HEIGHTS FAMILY
HEALTH CENTER**
 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

NUNO, JOSE

Provider ID: 206360
Provider Gender: Male
License Number: PA15227
NPI: 1275543068
 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
*Family Health Centers of San
Diego*
**LOGAN HEIGHTS FAMILY
HEALTH CENTER**

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300

D2. Directorio de atención primaria

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL): Family Health Centers of San Diego

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT


PENA, NICHOLAS

Provider ID: 206360

Provider Gender: Male


License Number: PA56636


NPI: 1083176077

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

PENA, NICHOLAS

Provider ID: 206360

Provider Gender: Male

License Number: PA56636


NPI: 1083176077


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT



PHUNG, AIVI

Provider ID: 206046

Provider Gender: Female


License Number: PA53902


NPI: 1639528110

 Provider English Spoken: Y
 Provider Language(s) Spoken: Vietnamese
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858) 279-0925

 Website: [www.sdfamilycare](http://www.sdfamilycare.org)

.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Hours: M 8:00AM-5:00PM

TU 8:00AM-8:00PM

W-F 8:00AM-5:00PM

SA 9:00AM-1:00PM

PHYSICIANS ASSISTANT



PHUNG, AIVI

Provider ID: 206046

Provider Gender: Female


License Number: PA53902


NPI: 1639528110

 Provider English Spoken: Y
 Provider Language(s) Spoken: Vietnamese
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858) 279-0925

 Website: [www.sdfamilycare](http://www.sdfamilycare.org).org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Hours: M 8:00AM-5:00PM

TU 8:00AM-8:00PM

D2. Directorio de atención primaria

W-F 8:00AM-5:00PM
SA 9:00AM-1:00PM

PHYSICIANS ASSISTANT


PHUNG, AIVI


Provider ID: 206046

Provider Gender: Female

License Number: PA53902

NPI: 1639528110

 Provider English Spoken: Y

 Provider Language(s)


Spoken: Vietnamese


Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)
279-0925


 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-5:00PM

TU 8:00AM-8:00PM

W-F 8:00AM-5:00PM

SA 9:00AM-1:00PM

PHYSICIANS ASSISTANT


PHUNG, AIVI

Provider ID: 206046

Provider Gender: Female

License Number: PA53902

NPI: 1639528110

 Provider English Spoken: Y

 Provider Language(s)


Spoken: Vietnamese


Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925


 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-5:00PM

TU 8:00AM-8:00PM

W-F 8:00AM-5:00PM

SA 9:00AM-1:00PM

PHYSICIANS ASSISTANT


POLLEY, SHANNON

Provider ID: 206363

Provider Gender: Female

License Number: PA60864

NPI: 1225608722

 Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San

Diego
DIAMOND NEIGHBORHOODS

FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560


 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

POLLEY, SHANNON

Provider ID: 206363

Provider Gender: Female

License Number: PA60864

NPI: 1225608722


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San


Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560


 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

QUICK, ELISABETH

D2. Directorio de atención primaria

Provider ID: 206360

Provider Gender: Female

License Number: PA21591

NPI: 1790055010

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

QUICK, ELISABETH

Provider ID: 206360

Provider Gender: Female

License Number: PA21591

NPI: 1790055010

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego


LOGAN HEIGHTS FAMILY

HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

RALL, EMILY

Provider ID: 227409

Provider Gender: Female

License Number: PA52141

NPI: 1407855828


Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHC -
OCEAN VIEW

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: [https://www.syhe
alth.org/locations](https://www.syhealth.org/locations)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

RALL, EMILY

Provider ID: 227409

Provider Gender: Female

License Number: PA52141

NPI: 1407855828

Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH CHC -
OCEAN VIEW

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: [https://www.syhe
alth.org/locations](https://www.syhealth.org/locations)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

RASMUSSEN, DALE

Provider ID: 417429

Provider Gender: Male

License Number: PA54022

NPI: 1962880864

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: MERCY

HOSPITAL OF FOLSOM

Board Certified Specialty: No

Family Health Centers of San
Diego

FAMILY HLTH CTR SAN
DIEGO- CITY COLLEGE

 1550 BROADWAY STE 2

D2. Directorio de atención primaria

SAN DIEGO, CA 92101
☎ Phone: (619) 515-2525
📞 After Hours Phone: (619) 515-2525
🌐 Website: www.fhcsd.org
Email: janeta@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

RASMUSSEN, DALE

Provider ID: 417429
Provider Gender: Male
License Number: PA54022
NPI: 1962880864
☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: MERCY HOSPITAL OF FOLSOM
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE
📍 1550 BROADWAY STE 2 SAN DIEGO, CA 92101
☎ Phone: (619) 515-2525
📞 After Hours Phone: (619) 515-2525
🌐 Website: www.fhcsd.org
Email: janeta@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT

PROVIDER
Hours: M-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

SCHELLIE, SCOTT

Provider ID: 417429
Provider Gender: Male
License Number: PA53288
NPI: 1699053843
☑ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE
📍 1550 BROADWAY STE 2 SAN DIEGO, CA 92101
☎ Phone: (619) 515-2525
📞 After Hours Phone: (619) 515-2525
🌐 Website: www.fhcsd.org
Email: janeta@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

SCHELLIE, SCOTT

Provider ID: 417429
Provider Gender: Male
License Number: PA53288
NPI: 1699053843
☑ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San

Diego
FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE
📍 1550 BROADWAY STE 2 SAN DIEGO, CA 92101
☎ Phone: (619) 515-2525
📞 After Hours Phone: (619) 515-2525
🌐 Website: www.fhcsd.org
Email: janeta@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

SHARPE, NORMA

Provider ID: 517403
Provider Gender: Female
License Number: PA20490
NPI: 1619100237
☑ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE
📍 316 25TH ST SAN DIEGO, CA 92102
☎ Phone: (619) 662-4100
📞 After Hours Phone: (619) 662-4100
🌐 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\120
American Sign Language (ASL):
N
♿ Accessibility: CONTACT

D2. Directorio de atención primaria

PROVIDER

PHYSICIANS ASSISTANT

SHARPE, NORMA

Provider ID: 517403

Provider Gender: Female


License Number: PA20490

NPI: 1619100237


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH 25TH ST
FAMILY MEDICINE

 316 25TH ST

SAN DIEGO, CA 92102

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\120

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

TOMASZEWSKI, DEBRA

Provider ID: 206363

Provider Gender: Female

License Number: MT2061555

NPI: 1215264452


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

 4725 MARKET ST

SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

TOMASZEWSKI, DEBRA

Provider ID: 206363

Provider Gender: Female

License Number: PA58081

NPI: 1215264452


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

 4725 MARKET ST

SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

TOMASZEWSKI, DEBRA

Provider ID: 206363

Provider Gender: Female

License Number: MT2061555

NPI: 1215264452


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

 4725 MARKET ST

SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

TOMASZEWSKI, DEBRA

Provider ID: 206363

Provider Gender: Female

License Number: PA58081

NPI: 1215264452

 Provider English Spoken: Y
Cultural Competency: N





Board Certified Specialty: No
Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

 4725 MARKET ST

SAN DIEGO, CA 92102

D2. Directorio de atención primaria

 Phone: (619) 515-2560
 After Hours Phone: (619) 515-2560
 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER



PHYSICIANS ASSISTANT


TREUNER, JULIE

Provider ID: 206360
Provider Gender: Female
License Number: PA17478
NPI: 1922013614
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
LOGAN HEIGHTS FAMILY HEALTH CENTER
 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 9:00AM-5:00PM

PHYSICIANS ASSISTANT



TREUNER, JULIE

Provider ID: 206360
Provider Gender: Female
License Number: PA17478
NPI: 1922013614
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 9:00AM-5:00PM

PHYSICIANS ASSISTANT

TURNER, SHEREENA

Provider ID: 206360
Provider Gender: Female
License Number: PA20396
NPI: 1992934988
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No







Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER


 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

TURNER, SHEREENA

Provider ID: 206360
Provider Gender: Female
License Number: PA20396
NPI: 1992934988
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
LOGAN HEIGHTS FAMILY HEALTH CENTER
 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

D2. Directorio de atención primaria

American Sign Language (ASL):  Provider English Spoken: Y
Cultural Competency: N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

UDOH, EKAETE

Provider ID: 418535

Provider Gender: Male

License Number: PA19664


NPI: 1841472776


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Operation Samahan


OPERATION SAMAHAN

RANCHO PENASQUITOS

 9995 CARMEL MOUNTAIN
RD STE B10 AND B11
SAN DIEGO, CA 92129

 Phone: (844) 200-2426

 After Hours Phone: (844)
200-2426

 Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TU 8:30AM-5:30PM

W 10:00AM-7:00PM

TH-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

UDOH, EKAETE

Provider ID: 418535

Provider Gender: Male

License Number: PA19664


NPI: 1841472776


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Operation Samahan


OPERATION SAMAHAN

RANCHO PENASQUITOS

 9995 CARMEL MOUNTAIN
RD STE B10 AND B11
SAN DIEGO, CA 92129

 Phone: (844) 200-2426

 After Hours Phone: (844)
200-2426

 Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-TU 8:30AM-5:30PM

W 10:00AM-7:00PM

TH-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT


VARGAS, ROBERT

Provider ID: 206360

Provider Gender: Male

License Number: PA11194

NPI: 1972528081

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San


Diego


LOGAN HEIGHTS FAMILY

HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

PHYSICIANS ASSISTANT


VARGAS, ROBERT

Provider ID: 206360

Provider Gender: Male

License Number: PA11194

NPI: 1972528081

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San


Diego


LOGAN HEIGHTS FAMILY

HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

D2. Directorio de atención primaria

PHYSICIANS ASSISTANT

YOUNG-PEN, TONI

Provider ID: 233597

Provider Gender: Female

License Number: PA18746

NPI: 1932297595

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish,
Vietnamese


Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

MID-CITY COMMUNITY CLINIC

 4290 POLK AVE
SAN DIEGO, CA 92105

 Phone: (619) 563-0250

 After Hours Phone: (619)
563-0250


 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-2:00PM

PHYSICIANS ASSISTANT

YOUNG-PEN, TONI

Provider ID: 233597

Provider Gender: Female

License Number: PA18746

NPI: 1932297595

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish,
Vietnamese


Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

MID-CITY COMMUNITY CLINIC

 4290 POLK AVE
SAN DIEGO, CA 92105

 Phone: (619) 563-0250

 After Hours Phone: (619)
563-0250

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-2:00PM

PHYSICIANS ASSISTANT

YOUNG-PEN, TONI

Provider ID: 206362

Provider Gender: Female

License Number: PA18746

NPI: 1932297595

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish,
Vietnamese

Cultural Competency: N

Board Certified Specialty: No


Family Health Centers of San


Diego

NORTH PARK FAMILY HEALTH

CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

YOUNG-PEN, TONI

Provider ID: 206362

Provider Gender: Female

License Number: PA18746

NPI: 1932297595

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish,
Vietnamese


Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego

NORTH PARK FAMILY HEALTH
CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

YOUNG-PEN, TONI

Provider ID: 206362






Provider Gender: Female

License Number: PA18746

NPI: 1932297595



D2. Directorio de atención primaria



 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish,
Vietnamese
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
NORTH PARK FAMILY HEALTH
CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619)
515-2424
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

YOUNG-PEN, TONI



Provider ID: 206362
Provider Gender: Female
License Number: PA18746
NPI: 1932297595
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish,
Vietnamese
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego
NORTH PARK FAMILY HEALTH
CENTERS

 3544 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424

 After Hours Phone: (619)
515-2424
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PODIATRIST

JUAREZ, LETICIA



Provider ID: 206360
Provider Gender: Female
License Number: DPM5661
NPI: 1508393778
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER





 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PODIATRIST

JUAREZ, LETICIA



Provider ID: 206360
Provider Gender: Female
License Number: DPM5661
NPI: 1508393778
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619)
515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

PODIATRIST

LE, DIANA

Provider ID: 206360
Provider Gender: Female
License Number: DPM5734
NPI: 1184112864
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: ANAHEIM
REGIONAL MEDICAL CTR
Board Certified Specialty: No
Family Health Centers of San

D2. Directorio de atención primaria

Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PODIATRIST

LE, DIANA

Provider ID: 206360

Provider Gender: Female

License Number: DPM5734

NPI: 1184112864

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: ANAHEIM
REGIONAL MEDICAL CTR

Board Certified Specialty: No
Family Health Centers of San
Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)
515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PODIATRIST

LE, DIANA

Provider ID: 206363

Provider Gender: Female

License Number: DPM5734

NPI: 1184112864

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: ANAHEIM
REGIONAL MEDICAL CTR

Board Certified Specialty: No
Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619)
515-2560

Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PODIATRIST

LE, DIANA

Provider ID: 206363

Provider Gender: Female

License Number: DPM5734

NPI: 1184112864

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: ANAHEIM
REGIONAL MEDICAL CTR

Board Certified Specialty: No
Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619)
515-2560

Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PODIATRIST

MANCHEL, BRUCE

Provider ID: 631494

Provider Gender: Male

License Number: DPM2930

NPI: 1790890788

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP
CORONADO HOSP AND
HEALTHCARE CTR


Board Certified Specialty: No


D2. Directorio de atención primaria


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

PRECISION PARK

 1666 PRECISION PARK LN
SAN DIEGO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PODIATRIST


MANCHEL, BRUCE

Provider ID: 631494

Provider Gender: Male

License Number: DPM2930

NPI: 1790890788

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND

HEALTHCARE CTR


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

PRECISION PARK

 1666 PRECISION PARK LN
SAN DIEGO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PODIATRIST

SCHNEIDER, SARAH

Provider ID: 206360

Provider Gender: Female

License Number: DPM4819

NPI: 1326282237


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego

*LOGAN HEIGHTS FAMILY
HEALTH CENTER*

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PODIATRIST

SCHNEIDER, SARAH

Provider ID: 206360

Provider Gender: Female

License Number: DPM4819

NPI: 1326282237

 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San

Diego

*LOGAN HEIGHTS FAMILY
HEALTH CENTER*

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)
515-2300

 Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PODIATRIST

SCHNEIDER, SARAH

Provider ID: 402851

Provider Gender: Female

License Number: DPM4819

NPI: 1326282237


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San
Diego

*FAMILY HLTH CTR SAN
DIEGO-BEACH AREA*

 3705 MISSION BLVD
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619)
515-2444

 Website: www.fhcsd.org
Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

D2. Directorio de atención primaria

 *Accessibility: CONTACT PROVIDER*

PODIATRIST

SCHNEIDER, SARAH

Provider ID: 417429

Provider Gender: Female

License Number: DPM4819


NPI: 1326282237

 *Provider English Spoken: Y*
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE

 *1550 BROADWAY STE 2 SAN DIEGO, CA 92101*

 *Phone: (619) 515-2525*

 *After Hours Phone: (619) 515-2525*

 *Website: www.fhcsd.org*
Email: janeta@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:30AM-5:30PM

PODIATRIST

SCHNEIDER, SARAH

Provider ID: 417429

Provider Gender: Female

License Number: DPM4819

NPI: 1326282237


 *Provider English Spoken: Y*
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San


Diego

FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE

 *1550 BROADWAY STE 2 SAN DIEGO, CA 92101*

 *Phone: (619) 515-2525*

 *After Hours Phone: (619) 515-2525*

 *Website: www.fhcsd.org*
Email: janeta@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:30AM-5:30PM

PODIATRIST

SCHNEIDER, SARAH

Provider ID: 402851

Provider Gender: Female

License Number: DPM4819


NPI: 1326282237


 *Provider English Spoken: Y*
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

 *3705 MISSION BLVD SAN DIEGO, CA 92109*

 *Phone: (619) 515-2444*

 *After Hours Phone: (619) 515-2444*

 *Website: www.fhcsd.org*
Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

PREVENTATIVE MEDICINE

GENERAL

HILL, LINDA

Provider ID: 206046

Provider Gender: Female

License Number: G41532

NPI: 1467434811

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: French, Spanish*

Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR


Board Certified Specialty: No


IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE CTR

 *6973 LINDA VISTA RD SAN DIEGO, CA 92111*

 *Phone: (858) 279-0925*

 *After Hours Phone: (858) 279-0925*

 *Website: www.sdfamilycare.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:30AM-5:30PM

SA 9:00AM-4:00PM



PREVENTATIVE MEDICINE

GENERAL

HILL, LINDA

Provider ID: 482070

D2. Directorio de atención primaria

Provider Gender: Female
License Number: G41532
NPI: 1467434811
 Provider English Spoken: Y
 Provider Language(s)
Spoken: French, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN DIEGO FAMILY CARE
 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
 After Hours Phone: (858)
810-8700
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-9:00PM
W-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

PREVENTATIVE MEDICINE

GENERAL

HILL, LINDA


Provider ID: 206046
Provider Gender: Female
License Number: G41532
NPI: 1467434811
 Provider English Spoken: Y
 Provider Language(s)
Spoken: French, Spanish
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE
CTR
 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 After Hours Phone: (858)
279-0925
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

PREVENTATIVE MEDICINE

GENERAL

HILL, LINDA






Provider ID: 206046
Provider Gender: Female
License Number: G41532
NPI: 1467434811
 Provider English Spoken: Y
 Provider Language(s)
Spoken: French, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
LINDA VISTA HEALTH CARE
CTR
 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925
 After Hours Phone: (858)
279-0925
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

PREVENTATIVE MEDICINE

GENERAL

HILL, LINDA

Provider ID: 482070
Provider Gender: Female
License Number: G41532
NPI: 1467434811
 Provider English Spoken: Y
 Provider Language(s)
Spoken: French, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN DIEGO FAMILY CARE
 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
 After Hours Phone: (858)
810-8700
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT

D2. Directorio de atención primaria

PROVIDER



Hours: M 8:30AM-5:30PM
TU 8:30AM-9:00PM
W-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

PREVENTATIVE MEDICINE

GENERAL

HILL, LINDA

Provider ID: 206046
Provider Gender: Female
License Number: G41532
NPI: 1467434811

 Provider English Spoken: Y
 Provider Language(s)
Spoken: French, Spanish
Cultural Competency: N


Hospital Affiliation: UCSD


MEDICAL CTR


Board Certified Specialty: No
IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

PREVENTATIVE MEDICINE

GENERAL

RISSER, JOSEPH

Provider ID: 206046
Provider Gender: Male
License Number: G70886
NPI: 1952386765


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: Yes

IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 Fax: (858) 279-0377

 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

PREVENTATIVE MEDICINE

GENERAL

RISSER, JOSEPH

Provider ID: 206046
Provider Gender: Male
License Number: G70886
NPI: 1952386765


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: Yes


IHP of Southern Cal-PHP


LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 Fax: (858) 279-0377

 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

PREVENTATIVE MEDICINE

GENERAL

RISSER, JOSEPH

Provider ID: 206046
Provider Gender: Male
License Number: G70886
NPI: 1952386765


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: Yes

IHP of Southern Cal-PHP


LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 Fax: (858) 279-0377

 After Hours Phone: (858)
279-0925


 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

D2. Directorio de atención primaria

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

PREVENTATIVE MEDICINE

GENERAL

RISSER, JOSEPH

Provider ID: 482070

Provider Gender: Male

License Number: G70886


NPI: 1952386765


 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN DIEGO FAMILY CARE

 *7011 LINDA VISTA RD*
SAN DIEGO, CA 92111

 *Phone: (858) 810-8700*

 *After Hours Phone: (858) 810-8700*


 *Website: www.sdfamilycare.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M 8:30AM-5:30PM

TU 8:30AM-9:00PM

W-F 8:30AM-5:30PM

SA 9:00AM-4:00PM

PREVENTATIVE MEDICINE

GENERAL

RISSER, JOSEPH

Provider ID: 206046

Provider Gender: Male

License Number: G70886


NPI: 1952386765

 *Provider English Spoken: Y*
Cultural Competency: N


Board Certified Specialty: Yes
IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE
CTR

 *6973 LINDA VISTA RD*
SAN DIEGO, CA 92111

 *Phone: (858) 279-0925*

Fax: (858) 279-0377

 *After Hours Phone: (858) 279-0925*

 *Website: www.sdfamilycare.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:30AM-5:30PM

SA 9:00AM-4:00PM

PREVENTATIVE MEDICINE

GENERAL

RISSER, JOSEPH

Provider ID: 482070

Provider Gender: Male

License Number: G70886


NPI: 1952386765


 *Provider English Spoken: Y*
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN DIEGO FAMILY CARE

 *7011 LINDA VISTA RD*
SAN DIEGO, CA 92111

 *Phone: (858) 810-8700*

 *After Hours Phone: (858) 810-8700*

 *Website: www.sdfamilycare.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

Hours: M 8:30AM-5:30PM

TU 8:30AM-9:00PM

W-F 8:30AM-5:30PM

SA 9:00AM-4:00PM

PREVENTATIVE MEDICINE

GENERAL

ROMERO, CAMILA

Provider ID: 206046

Provider Gender: Female

License Number: A93812

NPI: 1508912130

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: French, Spanish*

Cultural Competency: N

Hospital Affiliation: SHARP

MARY BIRCH HOSP FOR


WOMEN AND NEWBORNS

Board Certified Specialty: No

IHP of Southern Cal-PHP


LINDA VISTA HEALTH CARE
CTR

 *6973 LINDA VISTA RD*
SAN DIEGO, CA 92111

 *Phone: (858) 279-0925*

Fax: (858) 279-0377

 *After Hours Phone: (858) 279-0925*

 *Website: www.sdfamilycare.org*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

D2. Directorio de atención primaria

American Sign Language (ASL): Provider ID: 206046

N

 Accessibility: CONTACT PROVIDER

PREVENTATIVE MEDICINE

GENERAL

ROMERO, CAMILA

Provider ID: 206046

Provider Gender: Female

License Number: A93812

NPI: 1508912130

Provider English Spoken: Y

Provider Language(s)
Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP


MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS

Board Certified Specialty: No

IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

Fax: (858) 279-0377

 After Hours Phone: (858)
279-0925


 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): Provider ID: 206046

N

 Accessibility: CONTACT PROVIDER

PREVENTATIVE MEDICINE

GENERAL

ROMERO, CAMILA

Provider Gender: Female

License Number: A93812

NPI: 1508912130

Provider English Spoken: Y

Provider Language(s)
Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP


MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS

Board Certified Specialty: No


IHP of Southern Cal-PHP

LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

Fax: (858) 279-0377

 After Hours Phone: (858)
279-0925

 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PREVENTATIVE MEDICINE

GENERAL

ROMERO, CAMILA

Provider Gender: Female

License Number: A93812

NPI: 1508912130

Provider English Spoken: Y

Provider Language(s)
Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP


MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS

Board Certified Specialty: No


IHP of Southern Cal-PHP


LINDA VISTA HEALTH CARE
CTR

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

Fax: (858) 279-0377

 After Hours Phone: (858)
279-0925


 Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL

THERAPIST

BLOCKER, NIRIT

Provider ID: 206360

Provider Gender: Female

License Number: PT30272

NPI: 1457689309

Provider English Spoken: Y

Provider Language(s)
Spoken: Hebrew

Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San

Diego


LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

D2. Directorio de atención primaria


 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 9:00AM-5:00PM

REGISTERED PHYSICAL THERAPIST

BLOCKER, NIRIT

Provider ID: 206360

Provider Gender: Female

License Number: PT30272

NPI: 1457689309

Provider English Spoken: Y


Provider Language(s)
Spoken: Hebrew


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300


 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 9:00AM-5:00PM

REGISTERED PHYSICAL THERAPIST

CHAVARRIA, JESSICA

Provider ID: 417937

Provider Gender: Female

License Number: PT292351


NPI: 1407391808


Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619) 515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

REGISTERED PHYSICAL THERAPIST

CHAVARRIA, JESSICA

Provider ID: 417937

Provider Gender: Female

License Number: PT292351

NPI: 1407391808


Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619) 515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

REGISTERED PHYSICAL THERAPIST

CONCORS, ANDREW

Provider ID: 417937

Provider Gender: Male

License Number: PT12930

NPI: 1578706743

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego


FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

D2. Directorio de atención primaria


 After Hours Phone: (619) 515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

REGISTERED PHYSICAL THERAPIST


CONCORS, ANDREW

Provider ID: 417937

Provider Gender: Male

License Number: PT12930

NPI: 1578706743

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego


FAMILY HLTH CTR SD

HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619) 515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

REGISTERED PHYSICAL THERAPIST


CUMMINGS, GEORGE

Provider ID: 417937

Provider Gender: Male

License Number: PT295173

NPI: 1497236384

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego


FAMILY HLTH CTR SD

HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619) 515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST


CUMMINGS, GEORGE

Provider ID: 417937

Provider Gender: Male

License Number: PT295173

NPI: 1497236384

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego


FAMILY HLTH CTR SD

HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619) 515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST

DAHMS, MADELYNN


Provider ID: 206360

Provider Gender: Female

License Number: PT295463

NPI: 1245712702

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Sign Language





Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY
HEALTH CENTER



 1809 NATIONAL AVE
SAN DIEGO, CA 92113

D2. Directorio de atención primaria

 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST

DAHMS, MADELYNN


Provider ID: 206360
Provider Gender: Female
License Number: PT295463
NPI: 1245712702
 Provider English Spoken: Y
 Provider Language(s) Spoken: Sign Language
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST

FIELDING, JOSEPH


Provider ID: 417937
Provider Gender: Male
License Number: PT40975
NPI: 1235577560
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619) 515-2545
 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST

FIELDING, JOSEPH


Provider ID: 417937
Provider Gender: Male
License Number: PT40975
NPI: 1235577560
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619) 515-2545
 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST

HAPKE, ELENA

Provider ID: 417937
Provider Gender: Female
License Number: PT292613
NPI: 1003354895
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619) 515-2545
 Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

D2. Directorio de atención primaria

 *Accessibility: CONTACT PROVIDER*

REGISTERED PHYSICAL

THERAPIST

HAPKE, ELENA

Provider ID: 417937

Provider Gender: Female

License Number: PT292613

NPI: 1003354895

Provider English Spoken: Y


Cultural Competency: N


*Board Certified Specialty: No
Family Health Centers of San Diego*

FAMILY HLTH CTR SD

HILLCREST

 *4094 4TH AVE
SAN DIEGO, CA 92103*

 *Phone: (619) 515-2545*

 *After Hours Phone: (619)
515-2545*

 *Website: www.fhcsd.org*

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

REGISTERED PHYSICAL

THERAPIST

HERMES, MARY

Provider ID: 206360

Provider Gender: Female

License Number: PT24707

NPI: 1518028547

Provider English Spoken: Y


*Provider Language(s)
Spoken: Spanish*


Cultural Competency: N

*Board Certified Specialty: No
Family Health Centers of San Diego*

*LOGAN HEIGHTS FAMILY
HEALTH CENTER*

 *1809 NATIONAL AVE
SAN DIEGO, CA 92113*

 *Phone: (619) 515-2300*

 *After Hours Phone: (619)
515-2300*

 *Website: www.fhcsd.org*

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

REGISTERED PHYSICAL

THERAPIST

HERMES, MARY

Provider ID: 206360

Provider Gender: Female

License Number: PT24707

NPI: 1518028547

Provider English Spoken: Y


*Provider Language(s)
Spoken: Spanish*


Cultural Competency: N

*Board Certified Specialty: No
Family Health Centers of San Diego*

*LOGAN HEIGHTS FAMILY
HEALTH CENTER*

 *1809 NATIONAL AVE
SAN DIEGO, CA 92113*

 *Phone: (619) 515-2300*

 *After Hours Phone: (619)
515-2300*

 *Website: www.fhcsd.org*


Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

REGISTERED PHYSICAL

THERAPIST

IRIZARRY, NICOLE

Provider ID: 206360

Provider Gender: Female

License Number: PT33914

NPI: 1003088063


Provider English Spoken: Y


Cultural Competency: N

*Board Certified Specialty: No
Family Health Centers of San Diego*

*LOGAN HEIGHTS FAMILY
HEALTH CENTER*

 *1809 NATIONAL AVE
SAN DIEGO, CA 92113*

 *Phone: (619) 515-2300*

 *After Hours Phone: (619)
515-2300*

 *Website: www.fhcsd.org*


Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

REGISTERED PHYSICAL

THERAPIST

IRIZARRY, NICOLE

Provider ID: 206360

D2. Directorio de atención primaria

Provider Gender: Female

License Number: PT33914

NPI: 1003088063


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

 1809 NATIONAL AVE
SAN DIEGO, CA 92113

 Phone: (619) 515-2300


 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST

MAHONEY, KAITLYN

Provider ID: 417937

Provider Gender: Female

License Number: PT296559

NPI: 1114583176

 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No

Family Health Centers of San Diego


FAMILY HLTH CTR SD

HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619) 515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

REGISTERED PHYSICAL THERAPIST

MAHONEY, KAITLYN

Provider ID: 417937

Provider Gender: Female

License Number: PT296559

NPI: 1114583176

 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No


Family Health Centers of San Diego


FAMILY HLTH CTR SD

HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619) 515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

REGISTERED PHYSICAL THERAPIST

MIGNEA, DAVID

Provider ID: 417937

Provider Gender: Male

License Number: PT293536


NPI: 1043736879


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD
HILLCREST

 4094 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 515-2545


 After Hours Phone: (619) 515-2545

 Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

REGISTERED PHYSICAL THERAPIST

MIGNEA, DAVID

Provider ID: 417937

Provider Gender: Male

License Number: PT293536

NPI: 1043736879

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

D2. Directorio de atención primaria

Family Health Centers of San Diego

FAMILY HLTH CTR SD
HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545
After Hours Phone: (619) 515-2545

Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

REGISTERED PHYSICAL THERAPIST

SCHMIDT, BRYAN

Provider ID: 417937

Provider Gender: Male

License Number: PT28061

NPI: 1780685032

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD

HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545
After Hours Phone: (619) 515-2545

Website: www.fhcsd.org

Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

REGISTERED PHYSICAL THERAPIST

SCHMIDT, BRYAN

Provider ID: 417937

Provider Gender: Male

License Number: PT28061

NPI: 1780685032

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD

HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545
After Hours Phone: (619) 515-2545

Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

REGISTERED PHYSICAL THERAPIST

VAN DYKE, JASON

Provider ID: 417937

Provider Gender: Male

License Number: PT25155

NPI: 1487658720

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD

HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545
After Hours Phone: (619) 515-2545

Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

REGISTERED PHYSICAL THERAPIST

VAN DYKE, JASON

Provider ID: 417937

Provider Gender: Male

License Number: PT25155

NPI: 1487658720

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

D2. Directorio de atención primaria

Board Certified Specialty: No
Family Health Centers of San Diego

FAMILY HLTH CTR SD
HILLCREST

4094 4TH AVE
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619) 515-2545

Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

RHEUMATOLOGY

OGANDO, SHEENA

Provider ID: 206363

Provider Gender: Female

License Number: A142743

NPI: 1649564295

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: JOHN

MUIR MEDICAL CENTER

WALNUT CREEK CAMPUS

Board Certified Specialty: No
Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619) 515-2560

Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

RHEUMATOLOGY

OGANDO, SHEENA

Provider ID: 206363

Provider Gender: Female

License Number: A142743

NPI: 1649564295

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: JOHN

MUIR MEDICAL CENTER

WALNUT CREEK CAMPUS

Board Certified Specialty: No
Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619) 515-2560

Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

RHEUMATOLOGY

REDDY, DANA

Provider ID: 206363

Provider Gender: Female

License Number: A115598

NPI: 1144538778

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL,
SHARP MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS

Board Certified Specialty: No
Family Health Centers of San Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

4725 MARKET ST
SAN DIEGO, CA 92102

Phone: (619) 515-2560

After Hours Phone: (619) 515-2560

Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

D2. Directorio de atención primaria

Hours: M-F 8:00AM-5:00PM

RHEUMATOLOGY


REDDY, DANA

Provider ID: 206363

Provider Gender: Female

License Number: A115598

NPI: 1144538778

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP


CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL,
SHARP MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL


HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS

Board Certified Specialty: No
Family Health Centers of San
Diego

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC

 4725 MARKET ST
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)
515-2560

 Website: www.fhcsd.org

Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

RHEUMATOLOGY


REDDY, DANA

Provider ID: 403583

Provider Gender: Female

License Number: A115598

NPI: 1144538778

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SHARP


CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL,
SHARP MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS

Board Certified Specialty: No
IHP of Southern Cal-PHP

ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 Phone: (619) 233-8500

 After Hours Phone: (619)
233-8500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

RHEUMATOLOGY

REDDY, DANA

Provider ID: 403583

Provider Gender: Female

License Number: A115598

NPI: 1144538778

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP


CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL,
SHARP MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS


Board Certified Specialty: No

IHP of Southern Cal-PHP

ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 Phone: (619) 233-8500

 After Hours Phone: (619)
233-8500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

SPEECH PATHOLOGIST

MILLER, WILLIAM


Provider ID: 206360

Provider Gender: Male

License Number: SP35150

NPI: 1972002210

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

D2. Directorio de atención primaria

Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

SPEECH PATHOLOGIST

MILLER, WILLIAM

Provider ID: 206360

Provider Gender: Male

License Number: SP35150

NPI: 1972002210

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

SPEECH PATHOLOGIST

WILLIAMS, JESSICA

Provider ID: 206360

Provider Gender: Female

License Number: SP27677

NPI: 1932680006

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

SPEECH PATHOLOGIST

WILLIAMS, JESSICA

Provider ID: 206360

Provider Gender: Female

License Number: SP27677

NPI: 1932680006

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San Diego

LOGAN HEIGHTS FAMILY HEALTH CENTER

1809 NATIONAL AVE
SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

SAN MARCOS

CERTIFIED NURSE

PRACTITIONER

FODDA, RAMI

Provider ID: 614511

Provider Gender: Male

License Number: NP18788

NPI: 1164660452

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

Phone: (760) 736-6767

Fax: (760) 736-6744


After Hours Phone: (760) 736-6767

Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

D2. Directorio de atención primaria

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

FODDA, RAMI

Provider ID: 614511

Provider Gender: Male

License Number: NP18788

NPI: 1164660452

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

TRUECARE

 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

 Phone: (760) 736-6767

Fax: (760) 736-6744


 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER


FODDA, RAMI

Provider ID: 614511

Provider Gender: Male

License Number: NP18788

NPI: 1164660452

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

TRUECARE

 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER


FODDA, RAMI


Provider ID: 614511

Provider Gender: Male

License Number: NP18788

NPI: 1164660452

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

TRUECARE

 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

FODDA, RAMI

Provider ID: 614511

Provider Gender: Male

License Number: NP18788

NPI: 1164660452

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

TRUECARE

 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

FODDA, RAMI


Provider ID: 614511

Provider Gender: Male

License Number: NP18788

D2. Directorio de atención primaria

NPI: 1164660452

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

 Phone: (760) 736-6767

 Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): TRUECARE

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER


FREEMAN, WANDA

Provider ID: 206426

Provider Gender: Female

License Number: NP95003903

NPI: 1659504264

 Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): TRUECARE

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER


FREEMAN, WANDA

Provider ID: 206426

Provider Gender: Female

License Number: NP95003903

NPI: 1659504264

 Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): TRUECARE

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER


FREEMAN, WANDA

Provider ID: 206426

Provider Gender: Female

License Number: NP95003903

NPI: 1659504264


 Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767


 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

FREEMAN, WANDA

Provider ID: 206426

Provider Gender: Female

License Number: NP95003903

NPI: 1659504264

 Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767


 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

FREEMAN, WANDA

D2. Directorio de atención primaria

Provider ID: 206426
Provider Gender: Female
License Number: NP95003903
NPI: 1659504264
 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767
 After Hours Phone: (760)
736-6767
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE


PRACTITIONER

FREEMAN, WANDA

Provider ID: 206426
Provider Gender: Female
License Number: NP95003903
NPI: 1659504264
 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767
 After Hours Phone: (760)
736-6767
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

HENLEY, MEARA

Provider ID: 206426
Provider Gender: Female
License Number: NP95002545
NPI: 1538319645

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No

IHP of Southern Cal-PHP
TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767
 After Hours Phone: (760)
736-6767
 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE






PRACTITIONER

HENLEY, MEARA

Provider ID: 206426
Provider Gender: Female
License Number: NP95002545
NPI: 1538319645

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767
 After Hours Phone: (760)
736-6767
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

HENLEY, MEARA


Provider ID: 206426
Provider Gender: Female
License Number: NP95002545
NPI: 1538319645

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767
 After Hours Phone: (760)
736-6767
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

D2. Directorio de atención primaria

N

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE

PRACTITIONER

HENLEY, MEARA

Provider ID: 206426

Provider Gender: Female

License Number: NP95002545

NPI: 1538319645

Provider English Spoken: Y

*Provider Language(s)
Spoken: Spanish*


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 *Phone: (760) 736-6767*

 *After Hours Phone: (760)
736-6767*

 *Website: www.ihpsocal.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE

PRACTITIONER

HENLEY, MEARA

Provider ID: 206426

Provider Gender: Female

License Number: NP95002545

NPI: 1538319645

Provider English Spoken: Y

*Provider Language(s)
Spoken: Spanish*


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 *Phone: (760) 736-6767*

 *After Hours Phone: (760)
736-6767*

 *Website: www.ihpsocal.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE

PRACTITIONER

HENLEY, MEARA

Provider ID: 206426

Provider Gender: Female

License Number: NP95002545

NPI: 1538319645

Provider English Spoken: Y

*Provider Language(s)
Spoken: Spanish*


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 *Phone: (760) 736-6767*

 *After Hours Phone: (760)
736-6767*

 *Website: www.ihpsocal.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT*

PROVIDER

CERTIFIED NURSE

PRACTITIONER

KOUSARI, JHALEH

Provider ID: 206426

Provider Gender: Female

License Number: NP20893

NPI: 1811262405

Provider English Spoken: Y

*Provider Language(s)
Spoken: Farsi, Persian,
Spanish*

Cultural Competency: N

Hospital Affiliation: SCRIPPS

GREEN HOSPITAL, SCRIPPS


MEMORIAL HOSPITAL


Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 *Phone: (760) 736-6767*

 *After Hours Phone: (760)
736-6767*

 *Website: www.ihpsocal.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE

PRACTITIONER

KOUSARI, JHALEH

Provider ID: 206426


Provider Gender: Female

License Number: NP20893

NPI: 1811262405



Provider English Spoken: Y

D2. Directorio de atención primaria

 *Provider Language(s)*
Spoken: Farsi, Persian, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP TRUECARE



 150 VALPRED A RD
SAN MARCOS, CA 92069
 *Phone: (760) 736-6767*
 *After Hours Phone: (760) 736-6767*
 *Website: www.ihpsocal.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER

KOUSARI, JHALEH
Provider ID: 206426
Provider Gender: Female
License Number: NP20893
NPI: 1811262405
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Farsi, Persian, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069
 *Phone: (760) 736-6767*
 *After Hours Phone: (760) 736-6767*
 *Website: www.ihpsocal.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER



KOUSARI, JHALEH
Provider ID: 206426
Provider Gender: Female
License Number: NP20893
NPI: 1811262405
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Farsi, Persian, Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069
 *Phone: (760) 736-6767*
 *After Hours Phone: (760) 736-6767*
 *Website: www.ihpsocal.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT*

PROVIDER


CERTIFIED NURSE PRACTITIONER

KOUSARI, JHALEH
Provider ID: 206426
Provider Gender: Female
License Number: NP20893
NPI: 1811262405
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Farsi, Persian, Spanish


Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP TRUECARE



 150 VALPRED A RD
SAN MARCOS, CA 92069
 *Phone: (760) 736-6767*
 *After Hours Phone: (760) 736-6767*
 *Website: www.ihpsocal.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER


KOUSARI, JHALEH
Provider ID: 206426
Provider Gender: Female
License Number: NP20893
NPI: 1811262405
 *Provider English Spoken: Y*


D2. Directorio de atención primaria


 *Provider Language(s)*
Spoken: Farsi, Persian, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069
 *Phone: (760) 736-6767*
 *After Hours Phone: (760) 736-6767*
 *Website: www.ihpsocal.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*


CERTIFIED NURSE PRACTITIONER
MACIAS, ALISSA

Provider ID: 206426
Provider Gender: Female
License Number: NP21368
NPI: 1952658445
 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069
 *Phone: (760) 736-6767*
 *After Hours Phone: (760) 736-6767*
 *Website: www.ihpsocal.org*
Medi-Cal Open Panel: Yes


Min/Max Age: 0\150
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*


CERTIFIED NURSE PRACTITIONER
MACIAS, ALISSA

Provider ID: 206426
Provider Gender: Female
License Number: NP21368
NPI: 1952658445
 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE


 150 VALPRED A RD
SAN MARCOS, CA 92069
 *Phone: (760) 736-6767*
 *After Hours Phone: (760) 736-6767*
 *Website: www.ihpsocal.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*


CERTIFIED NURSE PRACTITIONER
MACIAS, ALISSA

Provider ID: 206426
Provider Gender: Female
License Number: NP21368
NPI: 1952658445
 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No

IHP of Southern Cal-PHP
TRUECARE
 150 VALPRED A RD
SAN MARCOS, CA 92069
 *Phone: (760) 736-6767*
 *After Hours Phone: (760) 736-6767*
 *Website: www.ihpsocal.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER
MACIAS, ALISSA

Provider ID: 206426
Provider Gender: Female
License Number: NP21368
NPI: 1952658445
 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069
 *Phone: (760) 736-6767*
 *After Hours Phone: (760) 736-6767*
 *Website: www.ihpsocal.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER

D2. Directorio de atención primaria

MACIAS, ALISSA

Provider ID: 206426

Provider Gender: Female

License Number: NP21368

NPI: 1952658445

 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

TRUECARE

 150 VALPRED A RD

SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

MACIAS, ALISSA

Provider ID: 206426

Provider Gender: Female

License Number: NP21368

NPI: 1952658445

 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

TRUECARE

 150 VALPRED A RD

SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):  N

 Accessibility: CONTACT
PROVIDER

CERTIFIED REGISTERED

NURSE MIDWIFE

BELANGER, TANYA

Provider ID: 206426

Provider Gender: Female

License Number: NM235844

NPI: 1407287469

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER


Board Certified Specialty: No


IHP of Southern Cal-PHP

TRUECARE

 150 VALPRED A RD

SAN MARCOS, CA 92069

 Phone: (760) 736-6767


 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-5:00PM

CERTIFIED REGISTERED

NURSE MIDWIFE


BELANGER, TANYA

Provider ID: 206426

Provider Gender: Female

License Number: NM235844

NPI: 1407287469

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER


Board Certified Specialty: No


IHP of Southern Cal-PHP

TRUECARE

 150 VALPRED A RD

SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-5:00PM

CERTIFIED REGISTERED

NURSE MIDWIFE

BELANGER, TANYA

Provider ID: 206426

Provider Gender: Female

License Number: NM235844

NPI: 1407287469

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER


Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

 150 VALPRED A RD

SAN MARCOS, CA 92069

 Phone: (760) 736-6767


D2. Directorio de atención primaria




 After Hours Phone: (760) 736-6767
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM



CERTIFIED REGISTERED

NURSE MIDWIFE

BELANGER, TANYA

Provider ID: 206426
Provider Gender: Female
License Number: NM235844
NPI: 1407287469
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE


 150 VALPRED A RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767
 After Hours Phone: (760) 736-6767




 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM



CERTIFIED REGISTERED

NURSE MIDWIFE

BELANGER, TANYA

Provider ID: 206426
Provider Gender: Female
License Number: NM235844
NPI: 1407287469
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE


 150 VALPRED A RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767
 After Hours Phone: (760) 736-6767

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM


CERTIFIED REGISTERED



NURSE MIDWIFE

BELANGER, TANYA

Provider ID: 206426
Provider Gender: Female
License Number: NM235844
NPI: 1407287469
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER



Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767
 After Hours Phone: (760) 736-6767

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM

FAMILY PRACTICE

NATH, DEVARSHI

Provider ID: 614511
Provider Gender: Male
License Number: C54157
NPI: 1275630618
 Provider English Spoken: Y
 Provider Language(s) Spoken: Bengali
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
 Phone: (760) 736-6767
Fax: (760) 736-6744
 After Hours Phone: (760) 736-6767

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

D2. Directorio de atención primaria

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

NATH, DEVARSHI

Provider ID: 614511

Provider Gender: Male

License Number: C54157

NPI: 1275630618

Provider English Spoken: Y

Provider Language(s) Spoken: Bengali


Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

 *Phone: (760) 736-6767*

Fax: (760) 736-6744

 *After Hours Phone: (760) 736-6767*


 *Website: www.ihpsocal.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

NATH, DEVARSHI

Provider ID: 614511

Provider Gender: Male

License Number: C54157

NPI: 1275630618

Provider English Spoken: Y

Provider Language(s) Spoken: Bengali


Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

 *Phone: (760) 736-6767*

Fax: (760) 736-6744

 *After Hours Phone: (760) 736-6767*

 *Website: www.ihpsocal.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

NATH, DEVARSHI

Provider ID: 614511

Provider Gender: Male

License Number: C54157

NPI: 1275630618

Provider English Spoken: Y

Provider Language(s) Spoken: Bengali


Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

 *Phone: (760) 736-6767*

Fax: (760) 736-6744

 *After Hours Phone: (760) 736-6767*

 *Website: www.ihpsocal.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

NATH, DEVARSHI

Provider ID: 614511

Provider Gender: Male

License Number: C54157

NPI: 1275630618

Provider English Spoken: Y

Provider Language(s) Spoken: Bengali


Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

 *Phone: (760) 736-6767*

Fax: (760) 736-6744

 *After Hours Phone: (760) 736-6767*


 *Website: www.ihpsocal.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

NATH, DEVARSHI

Provider ID: 614511

Provider Gender: Male

License Number: C54157

NPI: 1275630618

Provider English Spoken: Y

Provider Language(s) Spoken: Bengali

Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

D2. Directorio de atención primaria

 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767


 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER

FQHC

TRUECARE,

Provider ID: 206426

NPI: 1811617939


 Provider English Spoken: Y

Cultural Competency: N

IHP of Southern Cal-PHP

TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-5:00PM

FQHC

TRUECARE,

Provider ID: 206426

NPI: 1598484255


 Provider English Spoken: Y

Cultural Competency: N

IHP of Southern Cal-PHP

TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM


SA 8:00AM-5:00PM

FQHC

TRUECARE,

Provider ID: 206426

NPI: 1245246917


 Provider English Spoken: Y

Cultural Competency: N

IHP of Southern Cal-PHP

TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-5:00PM

FQHC

TRUECARE,

Provider ID: 206426

NPI: 1811617939


 Provider English Spoken: Y

Cultural Competency: N

IHP of Southern Cal-PHP

TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-5:00PM

FQHC

TRUECARE,

Provider ID: 206426

NPI: 1598484255


 Provider English Spoken: Y

Cultural Competency: N

IHP of Southern Cal-PHP

TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767


 Website: www.ihpsocal.org

D2. Directorio de atención primaria

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM

FQHC


TRUECARE,

Provider ID: 206426

NPI: 1245246917

 Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 736-6744


 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM

FQHC


TRUECARE,

Provider ID: 614511

NPI: 1598484255

 Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
TRUECARE

 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Hours: M-F 8:00AM-5:00PM

FQHC


TRUECARE,

Provider ID: 614511

NPI: 1811617939

 Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
TRUECARE

 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Hours: M-F 8:00AM-5:00PM

FQHC


TRUECARE,

Provider ID: 614511

NPI: 1245246917

 Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
TRUECARE

 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Hours: M-F 8:00AM-5:00PM

FQHC


TRUECARE,

Provider ID: 614511

NPI: 1811617939

 Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
TRUECARE

 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM


D2. Directorio de atención primaria

FQHC


TRUECARE,

Provider ID: 614511

NPI: 1598484255

 Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
TRUECARE

 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767


 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Hours: M-F 8:00AM-5:00PM

FQHC


TRUECARE,

Provider ID: 614511

NPI: 1245246917

 Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
TRUECARE

 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

GENERAL PRACTICE



WITCZAK, IZABELA

Provider ID: 206426

Provider Gender: Female

License Number: A71311

NPI: 1184735201

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Polish

Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL


ENCINITAS

Board Certified Specialty: No
IHP of Southern Cal-PHP

TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

GENERAL PRACTICE


WITCZAK, IZABELA

Provider ID: 206426

Provider Gender: Female

License Number: A71311

NPI: 1184735201

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Polish


Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

GENERAL PRACTICE



WITCZAK, IZABELA

Provider ID: 206426

Provider Gender: Female

License Number: A71311

NPI: 1184735201


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Polish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

D2. Directorio de atención primaria

 After Hours Phone: (760) 736-6767

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

GENERAL PRACTICE

WITCZAK, IZABELA

Provider ID: 206426

Provider Gender: Female

License Number: A71311

NPI: 1184735201

Provider English Spoken: Y


Provider Language(s)
Spoken: Polish


Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069


 Phone: (760) 736-6767

 After Hours Phone: (760) 736-6767

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

GENERAL PRACTICE

WITCZAK, IZABELA

Provider ID: 206426

Provider Gender: Female

License Number: A71311

NPI: 1184735201

Provider English Spoken: Y


Provider Language(s)
Spoken: Polish


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760) 736-6767

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

GENERAL PRACTICE

WITCZAK, IZABELA

Provider ID: 206426

Provider Gender: Female

License Number: A71311

NPI: 1184735201

Provider English Spoken: Y

Provider Language(s)
Spoken: Polish


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS

Board Certified Specialty: No

IHP of Southern Cal-PHP
TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760) 736-6767

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

PONIACHIK, SAMUEL

Provider ID: 206426

Provider Gender: Male

License Number: G74757

NPI: 1467485078


Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069


 Phone: (760) 736-6767

 After Hours Phone: (760) 736-6767

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

D2. Directorio de atención primaria

PONIACHIK, SAMUEL

Provider ID: 206426

Provider Gender: Male

License Number: G74757

NPI: 1467485078

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

150 VALPRED A RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

After Hours Phone: (760)
736-6767

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

PONIACHIK, SAMUEL

Provider ID: 206426

Provider Gender: Male

License Number: G74757

NPI: 1467485078

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

150 VALPRED A RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

After Hours Phone: (760)

736-6767

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

PONIACHIK, SAMUEL

Provider ID: 206426

Provider Gender: Male

License Number: G74757

NPI: 1467485078

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

150 VALPRED A RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

After Hours Phone: (760)
736-6767

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

PONIACHIK, SAMUEL

Provider ID: 206426

Provider Gender: Male

License Number: G74757

NPI: 1467485078

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

150 VALPRED A RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

After Hours Phone: (760)
736-6767

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

PONIACHIK, SAMUEL

Provider ID: 206426

Provider Gender: Male

License Number: G74757

NPI: 1467485078

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

150 VALPRED A RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

After Hours Phone: (760)
736-6767


Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

D2. Directorio de atención primaria

N	 Accessibility: CONTACT PROVIDER	 Provider Language(s) Spoken: Farsi, Spanish Cultural Competency: N Hospital Affiliation: PALOMAR MEDICAL CENTER Board Certified Specialty: No IHP of Southern Cal-PHP TRUECARE	 After Hours Phone: (760) 736-6767  Website: www.ihpsocal.org Medi-Cal Open Panel: Yes Min/Max Age: 0\150 American Sign Language (ASL): N
<u>OBSTETRICS / GYNECOLOGY</u>		 150 VALPRED A RD SAN MARCOS, CA 92069  Phone: (760) 736-6767  After Hours Phone: (760) 736-6767  Website: www.ihpsocal.org Medi-Cal Open Panel: Yes Min/Max Age: 0\150 American Sign Language (ASL): N	 Accessibility: CONTACT PROVIDER Hours: M-F 8:00AM-5:00PM SA 8:00AM-5:00PM
MOSTOFIAN, EIMANEH	Provider ID: 206426 Provider Gender: Female License Number: A97181 NPI: 1154477628	 Provider English Spoken: Y  Provider Language(s) Spoken: Farsi, Spanish Cultural Competency: N Hospital Affiliation: PALOMAR MEDICAL CENTER Board Certified Specialty: No IHP of Southern Cal-PHP TRUECARE	<u>OBSTETRICS / GYNECOLOGY</u>
 150 VALPRED A RD SAN MARCOS, CA 92069  Phone: (760) 736-6767  After Hours Phone: (760) 736-6767  Website: www.ihpsocal.org Medi-Cal Open Panel: Yes Min/Max Age: 0\150 American Sign Language (ASL): N	 Accessibility: CONTACT PROVIDER Hours: M-F 8:00AM-5:00PM SA 8:00AM-5:00PM	 Accessibility: CONTACT PROVIDER Hours: M-F 8:00AM-5:00PM SA 8:00AM-5:00PM	MOSTOFIAN, EIMANEH Provider ID: 206426 Provider Gender: Female License Number: A97181 NPI: 1154477628
<u>OBSTETRICS / GYNECOLOGY</u>		<u>OBSTETRICS / GYNECOLOGY</u>	 Provider English Spoken: Y  Provider Language(s) Spoken: Farsi, Spanish Cultural Competency: N Hospital Affiliation: PALOMAR MEDICAL CENTER Board Certified Specialty: No IHP of Southern Cal-PHP TRUECARE
MOSTOFIAN, EIMANEH	Provider ID: 206426 Provider Gender: Female License Number: A97181 NPI: 1154477628	 150 VALPRED A RD SAN MARCOS, CA 92069  Phone: (760) 736-6767  After Hours Phone: (760) 736-6767  Website: www.ihpsocal.org Medi-Cal Open Panel: Yes Min/Max Age: 0\150 American Sign Language (ASL): N	 Accessibility: CONTACT PROVIDER Hours: M-F 8:00AM-5:00PM SA 8:00AM-5:00PM
 Provider English Spoken: Y		 150 VALPRED A RD SAN MARCOS, CA 92069  Phone: (760) 736-6767	

D2. Directorio de atención primaria

OBSTETRICS / GYNECOLOGY

MOSTOFIAN, EIMANEH

Provider ID: 206426

Provider Gender: Female

License Number: A97181

NPI: 1154477628

Provider English Spoken: Y


Provider Language(s)
Spoken: Farsi, Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

MOSTOFIAN, EIMANEH

Provider ID: 206426

Provider Gender: Female

License Number: A97181

NPI: 1154477628

Provider English Spoken: Y


Provider Language(s)
Spoken: Farsi, Spanish


Cultural Competency: N


Hospital Affiliation: PALOMAR
MEDICAL CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

POUNTNEY, MARLENE

Provider ID: 206426

Provider Gender: Female

License Number: A93248

NPI: 1174703680

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

POUNTNEY, MARLENE

Provider ID: 206426

Provider Gender: Female

License Number: A93248

NPI: 1174703680

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767


 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

POUNTNEY, MARLENE

Provider ID: 206426

Provider Gender: Female

D2. Directorio de atención primaria

License Number: A93248

NPI: 1174703680

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767


 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

POUNTNEY, MARLENE

Provider ID: 206426

Provider Gender: Female

License Number: A93248

NPI: 1174703680

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

POUNTNEY, MARLENE

Provider ID: 206426

Provider Gender: Female

License Number: A93248

NPI: 1174703680

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

POUNTNEY, MARLENE

Provider ID: 206426

Provider Gender: Female

License Number: A93248

NPI: 1174703680

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

MALHOTRA, ARATI

Provider ID: 110242

Provider Gender: Female

NPI: 1215135306

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi, Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER

D2. Directorio de atención primaria

Board Certified Specialty: No
Rady Childrens Health Network N

ARATI MALHOTRA

150 VALPRED A RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 566-1501

After Hours Phone: (760)
736-6767

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-6:00PM

PEDIATRICS

MALHOTRA, ARATI

Provider ID: 206426

Provider Gender: Female

License Number: A63903

NPI: 1215135306

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi, Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

150 VALPRED A RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

After Hours Phone: (760)
736-6767

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

Accessibility: CONTACT
PROVIDER

PEDIATRICS

MALHOTRA, ARATI

Provider ID: 206426

Provider Gender: Female

License Number: A63903

NPI: 1215135306

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi, Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

150 VALPRED A RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

After Hours Phone: (760)
736-6767

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

MALHOTRA, ARATI

Provider ID: 206426

Provider Gender: Female

License Number: A63903

NPI: 1215135306

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi, Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

150 VALPRED A RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

After Hours Phone: (760)
736-6767

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

MALHOTRA, ARATI

Provider ID: 206426

Provider Gender: Female

License Number: A63903

NPI: 1215135306

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi, Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

150 VALPRED A RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

D2. Directorio de atención primaria

☎ After Hours Phone: (760) 736-6767

🌐 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

PEDIATRICS

MALHOTRA, ARATI

Provider ID: 206426

Provider Gender: Female

License Number: A63903

NPI: 1215135306

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Hindi, Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

📍 150 VALPRED A RD
SAN MARCOS, CA 92069

☎ Phone: (760) 736-6767

☎ After Hours Phone: (760)
736-6767

🌐 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

PEDIATRICS

MALHOTRA, ARATI

Provider ID: 206426

Provider Gender: Female

License Number: A63903

NPI: 1215135306

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Hindi, Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

📍 150 VALPRED A RD
SAN MARCOS, CA 92069

☎ Phone: (760) 736-6767

☎ After Hours Phone: (760)
736-6767

🌐 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

PEDIATRICS

MATIAS, JULIE

Provider ID: 661065

Provider Gender: Female

NPI: 1083094510

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No
Rady Childrens Health Network
JULIE M MATIAS

📍 150 VALPRED A RD
SAN MARCOS, CA 92069

☎ Phone: (760) 736-6767
Fax: (760) 736-6744

☎ After Hours Phone: (760)
736-6767

🌐 Website: N/A

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-6:00PM

TU 8:00AM-5:00PM

W-F 8:00AM-6:00PM

SA 8:00AM-5:00PM

PEDIATRICS

MONAHAN, CAROLYN

Provider ID: 50425

Provider Gender: Female

NPI: 1619973666

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER

Board Certified Specialty: Yes

Rady Childrens Health Network
CAROLYN O MONAHAN

📍 1582 W SAN MARCOS BLVD
STE 203

SAN MARCOS, CA 92078

☎ Phone: (760) 744-6710

Fax: (760) 744-6156

☎ After Hours Phone: (760)
744-6710


🌐 Website: N/A

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):



D2. Directorio de atención primaria



N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM


PEDIATRICS

NEVES, VANESSA


Provider ID: 143763
Provider Gender: Female
NPI: 1174672547
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Board Certified Specialty: No
Rady Childrens Health Network
VANESSA L NEVES

 150 VALPRED A RD
SAN MARCOS, CA 92069
 *Phone: (760) 736-6767*
Fax: (760) 736-6797

 *After Hours Phone: (760) 736-6767*


 *Website: N/A*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19


American Sign Language (ASL): N



 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM

PEDIATRICS


POSADAS, EMERITO

Provider ID: 303661
Provider Gender: Male
NPI: 1720093198
 *Provider English Spoken: Y*


 *Provider Language(s) Spoken: Spanish, Tagalog*
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER
Board Certified Specialty: No
Rady Childrens Health Network
EMERITO D POSADAS

 150 VALPRED A RD
SAN MARCOS, CA 92069
 *Phone: (760) 736-6767*
Fax: (760) 566-1501

 *After Hours Phone: (760) 736-6767*

 *Website: N/A*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19


American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-6:00PM

PEDIATRICS


POSADAS, EMERITO

Provider ID: 206426
Provider Gender: Male
License Number: A48980
NPI: 1720093198

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish, Tagalog*
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER
Board Certified Specialty: No
IHP of Southern Cal-PHP
TRU ECARE

 150 VALPRED A RD

SAN MARCOS, CA 92069
 *Phone: (760) 736-6767*
 *After Hours Phone: (760) 736-6767*



 *Website: www.ihpsocal.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

PEDIATRICS




POSADAS, EMERITO


Provider ID: 206426
Provider Gender: Male
License Number: A48980
NPI: 1720093198

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish, Tagalog*
Cultural Competency: N

Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRU ECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069
 *Phone: (760) 736-6767*
 *After Hours Phone: (760) 736-6767*

 *Website: www.ihpsocal.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

PEDIATRICS

D2. Directorio de atención primaria

POSADAS, EMERITO

Provider ID: 206426

Provider Gender: Male

License Number: A48980

NPI: 1720093198

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, PALOMAR

MEDICAL CENTER


Board Certified Specialty: No


IHP of Southern Cal-PHP

TRUECARE

 150 VALPRED A RD

SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

POSADAS, EMERITO

Provider ID: 206426

Provider Gender: Male

License Number: A48980

NPI: 1720093198

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, PALOMAR

MEDICAL CENTER


Board Certified Specialty: No


IHP of Southern Cal-PHP

TRUECARE

 150 VALPRED A RD

SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

POSADAS, EMERITO

Provider ID: 206426

Provider Gender: Male

License Number: A48980

NPI: 1720093198

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, PALOMAR

MEDICAL CENTER


Board Certified Specialty: No


IHP of Southern Cal-PHP

TRUECARE

 150 VALPRED A RD

SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

POSADAS, EMERITO

Provider ID: 206426

Provider Gender: Male

License Number: A48980

NPI: 1720093198

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, PALOMAR

MEDICAL CENTER


Board Certified Specialty: No


IHP of Southern Cal-PHP

TRUECARE

 150 VALPRED A RD

SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767


 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

QUINTERO, CAROLYN

Provider ID: 614767

Provider Gender: Female

NPI: 1023033156

Provider English Spoken: Y

Provider Language(s)

Spoken: Afar, Spanish

Cultural Competency: N

D2. Directorio de atención primaria

Board Certified Specialty: No
Rady Childrens Health Network
CAROLYN S QUINTERO

150 VALPRED A RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)
736-6767

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-6:00PM

SA 8:00AM-5:00PM

PEDIATRICS

SEBIANE, MARIA

Provider ID: 206426

Provider Gender: Female

License Number: G71182

NPI: 1740295229

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, PALOMAR MEDICAL
CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

150 VALPRED A RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

After Hours Phone: (760)
736-6767

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

SEBIANE, MARIA

Provider ID: 206426

Provider Gender: Female

License Number: G71182

NPI: 1740295229

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, PALOMAR MEDICAL
CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

150 VALPRED A RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

After Hours Phone: (760)
736-6767

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

SEBIANE, MARIA

Provider ID: 206426

Provider Gender: Female

License Number: G71182

NPI: 1740295229

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, PALOMAR MEDICAL
CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

150 VALPRED A RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

After Hours Phone: (760)
736-6767

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

SEBIANE, MARIA

Provider ID: 206426

Provider Gender: Female

License Number: G71182

NPI: 1740295229

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, PALOMAR MEDICAL
CENTER

D2. Directorio de atención primaria

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

150 VALPRED A RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

After Hours Phone: (760)
736-6767

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

SEBIANE, MARIA

Provider ID: 206426

Provider Gender: Female

License Number: G71182

NPI: 1740295229

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, PALOMAR MEDICAL
CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

150 VALPRED A RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

After Hours Phone: (760)
736-6767

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

SEBIANE, MARIA

Provider ID: 206426

Provider Gender: Female

License Number: G71182

NPI: 1740295229

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, PALOMAR MEDICAL
CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

150 VALPRED A RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

After Hours Phone: (760)
736-6767

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

SOCHA, TRACI

Provider ID: 428861

Provider Gender: Female

NPI: 1669478616

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER

Board Certified Specialty: No
Rady Childrens Health Network
TRACI E SOCHA

1582 W SAN MARCOS BLVD
STE 203

SAN MARCOS, CA 92078

Phone: (760) 744-6710

Fax: (760) 744-6156

After Hours Phone: (760)
744-6710

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-4:45PM

PHYSICIANS ASSISTANT

BERNARDO, RACHELLE

Provider ID: 614511

Provider Gender: Female

License Number: PA17718

NPI: 1821237678

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

Phone: (760) 736-6767

After Hours Phone: (760)
736-6767

Website: www.ihpsocal.org

D2. Directorio de atención primaria

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT


BERNARDO, RACHELLE

Provider ID: 614511

Provider Gender: Female

License Number: PA17718

NPI: 1821237678

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: PALOMAR
MEDICAL CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP

TRUECARE

 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

 Phone: (760) 736-6767


 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT


BERNARDO, RACHELLE

Provider ID: 614511

Provider Gender: Female

License Number: PA17718

NPI: 1821237678

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: PALOMAR
MEDICAL CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP

TRUECARE

 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT


BERNARDO, RACHELLE

Provider ID: 614511

Provider Gender: Female

License Number: PA17718

NPI: 1821237678

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: PALOMAR
MEDICAL CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP

TRUECARE

 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT


BERNARDO, RACHELLE

Provider ID: 614511

Provider Gender: Female

License Number: PA17718

NPI: 1821237678

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: PALOMAR
MEDICAL CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP

TRUECARE

 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

 Phone: (760) 736-6767


 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

BERNARDO, RACHELLE


Provider ID: 614511

Provider Gender: Female

License Number: PA17718

D2. Directorio de atención primaria

NPI: 1821237678

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): Board Certified Specialty: No
IHP of Southern Cal-PHP

N
 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

CHISWICK, GARY

Provider ID: 206426

Provider Gender: Male

License Number: PA22667

NPI: 1174964001

 Provider English Spoken: Y


Cultural Competency: N


Hospital Affiliation:

GROSSMONT HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): Board Certified Specialty: No
IHP of Southern Cal-PHP

N
 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT


CHISWICK, GARY

Provider ID: 206426

Provider Gender: Male

License Number: PA22667

NPI: 1174964001

 Provider English Spoken: Y


Cultural Competency: N


Hospital Affiliation:

GROSSMONT HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): Board Certified Specialty: No
IHP of Southern Cal-PHP

N
 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT


CHISWICK, GARY

Provider ID: 206426

Provider Gender: Male

License Number: PA22667

NPI: 1174964001

 Provider English Spoken: Y


Cultural Competency: N


Hospital Affiliation:

GROSSMONT HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): Board Certified Specialty: No
IHP of Southern Cal-PHP

N
 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

CHISWICK, GARY

Provider ID: 206426

Provider Gender: Male

License Number: PA22667

NPI: 1174964001

 Provider English Spoken: Y


Cultural Competency: N


Hospital Affiliation:

GROSSMONT HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): Board Certified Specialty: No
IHP of Southern Cal-PHP

N

D2. Directorio de atención primaria

 *Accessibility: CONTACT PROVIDER*

PHYSICIANS ASSISTANT

CHISWICK, GARY

Provider ID: 206426

Provider Gender: Male

License Number: PA22667

NPI: 1174964001

 *Provider English Spoken: Y*
Cultural Competency: N


Hospital Affiliation:

GROSSMONT HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP

TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 *Phone: (760) 736-6767*

 *After Hours Phone: (760) 736-6767*

 *Website: www.ihpsocal.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

PHYSICIANS ASSISTANT

CHISWICK, GARY

Provider ID: 206426

Provider Gender: Male

License Number: PA22667

NPI: 1174964001

 *Provider English Spoken: Y*
Cultural Competency: N


Hospital Affiliation:


GROSSMONT HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP

TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 *Phone: (760) 736-6767*

 *After Hours Phone: (760) 736-6767*

 *Website: www.ihpsocal.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*

PHYSICIANS ASSISTANT

KOSEL, MATTHEW

Provider ID: 206426

Provider Gender: Male

License Number: PA17101


NPI: 1316947302


 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 *Phone: (760) 736-6767*

 *After Hours Phone: (760) 736-6767*

 *Website: www.ihpsocal.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*

PHYSICIANS ASSISTANT

KOSEL, MATTHEW

Provider ID: 206426

Provider Gender: Male

License Number: PA17101


NPI: 1316947302


 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 *Phone: (760) 736-6767*

 *After Hours Phone: (760) 736-6767*

 *Website: www.ihpsocal.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*

PHYSICIANS ASSISTANT

KOSEL, MATTHEW

Provider ID: 206426

Provider Gender: Male

License Number: PA17101


NPI: 1316947302


 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 *Phone: (760) 736-6767*

 *After Hours Phone: (760) 736-6767*

 *Website: www.ihpsocal.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

D2. Directorio de atención primaria

 *Accessibility: CONTACT PROVIDER*

PHYSICIANS ASSISTANT

KOSEL, MATTHEW

Provider ID: 206426

Provider Gender: Male


License Number: PA17101


NPI: 1316947302


 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 *Phone: (760) 736-6767*

 *After Hours Phone: (760) 736-6767*

 *Website: www.ihpsocal.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

PHYSICIANS ASSISTANT

KOSEL, MATTHEW

Provider ID: 206426

Provider Gender: Male


License Number: PA17101

NPI: 1316947302


 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 *Phone: (760) 736-6767*

 *After Hours Phone: (760) 736-6767*

 *Website: www.ihpsocal.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

PHYSICIANS ASSISTANT

KOSEL, MATTHEW

Provider ID: 206426

Provider Gender: Male


License Number: PA17101


NPI: 1316947302


 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 *Phone: (760) 736-6767*

 *After Hours Phone: (760) 736-6767*

 *Website: www.ihpsocal.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

PHYSICIANS ASSISTANT


RUSSO, KRISTA

Provider ID: 206426

Provider Gender: Female

License Number: PA53036


NPI: 1922471192


 *Provider English Spoken: Y*

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 *Phone: (760) 736-6767*

 *After Hours Phone: (760) 736-6767*

 *Website: www.ihpsocal.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM

PHYSICIANS ASSISTANT

RUSSO, KRISTA

Provider ID: 206426

Provider Gender: Female


License Number: PA53036


NPI: 1922471192


 *Provider English Spoken: Y*
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 *Phone: (760) 736-6767*

 *After Hours Phone: (760) 736-6767*

 *Website: www.ihpsocal.org*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT*

D2. Directorio de atención primaria

PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM




PHYSICIANS ASSISTANT


RUSSO, KRISTA

Provider ID: 206426
Provider Gender: Female
License Number: PA53036
NPI: 1922471192


Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP

TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767
 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM




PHYSICIANS ASSISTANT


RUSSO, KRISTA

Provider ID: 206426
Provider Gender: Female
License Number: PA53036
NPI: 1922471192

Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP

TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767
 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM




PHYSICIANS ASSISTANT


RUSSO, KRISTA

Provider ID: 206426
Provider Gender: Female
License Number: PA53036
NPI: 1922471192


Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP

TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767
 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM




PHYSICIANS ASSISTANT


RUSSO, KRISTA

Provider ID: 206426
Provider Gender: Female
License Number: PA53036
NPI: 1922471192

Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP

TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767
 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM

PHYSICIANS ASSISTANT



SPENCE, JAMIE

Provider ID: 206426
Provider Gender: Female
License Number: PA21723
NPI: 1518133032

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767

D2. Directorio de atención primaria

 After Hours Phone: (760) 736-6767

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT


SPENCE, JAMIE

Provider ID: 206426

Provider Gender: Female

License Number: PA21723

NPI: 1518133032

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP

TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760) 736-6767

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT


SPENCE, JAMIE

Provider ID: 206426

Provider Gender: Female

License Number: PA21723

NPI: 1518133032

 Provider English Spoken: Y


 Provider Language(s) Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE
 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760) 736-6767

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT


SPENCE, JAMIE

Provider ID: 206426

Provider Gender: Female

License Number: PA21723

NPI: 1518133032

 Provider English Spoken: Y


 Provider Language(s) Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE
 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760) 736-6767

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

SPENCE, JAMIE

Provider ID: 206426

Provider Gender: Female

License Number: PA21723

NPI: 1518133032

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760) 736-6767

 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

SPENCE, JAMIE

Provider ID: 206426

Provider Gender: Female

License Number: PA21723

NPI: 1518133032

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish


Cultural Competency: N


D2. Directorio de atención primaria

Board Certified Specialty: No
IHP of Southern Cal-PHP

TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767


 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT


TAHRIRI, BAHAREH

Provider ID: 206426

Provider Gender: Female

License Number: PA51867

NPI: 1295147387

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767


 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-5:00PM

PHYSICIANS ASSISTANT


TAHRIRI, BAHAREH

Provider ID: 206426

Provider Gender: Female

License Number: PA51867

NPI: 1295147387

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767


 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-5:00PM

PHYSICIANS ASSISTANT


TAHRIRI, BAHAREH

Provider ID: 206426

Provider Gender: Female

License Number: PA51867

NPI: 1295147387

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Farsi


Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP
TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767


 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SA 8:00AM-5:00PM

PHYSICIANS ASSISTANT

TAHRIRI, BAHAREH

Provider ID: 206426

Provider Gender: Female

License Number: PA51867

NPI: 1295147387

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767


 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

D2. Directorio de atención primaria

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM

PHYSICIANS ASSISTANT

TAHRIRI, BAHAREH

Provider ID: 206426

Provider Gender: Female

License Number: PA51867

NPI: 1295147387


Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM

PHYSICIANS ASSISTANT

TAHRIRI, BAHAREH

Provider ID: 206426

Provider Gender: Female

License Number: PA51867

NPI: 1295147387


Provider English Spoken: Y


Provider Language(s)
Spoken: Farsi

Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM

PODIATRIST

DASGUPTA, DEBORSHI

Provider ID: 614511

Provider Gender: Male

License Number: DPM5542

NPI: 1598129223

Provider English Spoken: Y


Provider Language(s)
Spoken: Bengali, Hindi,
Spanish

Cultural Competency: N

Hospital Affiliation: CLOVIS
COMMUNITY HOSPITAL,
COMMUNITY REGIONAL
MEDICAL CENTER-FRESNO,
FRESNO HEART AND
SURGICAL HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

 Phone: (760) 736-6767


 After Hours Phone: (760)
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PODIATRIST

DASGUPTA, DEBORSHI

Provider ID: 614511

Provider Gender: Male

License Number: DPM5542

NPI: 1598129223

Provider English Spoken: Y


Provider Language(s)
Spoken: Bengali, Hindi,
Spanish


Cultural Competency: N

Hospital Affiliation: CLOVIS
COMMUNITY HOSPITAL,
COMMUNITY REGIONAL
MEDICAL CENTER-FRESNO,
FRESNO HEART AND
SURGICAL HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

 Phone: (760) 736-6767

 After Hours Phone: (760)
736-6767


 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

D2. Directorio de atención primaria

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM

PODIATRIST



DASGUPTA, DEBORSHI

Provider ID: 614511

Provider Gender: Male

License Number: DPM5542

NPI: 1598129223

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Bengali, Hindi, Spanish*

Cultural Competency: N


Hospital Affiliation: CLOVIS


COMMUNITY HOSPITAL, COMMUNITY REGIONAL MEDICAL CENTER-FRESNO, FRESNO HEART AND SURGICAL HOSPITAL


Board Certified Specialty: No IHP of Southern Cal-PHP

TRUECARE

 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

 *Phone: (760) 736-6767*

 *After Hours Phone: (760) 736-6767*

 *Website: www.ihpsocal.org*
Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM

PODIATRIST



DASGUPTA, DEBORSHI

Provider ID: 614511

Provider Gender: Male

License Number: DPM5542

NPI: 1598129223

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Bengali, Hindi, Spanish*

Cultural Competency: N


Hospital Affiliation: CLOVIS


COMMUNITY HOSPITAL, COMMUNITY REGIONAL MEDICAL CENTER-FRESNO, FRESNO HEART AND SURGICAL HOSPITAL

Board Certified Specialty: No IHP of Southern Cal-PHP

TRUECARE

 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

 *Phone: (760) 736-6767*

 *After Hours Phone: (760) 736-6767*

 *Website: www.ihpsocal.org*
Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM

PODIATRIST



DASGUPTA, DEBORSHI

Provider ID: 614511

Provider Gender: Male

License Number: DPM5542

NPI: 1598129223

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Bengali, Hindi, Spanish*


Cultural Competency: N


Hospital Affiliation: CLOVIS

COMMUNITY HOSPITAL, COMMUNITY REGIONAL MEDICAL CENTER-FRESNO, FRESNO HEART AND SURGICAL HOSPITAL

Board Certified Specialty: No IHP of Southern Cal-PHP
TRUECARE

 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

 *Phone: (760) 736-6767*

 *After Hours Phone: (760) 736-6767*

 *Website: www.ihpsocal.org*
Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM

PODIATRIST



DASGUPTA, DEBORSHI

Provider ID: 614511

Provider Gender: Male

License Number: DPM5542

NPI: 1598129223

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Bengali, Hindi, Spanish*

Cultural Competency: N

Hospital Affiliation: CLOVIS

COMMUNITY HOSPITAL, COMMUNITY REGIONAL MEDICAL CENTER-FRESNO, FRESNO HEART AND SURGICAL HOSPITAL

D2. Directorio de atención primaria

Board Certified Specialty: No
IHP of Southern Cal-PHP
TRUECARE

1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

Phone: (760) 736-6767

After Hours Phone: (760)
736-6767

Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

SAN YSIDRO

ALLERGY IMMUNOLOGY

REDDY, SUMANA

Provider ID: 206292

Provider Gender: Female

License Number: C52581

NPI: 1053300251

Provider English Spoken: Y

Provider Language(s)
Spoken: Cambodian, Hindi,
Spanish, Telugu

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org

/clinics/san- ysidro- health
- center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

ALLERGY IMMUNOLOGY

REDDY, SUMANA

Provider ID: 206292

Provider Gender: Female

License Number: C52581

NPI: 1053300251

Provider English Spoken: Y

Provider Language(s)
Spoken: Cambodian, Hindi,
Spanish, Telugu

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org
/clinics/san- ysidro- health
- center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CARDIOVASCULAR DISEASE

PONCE, SONIA

Provider ID: 206292

Provider Gender: Female

License Number: A145008

NPI: 1164659033

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org
/clinics/san- ysidro- health
- center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CARDIOVASCULAR DISEASE

PONCE, SONIA

Provider ID: 206292

Provider Gender: Female

License Number: A145008

NPI: 1164659033


Provider English Spoken: Y


Provider Language(s)

D2. Directorio de atención primaria

Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL



Board Certified Specialty: No IHP of Southern Cal-PHP SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*
 *Website: www.syhealth.org /clinics/san-ysidro-health-center*


Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER **CELIZ, ADRIANA**

Provider ID: 227469
Provider Gender: Female
License Number: NP95004315
NPI: 1972956514



 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Board Certified Specialty: No IHP of Southern Cal-PHP SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

 3364 BEYER BLVD
SAN YSIDRO, CA 92173
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*
 *Website: https://www.syhealth.org/locations*


Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER **CELIZ, ADRIANA**

Provider ID: 227469
Provider Gender: Female
License Number: NP95004315
NPI: 1972956514


 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Board Certified Specialty: No IHP of Southern Cal-PHP SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS


 3364 BEYER BLVD
SAN YSIDRO, CA 92173
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*
 *Website: https://www.syhealth.org/locations*


Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*

CERTIFIED NURSE PRACTITIONER **CHAUSSE CASTRO, EKATERINA**

Provider ID: 227469
Provider Gender: Female
License Number: NP95018617
NPI: 1154040418


 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No IHP of Southern Cal-PHP SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

 3364 BEYER BLVD
SAN YSIDRO, CA 92173
 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*
 *Website: https://www.syhealth.org/locations*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE PRACTITIONER **CHAUSSE CASTRO, EKATERINA**

Provider ID: 227469
Provider Gender: Female
License Number: NP95018617
NPI: 1154040418

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No

D2. Directorio de atención primaria

IHP of Southern Cal-PHP
SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS

3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619)
662-4100
Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

GARCIA, TEDAYSHIA

Provider ID: 206292

Provider Gender: Female

License Number: NP95003355

NPI: 1659730778

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

GARCIA, TEDAYSHIA

Provider ID: 206292

Provider Gender: Female

License Number: NP95003355

NPI: 1659730778

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

GUADARRAMA, IGNACIO

Provider ID: 227469

Provider Gender: Male

License Number: NP95003671

NPI: 1821331174

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS

3364 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER

GUADARRAMA, IGNACIO

Provider ID: 227469

Provider Gender: Male

License Number: NP95003671

NPI: 1821331174

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No




IHP of Southern Cal-PHP

SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS

3364 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

D2. Directorio de atención primaria


 After Hours Phone: (619) 662-4100
 Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER





CERTIFIED NURSE


PRACTITIONER

HACINAS, REYNALDO

Provider ID: 206292
Provider Gender: Male
License Number: NP95003024
NPI: 1215304860

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center


Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER





CERTIFIED NURSE


PRACTITIONER

HACINAS, REYNALDO

Provider ID: 206292
Provider Gender: Male
License Number: NP95003024
NPI: 1215304860

 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER



CERTIFIED NURSE

PRACTITIONER

IBARRA, MARTHA

Provider ID: 206292
Provider Gender: Female
License Number: NP12112
NPI: 1114957289

 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, CHULA VISTA
Board Certified Specialty: No




IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

CERTIFIED NURSE




PRACTITIONER

IBARRA, MARTHA

Provider ID: 206292
Provider Gender: Female
License Number: NP12112
NPI: 1114957289

 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, CHULA VISTA
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER
 4004 BEYER BLVD
SAN YSIDRO, CA 92173

D2. Directorio de atención primaria


 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

CERTIFIED NURSE

PRACTITIONER


IBARRA, MARTHA

Provider ID: 227469

Provider Gender: Female

License Number: NP12112

NPI: 1114957289

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish



Cultural Competency: N


Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA

Board Certified Specialty: No IHP of Southern Cal-PHP

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

 3364 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER


IBARRA, MARTHA


Provider ID: 227469

Provider Gender: Female

License Number: NP12112

NPI: 1114957289

 Provider English Spoken: Y



 Provider Language(s) Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA

Board Certified Specialty: No IHP of Southern Cal-PHP
SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

 3364 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

KANTAS, PARIS

Provider ID: 206292

Provider Gender: Male


License Number: NP18661



NPI: 1114329612


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR

Board Certified Specialty: No IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

CERTIFIED NURSE

PRACTITIONER

KANTAS, PARIS

Provider ID: 206292

Provider Gender: Male

License Number: NP18661

NPI: 1114329612

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP

D2. Directorio de atención primaria

CORONADO HOSP AND
HEALTHCARE CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

CERTIFIED NURSE

PRACTITIONER

ORDINANZA, MYLENE

Provider ID: 227469
Provider Gender: Female
License Number: NP95019995
NPI: 1265019061

Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS

3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619)
662-4100

Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

ORDINANZA, MYLENE

Provider ID: 227469
Provider Gender: Female
License Number: NP95019995
NPI: 1265019061

Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS

3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619)
662-4100

Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

PITTMAN, LILIANA

Provider ID: 227469
Provider Gender: Female
License Number: NP95017732
NPI: 1326599002
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS

3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619)
662-4100
Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

CERTIFIED NURSE

PRACTITIONER



PITTMAN, LILIANA

Provider ID: 227469
Provider Gender: Female
License Number: NP95017732
NPI: 1326599002

Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS


3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619)


D2. Directorio de atención primaria

662-4100
 Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

SANCHEZ, MYRNA


Provider ID: 227469
Provider Gender: Female
License Number: NP95003721
NPI: 1548614506
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS

 3364 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

SANCHEZ, MYRNA



Provider ID: 227469

Provider Gender: Female
License Number: NP95003721
NPI: 1548614506
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS




 3364 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

VAZQUEZ-ERLBECK, MARTHA



Provider ID: 227469
Provider Gender: Female
License Number: NP95001960
NPI: 1669865960
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS






 3364 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100
 Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

VAZQUEZ-ERLBECK, MARTHA

Provider ID: 227469
Provider Gender: Female
License Number: NP95001960
NPI: 1669865960
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS

 3364 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

CHIROPRACTOR

OCHOA, RAUL

D2. Directorio de atención primaria

Provider ID: 206292

Provider Gender: Male

License Number: DC33693

NPI: 1518401827

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN


YSIDRO HEALTH CENTER

 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

CHIROPRACTOR

OCHOA, RAUL

Provider ID: 206292

Provider Gender: Male

License Number: DC33693

NPI: 1518401827

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN


YSIDRO HEALTH CENTER

 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

ENDOCRINOLOGY

METABOLISM DIABETES

CRUZ, MICHAEL

Provider ID: 206292

Provider Gender: Male

License Number: A138772

NPI: 1265851133

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN


YSIDRO HEALTH CENTER

 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

ENDOCRINOLOGY

METABOLISM DIABETES

CRUZ, MICHAEL

Provider ID: 206292

Provider Gender: Male

License Number: A138772

NPI: 1265851133

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN


YSIDRO HEALTH CENTER

 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

ALGHAMDI, ASMA

Provider ID: 227469

Provider Gender: Female

D2. Directorio de atención primaria

License Number: A167529

NPI: 1316310840

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HLTH SAN DIEGO

PACE SENIOR HLTH SVS

 3364 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

ALGHAMDI, ASMA

Provider ID: 227469

Provider Gender: Female

License Number: A167529

NPI: 1316310840

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HLTH SAN DIEGO

PACE SENIOR HLTH SVS

 3364 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

ALVAREZ-ESTRADA, MIGUEL

Provider ID: 206292

Provider Gender: Male

License Number: A157505

NPI: 1588197826

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL, PARADISE VALLEY

HOSPITAL

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN


YSIDRO HEALTH CENTER

 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

ALVAREZ-ESTRADA, MIGUEL

Provider ID: 206292

Provider Gender: Male

License Number: A157505

NPI: 1588197826

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL, PARADISE VALLEY

HOSPITAL

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN


YSIDRO HEALTH CENTER

 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

ALVAREZ-ESTRADA, MIGUEL

Provider ID: 227411

Provider Gender: Male

License Number: A157505

NPI: 1588197826

Provider English Spoken: Y



Provider Language(s)


D2. Directorio de atención primaria

Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, PARADISE VALLEY HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*


 *Website: syhealth.org/clinic/s/maternal- child- health- center*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:30AM-5:00PM

FAMILY PRACTICE

ALVAREZ-ESTRADA, MIGUEL


Provider ID: 227411

Provider Gender: Male

License Number: A157505

NPI: 1588197826

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N



Hospital Affiliation: SCRIPPS


MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY

HOSPITAL, PARADISE VALLEY HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 *Phone: (619) 662-4100*
 *After Hours Phone: (619) 662-4100*

 *Website: syhealth.org/clinic/s/maternal- child- health- center*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:30AM-5:00PM

FAMILY PRACTICE


ARRIETA, NOEMI

Provider ID: 206292

Provider Gender: Female

License Number: 20A11153

NPI: 1912223496

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MEMORIAL HOSPITAL


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*

 *Website: www.syhealth.org/clinics/san- ysidro- health - center*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

FAMILY PRACTICE

ARRIETA, NOEMI

Provider ID: 206292

Provider Gender: Female

License Number: 20A11153

NPI: 1912223496

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MEMORIAL HOSPITAL


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*

 *Website: www.syhealth.org/clinics/san- ysidro- health - center*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):



D2. Directorio de atención primaria

N





 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

FAMILY PRACTICE


BAUM, PETER

Provider ID: 227411
Provider Gender: Male
License Number: 20A14949
NPI: 1174919971
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish

Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR

 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: syhealth.org/clinics/maternal-child-health-center



Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:00PM





FAMILY PRACTICE

BAUM, PETER


Provider ID: 227411
Provider Gender: Male

License Number: 20A14949
NPI: 1174919971
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish

Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR



 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N





 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:00PM

FAMILY PRACTICE


BORSAN, COSMIN

Provider ID: 206292
Provider Gender: Male
License Number: 20A17643
NPI: 1679060255
 Provider English Spoken: Y
 Provider Language(s) Spoken: Romanian

Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER



 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

FAMILY PRACTICE

BORSAN, COSMIN

Provider ID: 206292
Provider Gender: Male
License Number: 20A17643
NPI: 1679060255
 Provider English Spoken: Y
 Provider Language(s) Spoken: Romanian
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

D2. Directorio de atención primaria

N

 *Accessibility: CONTACT PROVIDER*
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM



FAMILY PRACTICE


CAMPOS, MELISSA

Provider ID: 227411
Provider Gender: Female
License Number: A138474
NPI: 1427475318

Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish


Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No IHP of Southern Cal-PHP SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

 *4050 BEYER BLVD SAN YSIDRO, CA 92173*
 *Phone: (619) 662-4100*
 After Hours Phone: (619) 662-4100

 *Website: syhealth.org/clinics/maternal-child-health-center*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*



FAMILY PRACTICE


CAMPOS, MELISSA

Provider ID: 227411
Provider Gender: Female
License Number: A138474
NPI: 1427475318

Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No IHP of Southern Cal-PHP SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

 *4050 BEYER BLVD SAN YSIDRO, CA 92173*
 *Phone: (619) 662-4100*
 After Hours Phone: (619) 662-4100

 *Website: syhealth.org/clinics/maternal-child-health-center*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


FAMILY PRACTICE


CARRIEDO-CENICEROS, MARIA

Provider ID: 206292
Provider Gender: Female
License Number: A78373
NPI: 1295746618


Provider English Spoken: Y

Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No IHP of Southern Cal-PHP SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

 *4004 BEYER BLVD SAN YSIDRO, CA 92173*

 *Phone: (619) 662-4100*
Fax: (619) 205-6341

After Hours Phone: (619) 662-4100


 *Website: www.syhealth.org/clinics/san-ysidro-health-center*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


FAMILY PRACTICE


CARRIEDO-CENICEROS, MARIA

Provider ID: 206292
Provider Gender: Female
License Number: A78373
NPI: 1295746618




Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish

Cultural Competency: N
Board Certified Specialty: No IHP of Southern Cal-PHP SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

 *4004 BEYER BLVD SAN YSIDRO, CA 92173*


 *Phone: (619) 662-4100*
Fax: (619) 205-6341


D2. Directorio de atención primaria

 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

CASTILLO, STEPHANIE


Provider ID: 206292
Provider Gender: Female
License Number: A159673
NPI: 1902330723
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER





 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER


Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

FAMILY PRACTICE

CASTILLO, STEPHANIE

Provider ID: 206292
Provider Gender: Female
License Number: A159673
NPI: 1902330723
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER



 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

FAMILY PRACTICE

CEVALLOS, JAMES

Provider ID: 206292
Provider Gender: Male
License Number: A55469
NPI: 1720181829
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N



Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
Fax: (619) 205-6341
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER



FAMILY PRACTICE

CEVALLOS, JAMES

Provider ID: 206292
Provider Gender: Male
License Number: A55469
NPI: 1720181829
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER



 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
Fax: (619) 205-6341

D2. Directorio de atención primaria

 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE



CORONADO, MYRNA






Provider ID: 206292
Provider Gender: Female
License Number: A112627
NPI: 1710147566
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE



CORONADO, MYRNA

Provider ID: 227411
Provider Gender: Female
License Number: A112627
NPI: 1710147566
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No IHP of Southern Cal-PHP
SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR





 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: [syhealth.org/clinics/maternal-child-health-center](http://www.syhealth.org/clinics/maternal-child-health-center)
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

CORONADO, MYRNA







Provider ID: 227411
Provider Gender: Female
License Number: A112627
NPI: 1710147566
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No IHP of Southern Cal-PHP

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: [syhealth.org/clinics/maternal-child-health-center](http://www.syhealth.org/clinics/maternal-child-health-center)
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

CORONADO, MYRNA

Provider ID: 206292
Provider Gender: Female
License Number: A112627
NPI: 1710147566
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

D2. Directorio de atención primaria

American Sign Language (ASL): NPI: 1962662718

N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

DALUGDUGAN, ESTHER

Provider ID: 206292

Provider Gender: Female

License Number: A112511

NPI: 1962662718

Provider English Spoken: Y

Provider Language(s) Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

4004 BEYER BLVD

SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): NPI: 1194840231

N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

DALUGDUGAN, ESTHER

Provider ID: 206292

Provider Gender: Female

License Number: A112511

Provider English Spoken: Y

Provider Language(s) Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

4004 BEYER BLVD

SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

DAVIS, CHARLES

Provider ID: 206292

Provider Gender: Male

License Number: G41219

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

4004 BEYER BLVD

SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)

662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

FAMILY PRACTICE

DAVIS, CHARLES

Provider ID: 206292

Provider Gender: Male

License Number: G41219

NPI: 1194840231

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

4004 BEYER BLVD

SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

D2. Directorio de atención primaria

FAMILY PRACTICE


ESTRADA, JOHANNA

Provider ID: 206292

Provider Gender: Female

License Number: A127188

NPI: 1255698155

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS GREEN

HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

FAMILY PRACTICE


ESTRADA, JOHANNA

Provider ID: 206292

Provider Gender: Female

License Number: A127188

NPI: 1255698155

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS GREEN

HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

FAMILY PRACTICE


HEINRICI, ALEKA

Provider ID: 206292

Provider Gender: Female

License Number: A125329

NPI: 1780979120

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

FAMILY PRACTICE

HEINRICI, ALEKA

Provider ID: 206292

Provider Gender: Female

License Number: A125329

NPI: 1780979120

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN



YSIDRO HEALTH CENTER

D2. Directorio de atención primaria

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

FAMILY PRACTICE

HENDRIX, JEFFERSON



Provider ID: 227469
Provider Gender: Male
License Number: A32571
NPI: 1235142738
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS






 3364 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE



HENDRIX, JEFFERSON

Provider ID: 227469
Provider Gender: Male
License Number: A32571
NPI: 1235142738
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS




 3364 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

HERNANDEZ, RALPH



Provider ID: 227469
Provider Gender: Male
License Number: C42207
NPI: 1285782151
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No

IHP of Southern Cal-PHP
SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS

 3364 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

HERNANDEZ, RALPH

Provider ID: 227469
Provider Gender: Male
License Number: C42207
NPI: 1285782151
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS

 3364 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

D2. Directorio de atención primaria

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE


HERNANDEZ, RALPH

Provider ID: 206292

Provider Gender: Male

License Number: C42207

NPI: 1285782151

 *Provider English Spoken: Y*


 *Provider Language(s)
Spoken: Spanish*


Cultural Competency: N


*Board Certified Specialty: No
IHP of Southern Cal-PHP*

*SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER*

 *4004 BEYER BLVD
SAN YSIDRO, CA 92173*

 *Phone: (619) 662-4100*

 *After Hours Phone: (619)
662-4100*

 *Website: www.syhealth.org
/clinics/san-ysidro-health
-center*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE


HERNANDEZ, RALPH

Provider ID: 206292

Provider Gender: Male

License Number: C42207


NPI: 1285782151


 *Provider English Spoken: Y*


 *Provider Language(s)
Spoken: Spanish*


Cultural Competency: N

*Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER*

 *4004 BEYER BLVD
SAN YSIDRO, CA 92173*

 *Phone: (619) 662-4100*

 *After Hours Phone: (619)
662-4100*

 *Website: www.syhealth.org
/clinics/san-ysidro-health
-center*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE


KAUFHOLD, ANNE

Provider ID: 206292

Provider Gender: Female

License Number: A88893

NPI: 1164508073

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Arabic, Spanish*


Cultural Competency: N


*Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA*

*Board Certified Specialty: No
IHP of Southern Cal-PHP*

*SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER*

 *4004 BEYER BLVD
SAN YSIDRO, CA 92173*

 *Phone: (619) 662-4100*

 *After Hours Phone: (619)
662-4100*

 *Website: www.syhealth.org*

*/clinics/san-ysidro-health
-center*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

KAUFHOLD, ANNE


Provider ID: 206292

Provider Gender: Female

License Number: A88893

NPI: 1164508073

 *Provider English Spoken: Y*


 *Provider Language(s)
Spoken: Arabic, Spanish
Cultural Competency: N*


*Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA*


*Board Certified Specialty: No
IHP of Southern Cal-PHP*

*SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER*

 *4004 BEYER BLVD
SAN YSIDRO, CA 92173*

 *Phone: (619) 662-4100*

 *After Hours Phone: (619)
662-4100*

 *Website: www.syhealth.org
/clinics/san-ysidro-health
-center*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*

FAMILY PRACTICE

D2. Directorio de atención primaria

LARA, LESLEY

Provider ID: 206292

Provider Gender: Female

License Number: A173435

NPI: 1184112682

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN


YSIDRO HEALTH CENTER

 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: SU 10:00AM-4:00PM

M-F 8:30AM-5:30PM

SA 8:00AM-2:30PM

FAMILY PRACTICE

LARA, LESLEY

Provider ID: 206292

Provider Gender: Female

License Number: A173435

NPI: 1184112682

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN


YSIDRO HEALTH CENTER

 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: SU 10:00AM-4:00PM

M-F 8:30AM-5:30PM

SA 8:00AM-2:30PM

FAMILY PRACTICE

LEE, JOSEPH

Provider ID: 206292

Provider Gender: Male

License Number: A164201

NPI: 1417480948

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: ST

ELIZABETH HOSP

Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

 4004 BEYER BLVD


SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 205-6341

 After Hours Phone: (619)

662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

FAMILY PRACTICE

LEE, JOSEPH

Provider ID: 227469

Provider Gender: Male

License Number: A164201

NPI: 1417480948

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: ST

ELIZABETH HOSP

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HLTH SAN DIEGO

PACE SENIOR HLTH SVS

 3364 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

D2. Directorio de atención primaria

FAMILY PRACTICE


LEE, JOSEPH

Provider ID: 206292

Provider Gender: Male

License Number: A164201

NPI: 1417480948

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: ST

ELIZABETH HOSP

Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER


 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 205-6341

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

FAMILY PRACTICE


LEE, JOSEPH

Provider ID: 227469

Provider Gender: Male

License Number: A164201

NPI: 1417480948

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: ST

ELIZABETH HOSP

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HLTH SAN DIEGO


PACE SENIOR HLTH SVS

 3364 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE


LEPEZ, DAVID

Provider ID: 206292

Provider Gender: Male

License Number: A130348

NPI: 1205196029

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN


YSIDRO HEALTH CENTER

 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

LEPEZ, DAVID


Provider ID: 206292

Provider Gender: Male

License Number: A130348

NPI: 1205196029

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN


YSIDRO HEALTH CENTER

 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N





 Accessibility: CONTACT

D2. Directorio de atención primaria

<p>PROVIDER</p> <p><u>FAMILY PRACTICE</u></p> <p>LEUTE, ERIC</p> <p>Provider ID: 206292</p> <p>Provider Gender: Male</p> <p>License Number: A80832</p> <p>NPI: 1720171507</p> <p><input type="checkbox"/> Provider English Spoken: Y</p> <p><input type="checkbox"/> Provider Language(s) Spoken: Spanish</p> <p>Cultural Competency: N</p> <p>Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA</p> <p>Board Certified Specialty: No IHP of Southern Cal-PHP SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER</p> <p> 4004 BEYER BLVD SAN YSIDRO, CA 92173</p> <p> Phone: (619) 662-4100</p> <p> After Hours Phone: (619) 662-4100</p> <p> Website: www.syhealth.org/clinics/san-ysidro-health-center</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\150</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Hours: M-F 8:00AM-5:30PM SA 8:30AM-2:00PM</p> <p><u>FAMILY PRACTICE</u></p> <p>LEUTE, ERIC</p> <p>Provider ID: 206292</p>	<p>Provider Gender: Male</p> <p>License Number: A80832</p> <p>NPI: 1720171507</p> <p><input type="checkbox"/> Provider English Spoken: Y</p> <p><input type="checkbox"/> Provider Language(s) Spoken: Spanish</p> <p>Cultural Competency: N</p> <p>Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA</p> <p>Board Certified Specialty: No IHP of Southern Cal-PHP SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER</p> <p> 4004 BEYER BLVD SAN YSIDRO, CA 92173</p> <p> Phone: (619) 662-4100</p> <p> After Hours Phone: (619) 662-4100</p> <p> Website: www.syhealth.org/clinics/san-ysidro-health-center</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\150</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Hours: M-F 8:00AM-5:30PM SA 8:30AM-2:00PM</p> <p><u>FAMILY PRACTICE</u></p> <p>MOYA, MARY</p> <p>Provider ID: 206292</p> <p>Provider Gender: Female</p> <p>License Number: A80185</p> <p>NPI: 1093844417</p> <p><input type="checkbox"/> Provider English Spoken: Y</p> <p><input type="checkbox"/> Provider Language(s)</p>	<p>Spoken: Spanish</p> <p>Cultural Competency: N</p> <p>Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA</p> <p>Board Certified Specialty: No IHP of Southern Cal-PHP SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER</p> <p> 4004 BEYER BLVD SAN YSIDRO, CA 92173</p> <p> Phone: (619) 662-4100</p> <p> After Hours Phone: (619) 662-4100</p> <p> Website: www.syhealth.org/clinics/san-ysidro-health-center</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\150</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p><u>FAMILY PRACTICE</u></p> <p>MOYA, MARY</p> <p>Provider ID: 206292</p> <p>Provider Gender: Female</p> <p>License Number: A80185</p> <p>NPI: 1093844417</p> <p><input type="checkbox"/> Provider English Spoken: Y</p> <p><input type="checkbox"/> Provider Language(s) Spoken: Spanish</p> <p>Cultural Competency: N</p> <p>Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA</p> <p>Board Certified Specialty: No IHP of Southern Cal-PHP</p>
--	---	---

D2. Directorio de atención primaria


SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


NAVARRO, VANESSAMARIA


Provider ID: 227469

Provider Gender: Female

License Number: A113624

NPI: 1952563421

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Filipino, Spanish,
Tagalog

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL CHULA
VISTA, SHARP CHULA VISTA
MED CTR


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HLTH SAN DIEGO

PACE SENIOR HLTH SVS

 3364 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: <https://www.syhealth.org/locations>

[alth.org/locations](https://www.syhealth.org/locations)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


NAVARRO, VANESSAMARIA


Provider ID: 227469

Provider Gender: Female

License Number: A113624

NPI: 1952563421

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Filipino, Spanish,
Tagalog

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL CHULA
VISTA, SHARP CHULA VISTA
MED CTR


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HLTH SAN DIEGO

PACE SENIOR HLTH SVS

 3364 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

NGUYEN, CARIE

Provider ID: 206292

Provider Gender: Female

License Number: A106103

NPI: 1174781132

 Provider English Spoken: Y


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

FAMILY PRACTICE

NGUYEN, CARIE

Provider ID: 206292

Provider Gender: Female

License Number: A106103

NPI: 1174781132

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

D2. Directorio de atención primaria

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

FAMILY PRACTICE

NIKZAD, JASON

Provider ID: 206292

Provider Gender: Male

License Number: 20A12653

NPI: 1508121674

Provider English Spoken: Y

Provider Language(s)

Spoken: Farsi, Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

FAMILY PRACTICE

NIKZAD, JASON

Provider ID: 206292

Provider Gender: Male

License Number: 20A12653

NPI: 1508121674

Provider English Spoken: Y

Provider Language(s)

Spoken: Farsi, Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

FAMILY PRACTICE

ORTEGA, LUIS

Provider ID: 206292

Provider Gender: Male

License Number: A180886

NPI: 1558924936

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

FAMILY PRACTICE

ORTEGA, LUIS


Provider ID: 206292

Provider Gender: Male

License Number: A180886

D2. Directorio de atención primaria

NPI: 1558924936

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL


Board Certified Specialty: No

IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

FAMILY PRACTICE

ORTIZ, KENNETH

Provider ID: 206292

Provider Gender: Male

License Number: A156607

NPI: 1356761571

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MEMORIAL


HOSPITAL


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

ORTIZ, KENNETH

Provider ID: 206292

Provider Gender: Male

License Number: A156607

NPI: 1356761571

 Provider English Spoken: Y

Cultural Competency: N


Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MEMORIAL


HOSPITAL


Board Certified Specialty: No

IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

RAJAIPOUR, NEGIN


Provider ID: 206292

Provider Gender: Female

License Number: A145480

NPI: 1508286709

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Farsi, Persian


Cultural Competency: N


Hospital Affiliation: CHULA
VISTA COMM HOSP


Board Certified Specialty: No

IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

FAMILY PRACTICE

D2. Directorio de atención primaria

RAJAIPOUR, NEGIN

Provider ID: 206292

Provider Gender: Female

License Number: A145480

NPI: 1508286709

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi, Persian

Cultural Competency: N

Hospital Affiliation: CHULA

VISTA COMM HOSP

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

FAMILY PRACTICE

RAJAIPOUR, NEGIN

Provider ID: 227469

Provider Gender: Female

License Number: A145480

NPI: 1508286709

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi, Persian

Cultural Competency: N

Hospital Affiliation: CHULA

VISTA COMM HOSP

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HLTH SAN DIEGO

PACE SENIOR HLTH SVS

3364 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/locations

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

RAJAIPOUR, NEGIN

Provider ID: 227469

Provider Gender: Female

License Number: A145480

NPI: 1508286709

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi, Persian

Cultural Competency: N

Hospital Affiliation: CHULA

VISTA COMM HOSP

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HLTH SAN DIEGO

PACE SENIOR HLTH SVS

3364 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)

662-4100

Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

ITTER, STEVEN

Provider ID: 206292

Provider Gender: Male

License Number: 20A7435

NPI: 1356556021

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

4004 BEYER BLVD

SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

ITTER, STEVEN

Provider ID: 206292

Provider Gender: Male

D2. Directorio de atención primaria


License Number: 20A7435


NPI: 1356556021


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

ROJAS, STEVEN

Provider ID: 206292

Provider Gender: Male

License Number: A132982

NPI: 1801230297


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

FAMILY PRACTICE


ROJAS, SARAH

Provider ID: 206292

Provider Gender: Female

License Number: A139169

NPI: 1245645076

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

FAMILY PRACTICE

ROJAS, STEVEN

Provider ID: 206292

Provider Gender: Male

License Number: A132982

NPI: 1801230297


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

FAMILY PRACTICE

ROJAS, SARAH


Provider ID: 206292

Provider Gender: Female





License Number: A139169


NPI: 1245645076

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish





D2. Directorio de atención primaria


Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: [www.syhealth.org](http://www.syhealth.org/clinics/san-ysidro-health-center)
/clinics/san-ysidro-health
- center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

FAMILY PRACTICE

ROSENBAUM, HERBERT

Provider ID: 206292
Provider Gender: Male
License Number: A169694
NPI: 1922532712
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org

/clinics/san-ysidro-health
- center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

FAMILY PRACTICE

ROSENBAUM, HERBERT

Provider ID: 206292
Provider Gender: Male
License Number: A169694
NPI: 1922532712
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: [www.syhealth.org](http://www.syhealth.org/clinics/san-ysidro-health-center)
/clinics/san-ysidro-health
- center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM



FAMILY PRACTICE

SALEM, RAMSEY




Provider ID: 206292
Provider Gender: Male
License Number: A158364
NPI: 1245401298
 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: [www.syhealth.org](http://www.syhealth.org/clinics/san-ysidro-health-center)
/clinics/san-ysidro-health
- center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER

FAMILY PRACTICE

SALEM, RAMSEY

Provider ID: 206292
Provider Gender: Male
License Number: A158364
NPI: 1245401298
 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER
 4004 BEYER BLVD
SAN YSIDRO, CA 92173

D2. Directorio de atención primaria

 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

SHAHTAJI, ALAN

Provider ID: 206292

Provider Gender: Male


License Number: 20A11087


NPI: 1972751089


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100


 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

SHAHTAJI, ALAN

Provider ID: 206292

Provider Gender: Male


License Number: 20A11087



NPI: 1972751089


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE



SNYDER, CHRISTOPHER

Provider ID: 206292

Provider Gender: Male

License Number: 20A7502

NPI: 1922041235



 Provider English Spoken: Y
 Provider Language(s)


Spoken: Spanish
Cultural Competency: N

Hospital Affiliation: PIH

Hospital - Downey, JOHN F
KENNEDY MEMORIAL HOSP,
CEDARS SINAI MEDICAL
CENTER, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
EISENHOWER MEDICAL CTR,
GROSSMONT HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


SNYDER, CHRISTOPHER

Provider ID: 206292

Provider Gender: Male

License Number: 20A7502

NPI: 1922041235

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Spanish
Cultural Competency: N

Hospital Affiliation: PIH
Hospital - Downey, JOHN F
KENNEDY MEMORIAL HOSP,
CEDARS SINAI MEDICAL

D2. Directorio de atención primaria

CENTER, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
EISENHOWER MEDICAL CTR,
GROSSMONT HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619)
662-4100
Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE **STALEY, MICHAELA**

Provider ID: 206292
Provider Gender: Female
License Number: A157772
NPI: 1912438250
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619)
662-4100
Website: www.syhealth.org/clinics/san-ysidro-health-center

- center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE **STALEY, MICHAELA**

Provider ID: 206292
Provider Gender: Female
License Number: A157772
NPI: 1912438250
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619)
662-4100
Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE **SWEET, PATRICK**

Provider ID: 206292
Provider Gender: Male
License Number: A101827
NPI: 1457407702

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: HOAG
HOSPITAL IRVINE, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, GROSSMONT
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL,
DESERT REGIONAL MED CTR,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
PIONEERS MEMORIAL
HOSPITAL, PIONEERS
MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER


4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619)
662-4100
Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM




FAMILY PRACTICE **SWEET, PATRICK**


Provider ID: 206292
Provider Gender: Male
License Number: A101827
NPI: 1457407702

D2. Directorio de atención primaria

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: HOAG
HOSPITAL IRVINE, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, GROSSMONT
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL,
DESERT REGIONAL MED CTR,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
PIONEERS MEMORIAL
HOSPITAL, PIONEERS
MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

FAMILY PRACTICE



TALAVERA, GREGORY


Provider ID: 206292


Provider Gender: Male


License Number: A40061


NPI: 1740337161

 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

Hours: M-TU 8:30AM-5:30PM

FAMILY PRACTICE


TALAVERA, GREGORY

Provider ID: 206292

Provider Gender: Male

License Number: A40061

NPI: 1740337161

 *Provider English Spoken: Y*

 *Provider Language(s)*

Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN


YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)


662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

Hours: M-TU 8:30AM-5:30PM

FAMILY PRACTICE


TAN, LO FU

Provider ID: 227469


Provider Gender: Male


License Number: C170935

NPI: 1356314835

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS

 3364 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

FAMILY PRACTICE

TAN, LO FU

Provider ID: 227469

D2. Directorio de atención primaria

Provider Gender: Male
License Number: C170935
NPI: 1356314835
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS
 3364 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

TREJO, RAUL

Provider ID: 206292
Provider Gender: Male
License Number: A77936
NPI: 1174534184
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER
 4004 BEYER BLVD

SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

TREJO, RAUL

Provider ID: 206292
Provider Gender: Male
License Number: A77936
NPI: 1174534184
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

UTZ, JACK





Provider ID: 206292
Provider Gender: Male
License Number: A183145
NPI: 1194353094
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER


FAMILY PRACTICE

UTZ, JACK

Provider ID: 206292
Provider Gender: Male
License Number: A183145
NPI: 1194353094
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish



D2. Directorio de atención primaria

Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: [www.syhealth.org](http://www.syhealth.org/clinics/san-ysidro-health-center)
/clinics/san-ysidro-health
- center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER


FAMILY PRACTICE

VANHOLLEBEKE, RACHEL

Provider ID: 206292
Provider Gender: Female
License Number: A177337
NPI: 1497217756
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER



 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org

/clinics/san-ysidro-health
- center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM


FAMILY PRACTICE

VANHOLLEBEKE, RACHEL

Provider ID: 206292
Provider Gender: Female
License Number: A177337
NPI: 1497217756
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER



 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: [www.syhealth.org](http://www.syhealth.org/clinics/san-ysidro-health-center)
/clinics/san-ysidro-health
- center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

FAMILY PRACTICE


VELASQUEZ, SHARON

Provider ID: 206292
Provider Gender: Female
License Number: A71304
NPI: 1972732584
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA


Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: [www.syhealth.org](http://www.syhealth.org/clinics/san-ysidro-health-center)
/clinics/san-ysidro-health
- center


Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER

FAMILY PRACTICE

VELASQUEZ, SHARON


Provider ID: 206292
Provider Gender: Female
License Number: A71304
NPI: 1972732584
 *Provider English Spoken: Y*


D2. Directorio de atención primaria


 *Provider Language(s)
Spoken: Spanish*
Cultural Competency: N
*Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA*

Board Certified Specialty: No
IHP of Southern Cal-PHP
*SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER*

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 *Phone: (619) 662-4100*


 *After Hours Phone: (619)
662-4100*

 *Website: www.syhealth.org/clinics/san-ysidro-health-center*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

*American Sign Language (ASL):
N*


 *Accessibility: CONTACT
PROVIDER*

FQHC


**SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR,**

Provider ID: 227411

NPI: 1558852947


 *Provider English Spoken: Y*
Cultural Competency: N
IHP of Southern Cal-PHP
*SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR*

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 *Phone: (619) 662-4100*

Fax: (619) 205-1967

 *After Hours Phone: (619)
662-4100*

 *Website: syhealth.org/clinics/maternal-child-health-center*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*


Hours: M-F 8:00AM-5:00PM

FQHC


**SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR,**

Provider ID: 227411


NPI: 1558852947


 *Provider English Spoken: Y*
Cultural Competency: N
IHP of Southern Cal-PHP
*SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR*

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 *Phone: (619) 662-4100*

Fax: (619) 205-1967

 *After Hours Phone: (619)
662-4100*

 *Website: syhealth.org/clinics/maternal-child-health-center*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*


Hours: M-F 8:00AM-5:00PM


FQHC


**SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER,**

Provider ID: 206292

NPI: 1952364747


 *Provider English Spoken: Y*
Cultural Competency: N
IHP of Southern Cal-PHP
*SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER*

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 *Phone: (619) 662-4100*

Fax: (619) 205-6305


 *After Hours Phone: (619)
662-4100*

 *Website: www.syhealth.org/clinics/san-ysidro-health-center*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*


*Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM*

FQHC


**SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER,**

Provider ID: 206292

NPI: 1952364747

 *Provider English Spoken: Y*
Cultural Competency: N
IHP of Southern Cal-PHP
*SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER*

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 *Phone: (619) 662-4100*

D2. Directorio de atención primaria

Fax: (619) 205-6305

☎ After Hours Phone: (619) 662-4100

🌐 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

FQHC

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS,

Provider ID: 227469

NPI: 1801438239

☐ Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

📍 3364 BEYER BLVD
SAN YSIDRO, CA 92173

☎ Phone: (619) 662-4100

Fax: (619) 600-4870

☎ After Hours Phone: (619) 662-4100

🌐 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FQHC

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS,

Provider ID: 227469

NPI: 1801438239

☐ Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

📍 3364 BEYER BLVD
SAN YSIDRO, CA 92173

☎ Phone: (619) 662-4100

Fax: (619) 600-4870

☎ After Hours Phone: (619) 662-4100

🌐 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

GENERAL PRACTICE

REYNAGA, JOSUE

Provider ID: 206292

Provider Gender: Male

License Number: A181644

NPI: 1356929111

☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

📍 4004 BEYER BLVD
SAN YSIDRO, CA 92173

☎ Phone: (619) 662-4100

☎ After Hours Phone: (619) 662-4100

🌐 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

GENERAL PRACTICE

REYNAGA, JOSUE

Provider ID: 206292

Provider Gender: Male

License Number: A181644

NPI: 1356929111

☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN


YSIDRO HEALTH CENTER

📍 4004 BEYER BLVD
SAN YSIDRO, CA 92173

☎ Phone: (619) 662-4100

☎ After Hours Phone: (619) 662-4100

D2. Directorio de atención primaria

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

GENERAL PRACTICE


TEJEDA, FRANCISCO

Provider ID: 206292

Provider Gender: Male

License Number: A66885

NPI: 1407940075

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

GENERAL PRACTICE


TEJEDA, FRANCISCO

Provider ID: 206292

Provider Gender: Male

License Number: A66885

NPI: 1407940075

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

GYNECOLOGY


CALDERON, JORGE

Provider ID: 206292

Provider Gender: Male

License Number: A40480

NPI: 1407800881

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA


VISTA, LOMPOC VALLEY
MEDICAL CENTER


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

GYNECOLOGY

CALDERON, JORGE

Provider ID: 206292

Provider Gender: Male

License Number: A40480

NPI: 1407800881

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA
VISTA, LOMPOC VALLEY

MEDICAL CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER


 4004 BEYER BLVD

D2. Directorio de atención primaria

 SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

INFECTIOUS DISEASE


PROMER, KATHERINE

Provider ID: 206292

Provider Gender: Female

License Number: A131952

NPI: 1306280607

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, SCRIPPS MEMORIAL

HOSPITAL, PALOMAR

MEDICAL CENTER

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN


YSIDRO HEALTH CENTER

 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

INFECTIOUS DISEASE


PROMER, KATHERINE

Provider ID: 206292

Provider Gender: Female

License Number: A131952

NPI: 1306280607

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, SCRIPPS MEMORIAL

HOSPITAL, PALOMAR

MEDICAL CENTER

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN


YSIDRO HEALTH CENTER

 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

INTERNAL MEDICINE

ALDOUS, JEANNETTE

Provider ID: 206292

Provider Gender: Female

License Number: A101017

NPI: 1073650339

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN


YSIDRO HEALTH CENTER

 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100


 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

ALDOUS, JEANNETTE


Provider ID: 206292

Provider Gender: Female

License Number: A101017

D2. Directorio de atención primaria

NPI: 1073650339

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN


YSIDRO HEALTH CENTER

 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

CARPENTERIII, ROBERT

Provider ID: 206292

Provider Gender: Male

License Number: 20A10964

NPI: 1356343040

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN


YSIDRO HEALTH CENTER

 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

INTERNAL MEDICINE

CARPENTERIII, ROBERT

Provider ID: 206292

Provider Gender: Male

License Number: 20A10964

NPI: 1356343040

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN


YSIDRO HEALTH CENTER

 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

INTERNAL MEDICINE

CHEN, TSUH-YIN

Provider ID: 206292

Provider Gender: Female

License Number: C55563

NPI: 1093803520

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Portuguese,
Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO

Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER


 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 205-6341

 After Hours Phone: (619)
662-4100


 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

CHEN, TSUH-YIN

D2. Directorio de atención primaria

Provider ID: 206292

Provider Gender: Female

License Number: C55563

NPI: 1093803520

Provider English Spoken: Y


Provider Language(s)
Spoken: Portuguese,
Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 205-6341

 After Hours Phone: (619)
662-4100


 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

CHOW, MAN HUNG

Provider ID: 227469

Provider Gender: Female

License Number: G66745

NPI: 1225149115

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese, Mandarin
Cultural Competency: N

Hospital Affiliation: PARADISE

VALLEY HOSPITAL, SHARP

CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS

MEMORIAL HOSPITAL,


SCRIPPS MERCY HOSPITAL


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HLTH SAN DIEGO

PACE SENIOR HLTH SVS

 3364 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

CHOW, MAN HUNG

Provider ID: 227469

Provider Gender: Female

License Number: G66745

NPI: 1225149115

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese, Mandarin
Cultural Competency: N

Hospital Affiliation: PARADISE

VALLEY HOSPITAL, SHARP

CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HLTH SAN DIEGO

PACE SENIOR HLTH SVS

 3364 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

DELAROSA, JOSE

Provider ID: 206292

Provider Gender: Male

License Number: A49267

NPI: 1689646572

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog
Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER


 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100








 Website: www.syhealth.org/clinics/san-ysidro-health-center

D2. Directorio de atención primaria

- center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

DELAROSA, JOSE

Provider ID: 206292
Provider Gender: Male
License Number: A49267
NPI: 1689646572
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Tagalog
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER


INTERNAL MEDICINE







DILLON, BENEDICT

Provider ID: 227411
Provider Gender: Male
License Number: A111118
NPI: 1710142708
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, CHULA VISTA
COMM HOSP
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR
 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: syhealth.org/clinics/maternal-child-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE



DILLON, BENEDICT

Provider ID: 227411
Provider Gender: Male
License Number: A111118
NPI: 1710142708
 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, CHULA VISTA
COMM HOSP
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR
 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: syhealth.org/clinics/maternal-child-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

HURST, MICHAEL

Provider ID: 206292
Provider Gender: Male
License Number: 20A8081
NPI: 1205893104
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SUTTER
TRACY COMMUNITY HOSP,

D2. Directorio de atención primaria

SCRIPPS MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

4004 BEYER BLVD

SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-8:00PM
SA 8:00AM-2:00PM

INTERNAL MEDICINE

HURST, MICHAEL

Provider ID: 206292

Provider Gender: Male

License Number: 20A8081

NPI: 1205893104

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SUTTER
TRACY COMMUNITY HOSP,
SCRIPPS MEMORIAL

HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER



4004 BEYER BLVD
SAN YSIDRO, CA 92173



Phone: (619) 662-4100



After Hours Phone: (619)
662-4100



Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-8:00PM
SA 8:00AM-2:00PM

INTERNAL MEDICINE

KAUFER, DAVID

Provider ID: 206292

Provider Gender: Male

License Number: G80107

NPI: 1710082789

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER



4004 BEYER BLVD
SAN YSIDRO, CA 92173



Phone: (619) 662-4100



After Hours Phone: (619)
662-4100



Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N



Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

INTERNAL MEDICINE

KAUFER, DAVID

Provider ID: 206292

Provider Gender: Male

License Number: G80107

NPI: 1710082789

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER



4004 BEYER BLVD
SAN YSIDRO, CA 92173



Phone: (619) 662-4100



After Hours Phone: (619)
662-4100



Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N



Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

INTERNAL MEDICINE

KAUFER, DAVID

Provider ID: 227469

Provider Gender: Male

D2. Directorio de atención primaria

License Number: G80107
NPI: 1710082789
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS

3364 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

KAUFER, DAVID

Provider ID: 227469
Provider Gender: Male
License Number: G80107
NPI: 1710082789
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS

3364 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)

662-4100
 Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

LAMANTIA, MICHELE

Provider ID: 206292
Provider Gender: Female
License Number: G71855
NPI: 1124176102
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

LAMANTIA, MICHELE

Provider ID: 206292

Provider Gender: Female
License Number: G71855
NPI: 1124176102
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER


INTERNAL MEDICINE


MAY, LOUIS

Provider ID: 206292
Provider Gender: Male
License Number: A138568
NPI: 1720497514
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
EISENHOWER MEDICAL CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN

D2. Directorio de atención primaria

YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100


 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

N

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

MAY, LOUIS


Provider ID: 206292

Provider Gender: Male

License Number: A138568

NPI: 1720497514

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:


EISENHOWER MEDICAL CTR


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): License Number: A99433
NPI: 1538371844

 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

PARK, DANIEL

Provider ID: 206292

Provider Gender: Male

License Number: A99433

NPI: 1538371844

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

INTERNAL MEDICINE

PARK, DANIEL

Provider ID: 206292

Provider Gender: Male

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

INTERNAL MEDICINE

POAST, JENNIFER

Provider ID: 206292

Provider Gender: Female

License Number: 20A8245

NPI: 1164435681

 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

 4004 BEYER BLVD

D2. Directorio de atención primaria

SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

POAST, JENNIFER

Provider ID: 206292
Provider Gender: Female
License Number: 20A8245
NPI: 1164435681
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

RAMIREZSANCHEZ, CLAUDIA
Provider ID: 206292
Provider Gender: Female
License Number: A160493
NPI: 1659720555
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

RAMIREZSANCHEZ, CLAUDIA
Provider ID: 206292
Provider Gender: Female
License Number: A160493
NPI: 1659720555
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE

REDDY, SAMATHHA

Provider ID: 227469
Provider Gender: Female
License Number: A120797
NPI: 1659620854
Provider English Spoken: Y
Provider Language(s) Spoken: Gujarati, Hindi, Punjabi, Spanish, Telugu
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, ALVARADO HOSPITAL LLC, GROSSMONT HOSPITAL, SHARP CHULA VISTA MED CTR, ST AGNES MEDICAL

D2. Directorio de atención primaria

CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS

 3364 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: [https://www.syhe](https://www.syhealth.org/locations)
[alth.org/locations](https://www.syhealth.org/locations)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):


N


 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

REDDY, SAMATHHA

Provider ID: 227469
Provider Gender: Female
License Number: A120797
NPI: 1659620854

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Gujarati, Hindi,
Punjabi, Spanish, Telugu

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,
ALVARADO HOSPITAL LLC,
GROSSMONT HOSPITAL,
SHARP CHULA VISTA MED
CTR, ST AGNES MEDICAL
CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS

 3364 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: [https://www.syhe](https://www.syhealth.org/locations)
[alth.org/locations](https://www.syhealth.org/locations)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):


N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

SALERNO, MARIANA

Provider ID: 206292
Provider Gender: Female
License Number: A131021
NPI: 1598921645

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: Providence

St. Joseph Hospital Eureka


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: [www.syhealth.org](http://www.syhealth.org/clinics/san-ysidro-health-center)
[/clinics/san-ysidro- health](http://www.syhealth.org/clinics/san-ysidro-health-center)
- center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

SALERNO, MARIANA

Provider ID: 206292
Provider Gender: Female
License Number: A131021
NPI: 1598921645

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: Providence


St. Joseph Hospital Eureka


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: [www.syhealth.org](http://www.syhealth.org/clinics/san-ysidro-health-center)
[/clinics/san-ysidro- health](http://www.syhealth.org/clinics/san-ysidro-health-center)
- center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N



 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

SCHNEIDER-MUNOZ, MARGARITA

Provider ID: 206292
Provider Gender: Female
License Number: G81461
NPI: 1821299520

D2. Directorio de atención primaria


 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Spanish*


Cultural Competency: N


*Board Certified Specialty: No
IHP of Southern Cal-PHP*

*SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER*

 *4004 BEYER BLVD
SAN YSIDRO, CA 92173*

 *Phone: (619) 662-4100*

 *After Hours Phone: (619)
662-4100*

 *Website: www.syhealth.org/clinics/san-ysidro-health-center*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

INTERNAL MEDICINE


**SCHNEIDER-MUNOZ,
MARGARITA**

Provider ID: 206292

Provider Gender: Female

License Number: G81461

NPI: 1821299520

 *Provider English Spoken: Y*


 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

*Board Certified Specialty: No
IHP of Southern Cal-PHP*


*SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER*

 *4004 BEYER BLVD
SAN YSIDRO, CA 92173*

 *Phone: (619) 662-4100*

 *After Hours Phone: (619)*

662-4100

 *Website: www.syhealth.org/clinics/san-ysidro-health-center*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

INTERNAL MEDICINE


SHEIKH MOHAMED, AMIRA


Provider ID: 227469

Provider Gender: Female

License Number: A153975

NPI: 1831583079

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Arabic, French,
Hindi, Italian, Urdu*

Cultural Competency: N

*Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL*


CHULA VISTA


Board Certified Specialty: No


IHP of Southern Cal-PHP

*SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS*

 *3364 BEYER BLVD
SAN YSIDRO, CA 92173*

 *Phone: (619) 662-4100*

 *After Hours Phone: (619)
662-4100*

 *Website: <https://www.syhealth.org/locations>*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT*

PROVIDER

Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE

SHEIKH MOHAMED, AMIRA


Provider ID: 227469

Provider Gender: Female

License Number: A153975

NPI: 1831583079

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Arabic, French,
Hindi, Italian, Urdu*

Cultural Competency: N


*Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL*


CHULA VISTA


*Board Certified Specialty: No
IHP of Southern Cal-PHP*

*SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS*

 *3364 BEYER BLVD
SAN YSIDRO, CA 92173*

 *Phone: (619) 662-4100*

 *After Hours Phone: (619)
662-4100*

 *Website: <https://www.syhealth.org/locations>*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE

SY, RAMON

Provider ID: 227469

Provider Gender: Male

D2. Directorio de atención primaria

License Number: A51843

NPI: 1982617403

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS

MEMORIAL HOSPITAL,

PARADISE VALLEY HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HLTH SAN DIEGO

PACE SENIOR HLTH SVS

3364 BEYER BLVD

SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)

662-4100

Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

INTERNAL MEDICINE

SY, RAMON

Provider ID: 227469

Provider Gender: Male

License Number: A51843

NPI: 1982617403

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS

MEMORIAL HOSPITAL,

PARADISE VALLEY HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HLTH SAN DIEGO

PACE SENIOR HLTH SVS

3364 BEYER BLVD

SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)

662-4100

Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

INTERNAL MEDICINE

VELAZQUEZ CAMARENA,

MARIA

Provider ID: 206292

Provider Gender: Female

License Number: A56153

NPI: 1518965714

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

4004 BEYER BLVD

SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)

662-4100

Website: www.syhealth.org

/clinics/san-ysidro-health

-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

INTERNAL MEDICINE

VELAZQUEZ CAMARENA,

MARIA

Provider ID: 206292

Provider Gender: Female

License Number: A56153

NPI: 1518965714

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

4004 BEYER BLVD

SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)

662-4100

Website: www.syhealth.org

/clinics/san-ysidro-health


-center

Medi-Cal Open Panel: Yes

D2. Directorio de atención primaria

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

INTERNAL MEDICINE

WEN, AKI YEN CHANG

Provider ID: 227411

Provider Gender: Male

License Number: 20A12555


NPI: 1205126505


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE


WEN, AKI YEN CHANG

Provider ID: 227411

Provider Gender: Male

License Number: 20A12555

NPI: 1205126505


 Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE

GERIATRIC MEDICINE

PANDIT, IVY

Provider ID: 206292

Provider Gender: Female

License Number: C53735

NPI: 1891796165

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: KAISER
FOUNDATION HOSPITAL
RIVERSIDE, RIVERSIDE


COUNTY REGIONAL MED CTR


Board Certified Specialty: No
IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 205-1950


 After Hours Phone: (619)
205-1950

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

INTERNAL MEDICINE

GERIATRIC MEDICINE

PANDIT, IVY

Provider ID: 206292

Provider Gender: Female

License Number: C53735

NPI: 1891796165


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: KAISER
FOUNDATION HOSPITAL
RIVERSIDE, RIVERSIDE


COUNTY REGIONAL MED CTR


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 205-1950

 After Hours Phone: (619)
205-1950

 Website: www.syhealth.org/clinics/san-ysidro-health-center


Medi-Cal Open Panel: Yes

D2. Directorio de atención primaria

Min/Max Age: 0\150

American Sign Language (ASL): **OBSTETRICS / GYNECOLOGY**

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

OBSTETRICS / GYNECOLOGY

ANDERSON, MANDY

Provider ID: 227411

Provider Gender: Female

License Number: A113914


NPI: 1982812392


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SHARP CHULA VISTA
MED CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): **BERGGREN, ERICA**

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:00PM

ANDERSON, MANDY

Provider ID: 227411

Provider Gender: Female

License Number: A113914


NPI: 1982812392


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SHARP CHULA VISTA
MED CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY

BERGGREN, ERICA

Provider ID: 227411

Provider Gender: Female

License Number: C158543


NPI: 1912159674


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP
MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,
SCRIPPS MEMORIAL

HOSPITAL, SCRIPPS GREEN
HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA,
SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY

BERGGREN, ERICA

Provider ID: 227411

Provider Gender: Female

License Number: C158543





NPI: 1912159674

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SHARP

D2. Directorio de atención primaria

MEMORIAL HOSPITAL, SHARP
MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,
SCRIPPS MEMORIAL
HOSPITAL, SCRIPPS GREEN
HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA,
SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR



 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N





 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:00PM


OBSTETRICS / GYNECOLOGY

CARR, MIANDA

Provider ID: 227411
Provider Gender: Female
License Number: A104660
NPI: 1083815823
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: ST
JOSEPHS MEDICAL CENTER,



SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS MERCY
HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR






 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY







CARR, MIANDA

Provider ID: 206292
Provider Gender: Female
License Number: A104660
NPI: 1083815823
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: ST
JOSEPHS MEDICAL CENTER,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS MERCY
HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

CARR, MIANDA

Provider ID: 206292
Provider Gender: Female
License Number: A104660
NPI: 1083815823
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: ST
JOSEPHS MEDICAL CENTER,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS MERCY
HOSPITAL
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org

D2. Directorio de atención primaria

<p><i>/clinics/san-ysidro-health-center</i></p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\150</p> <p>American Sign Language (ASL): N</p>	<p> Accessibility: CONTACT PROVIDER</p> <p>Hours: M-F 8:00AM-5:00PM</p>	<p> Provider English Spoken: Y</p> <p> Provider Language(s) Spoken: Spanish</p> <p>Cultural Competency: N</p> <p>Hospital Affiliation: SHARP CHULA VISTA MED CTR</p> <p>Board Certified Specialty: No IHP of Southern Cal-PHP SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER</p>
<p><u>OBSTETRICS / GYNECOLOGY</u></p> <p>CARR, MIANDA</p> <p>Provider ID: 227411</p> <p>Provider Gender: Female</p> <p>License Number: A104660</p> <p>NPI: 1083815823</p> <p> Provider English Spoken: Y</p> <p> Provider Language(s) Spoken: Spanish</p> <p>Cultural Competency: N</p> <p>Hospital Affiliation: ST JOSEPHS MEDICAL CENTER, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL</p> <p>Board Certified Specialty: No IHP of Southern Cal-PHP SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR</p> <p> 4050 BEYER BLVD SAN YSIDRO, CA 92173</p> <p> Phone: (619) 662-4100</p> <p> After Hours Phone: (619) 662-4100</p> <p> Website: syhealth.org/clinics/maternal-child-health-center</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\150</p> <p>American Sign Language (ASL): N</p>	<p><u>OBSTETRICS / GYNECOLOGY</u></p> <p>CARR, MIANDA</p> <p>Provider ID: 206292</p> <p>Provider Gender: Female</p> <p>License Number: A72235</p> <p>NPI: 1245229129</p> <p> Provider English Spoken: Y</p> <p> Provider Language(s) Spoken: Spanish</p> <p>Cultural Competency: N</p> <p>Hospital Affiliation: SHARP CHULA VISTA MED CTR</p> <p>Board Certified Specialty: No IHP of Southern Cal-PHP SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER</p> <p> 4004 BEYER BLVD SAN YSIDRO, CA 92173</p> <p> Phone: (619) 662-4100</p> <p> After Hours Phone: (619) 662-4100</p> <p> Website: www.syhealth.org/clinics/san-ysidro-health-center</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\150</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p>	<p><u>OBSTETRICS / GYNECOLOGY</u></p> <p>DANESHMAND, SHAHRAM</p> <p>Provider ID: 206292</p> <p>Provider Gender: Male</p> <p>License Number: A63844</p> <p>NPI: 1891867412</p> <p> Provider English Spoken: Y</p> <p> Provider Language(s) Spoken: Farsi, Spanish</p> <p>Cultural Competency: N</p> <p>Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL</p>
<p><u>OBSTETRICS / GYNECOLOGY</u></p> <p>CARR, MIANDA</p> <p>Provider ID: 227411</p> <p>Provider Gender: Female</p> <p>License Number: A104660</p> <p>NPI: 1083815823</p> <p> Provider English Spoken: Y</p> <p> Provider Language(s) Spoken: Spanish</p> <p>Cultural Competency: N</p> <p>Hospital Affiliation: ST JOSEPHS MEDICAL CENTER, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL</p> <p>Board Certified Specialty: No IHP of Southern Cal-PHP SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR</p> <p> 4050 BEYER BLVD SAN YSIDRO, CA 92173</p> <p> Phone: (619) 662-4100</p> <p> After Hours Phone: (619) 662-4100</p> <p> Website: syhealth.org/clinics/maternal-child-health-center</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\150</p> <p>American Sign Language (ASL): N</p>	<p><u>OBSTETRICS / GYNECOLOGY</u></p> <p>CARR, MIANDA</p> <p>Provider ID: 206292</p> <p>Provider Gender: Female</p> <p>License Number: A72235</p> <p>NPI: 1245229129</p> <p> Provider English Spoken: Y</p> <p> Provider Language(s) Spoken: Spanish</p> <p>Cultural Competency: N</p> <p>Hospital Affiliation: SHARP CHULA VISTA MED CTR</p> <p>Board Certified Specialty: No IHP of Southern Cal-PHP SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER</p> <p> 4004 BEYER BLVD SAN YSIDRO, CA 92173</p> <p> Phone: (619) 662-4100</p> <p> After Hours Phone: (619) 662-4100</p> <p> Website: www.syhealth.org/clinics/san-ysidro-health-center</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\150</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p>	<p><u>OBSTETRICS / GYNECOLOGY</u></p> <p>DANESHMAND, SHAHRAM</p> <p>Provider ID: 206292</p> <p>Provider Gender: Male</p> <p>License Number: A63844</p> <p>NPI: 1891867412</p> <p> Provider English Spoken: Y</p> <p> Provider Language(s) Spoken: Farsi, Spanish</p> <p>Cultural Competency: N</p> <p>Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL</p>


D2. Directorio de atención primaria

ENCINITAS, SCRIPPS
MEMORIAL HOSPITAL, TRI
CITY MEDICAL CTR, SHARP
MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,
SHARP MARY BIRCH HOSP
FOR WOMEN AND
NEWBORNS, SCRIPPS GREEN
HOSPITAL, SCRIPPS MERCY
HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

OBSTETRICS / GYNECOLOGY



DANESHMAND, SHAHRAM

Provider ID: 227411





Provider Gender: Male

License Number: A63844

NPI: 1891867412

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Farsi, Spanish

Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT
HOSPITAL, SHARP MEMORIAL
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, SCRIPPS
MEMORIAL HOSPITAL, TRI
CITY MEDICAL CTR, SHARP
MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,
SHARP MARY BIRCH HOSP
FOR WOMEN AND
NEWBORNS, SCRIPPS GREEN
HOSPITAL, SCRIPPS MERCY
HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR

 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
Fax: (619) 205-1948
 After Hours Phone: (619)
662-4100
 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY

DANESHMAND, SHAHRAM

Provider ID: 206292

Provider Gender: Male

License Number: A63844

NPI: 1891867412


 Provider English Spoken: Y


 Provider Language(s)
Spoken: Farsi, Spanish


Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT
HOSPITAL, SHARP MEMORIAL
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, SCRIPPS
MEMORIAL HOSPITAL, TRI
CITY MEDICAL CTR, SHARP
MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,
SHARP MARY BIRCH HOSP
FOR WOMEN AND
NEWBORNS, SCRIPPS GREEN
HOSPITAL, SCRIPPS MERCY
HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

D2. Directorio de atención primaria

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

OBSTETRICS / GYNECOLOGY

DANESHMAND, SHAHRAM

Provider ID: 227411

Provider Gender: Male

License Number: A63844

NPI: 1891867412

Provider English Spoken: Y

Provider Language(s) Spoken: Farsi, Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT

HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, SCRIPPS

MEMORIAL HOSPITAL, TRI

CITY MEDICAL CTR, SHARP

MARY BIRCH HOSP FOR

WOMEN AND NEWBORNS,

SHARP MARY BIRCH HOSP

FOR WOMEN AND

NEWBORNS, SCRIPPS GREEN

HOSPITAL, SCRIPPS MERCY

HOSPITAL, SCRIPPS MERCY

HOSPITAL CHULA VISTA

Board Certified Specialty: No

IHP of Southern Cal-PHP


SAN YSIDRO HEALTH

MATERNAL AND CHILD


HEALTH CTR


 4050 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 205-1948

 After Hours Phone: (619) 662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY

DINH, MY

Provider ID: 227411

Provider Gender: Female

License Number: 20A9907

NPI: 1316146996

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH


MATERNAL AND CHILD

HEALTH CTR

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

OBSTETRICS / GYNECOLOGY

DINH, MY

Provider ID: 206292

Provider Gender: Female

License Number: 20A9907

NPI: 1316146996


Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

DINH, MY

Provider ID: 206292

Provider Gender: Female

License Number: 20A9907

NPI: 1316146996

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

D2. Directorio de atención primaria

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

DINH, MY

Provider ID: 227411

Provider Gender: Female


License Number: 20A9907


NPI: 1316146996


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY


GOLDSTEIN, EDWARD

Provider ID: 227411

Provider Gender: Male

License Number: G20087

NPI: 1982617494

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, SHARP
CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS

MEMORIAL HOSPITAL,


SCRIPPS MERCY HOSPITAL


Board Certified Specialty: No

IHP of Southern Cal-PHP


SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 Fax: (619) 205-1948

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

GOLDSTEIN, EDWARD

Provider ID: 227411

Provider Gender: Male

License Number: G20087

NPI: 1982617494

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, SHARP

CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH

MATERNAL AND CHILD


HEALTH CTR

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 Fax: (619) 205-1948

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

GOMEZ, DANIELA


Provider ID: 206292

Provider Gender: Female

License Number: A175006

D2. Directorio de atención primaria

NPI: 1255878997

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN


YSIDRO HEALTH CENTER

 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

OBSTETRICS / GYNECOLOGY


GOMEZ, DANIELA

Provider ID: 227411

Provider Gender: Female

License Number: A175006

NPI: 1255878997

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

MATERNAL AND CHILD

HEALTH CTR



4050 BEYER BLVD
SAN YSIDRO, CA 92173



Phone: (619) 662-4100



After Hours Phone: (619)
662-4100



Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY


GOMEZ, DANIELA


Provider ID: 206292

Provider Gender: Female

License Number: A175006

NPI: 1255878997

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

 4004 BEYER BLVD

SAN YSIDRO, CA 92173



Phone: (619) 662-4100



After Hours Phone: (619)
662-4100



Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N



Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

OBSTETRICS / GYNECOLOGY

GOMEZ, DANIELA


Provider ID: 227411

Provider Gender: Female

License Number: A175006

NPI: 1255878997

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

MATERNAL AND CHILD

HEALTH CTR

 4050 BEYER BLVD

SAN YSIDRO, CA 92173



Phone: (619) 662-4100



After Hours Phone: (619)
662-4100



Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY

JENKINS, ENCHANTA


Provider ID: 227411

Provider Gender: Female

License Number: C143625

D2. Directorio de atención primaria

NPI: 1285604702

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY


JENKINS, ENCHANTA


Provider ID: 227411

Provider Gender: Female

License Number: C143625

NPI: 1285604702

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA


VISTA, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY


MENDEZ, DIEGO


Provider ID: 227411

Provider Gender: Male

License Number: A47906

NPI: 1437181922

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, BAKERSFIELD


MEMORIAL HOSP, SHARP


MEMORIAL HOSPITAL,
Adventist Health Bakersfield,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL, KERN MEDICAL


CENTER, KERN MEDICAL
CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

MENDEZ, DIEGO

Provider ID: 227411

Provider Gender: Male

License Number: A47906

NPI: 1437181922

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, BAKERSFIELD





MEMORIAL HOSP, SHARP

MEMORIAL HOSPITAL,
Adventist Health Bakersfield,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL, KERN MEDICAL

D2. Directorio de atención primaria

CENTER, KERN MEDICAL CENTER

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY


SEFA-BOAKYE, KOFI

Provider ID: 206292

Provider Gender: Male

License Number: G59670

NPI: 1902993660

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

SEFA-BOAKYE, KOFI

Provider ID: 206292

Provider Gender: Male

License Number: G59670

NPI: 1902993660

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No

IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org

/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

SHORT, ABIADÉ

Provider ID: 206292

Provider Gender: Male

License Number: A114893

NPI: 1750559589

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish




Cultural Competency: N

Hospital Affiliation: PARADISE

VALLEY HOSPITAL, SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS MERCY
HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

D2. Directorio de atención primaria

 *Accessibility: CONTACT PROVIDER*

OBSTETRICS / GYNECOLOGY


SHORT, ABIADE

Provider ID: 206292

Provider Gender: Male

License Number: A114893

NPI: 1750559589


 *Provider English Spoken: Y*


 *Provider Language(s) Spoken: Spanish*


Cultural Competency: N


Hospital Affiliation: PARADISE VALLEY HOSPITAL, SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No IHP of Southern Cal-PHP SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

 *4004 BEYER BLVD SAN YSIDRO, CA 92173*

 *Phone: (619) 662-4100*


 *After Hours Phone: (619) 662-4100*

 *Website: www.syhealth.org/clinics/san-ysidro-health-center*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

OPHTHALMOLOGY


SKAF, AYHAM


Provider ID: 227469

Provider Gender: Male

License Number: A120584

NPI: 1285888628

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Arabic, Spanish*


Cultural Competency: N


Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL

Board Certified Specialty: No IHP of Southern Cal-PHP

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

 *3364 BEYER BLVD SAN YSIDRO, CA 92173*

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*

 *Website: <https://www.syhealth.org/locations>*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

OPHTHALMOLOGY


SKAF, AYHAM


Provider ID: 227469

Provider Gender: Male

License Number: A120584

NPI: 1285888628

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Arabic, Spanish*

Cultural Competency: N

Hospital Affiliation: EL CENTRO


REGIONAL MEDICAL CENTER, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL


HOSPITAL

Board Certified Specialty: No IHP of Southern Cal-PHP

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

 *3364 BEYER BLVD SAN YSIDRO, CA 92173*

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*

 *Website: <https://www.syhealth.org/locations>*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

PEDIATRICS

ACEVEDO, SUSANA

Provider ID: 227411

Provider Gender: Female

License Number: A74960

NPI: 1801971569


 *Provider English Spoken: Y*


 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N

Board Certified Specialty: No IHP of Southern Cal-PHP



SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

 *4050 BEYER BLVD SAN YSIDRO, CA 92173*

 *Phone: (619) 662-4100*

 *After Hours Phone: (619)*






D2. Directorio de atención primaria

662-4100
 Website: syhealth.org/clinics/maternal-child-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PEDIATRICS






ACEVEDO, SUSANA

Provider ID: 227411
Provider Gender: Female
License Number: A74960
NPI: 1801971569
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No IHP of Southern Cal-PHP
SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: syhealth.org/clinics/maternal-child-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER





PEDIATRICS

BARBADILLO, FERDINAND
Provider ID: 227411
Provider Gender: Male
License Number: A49307
NPI: 1982662193
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR
Board Certified Specialty: No IHP of Southern Cal-PHP
SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR


 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
Fax: (619) 205-1948
 After Hours Phone: (619) 662-4100
 Website: syhealth.org/clinics/maternal-child-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PEDIATRICS

BARBADILLO, FERDINAND
Provider ID: 227411
Provider Gender: Male
License Number: A49307
NPI: 1982662193
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish, Tagalog

Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR
Board Certified Specialty: No IHP of Southern Cal-PHP
SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR
 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
Fax: (619) 205-1948
 After Hours Phone: (619) 662-4100
 Website: syhealth.org/clinics/maternal-child-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER


PEDIATRICS

BARBADILLO, FERDINAND
Provider ID: 206292
Provider Gender: Male
License Number: A49307
NPI: 1982662193
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR
Board Certified Specialty: No IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
 4004 BEYER BLVD

D2. Directorio de atención primaria



SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N



 Accessibility: CONTACT PROVIDER
Hours: M-TU 8:30AM-5:30PM

PEDIATRICS


BARBADILLO, FERDINAND

Provider ID: 206292
Provider Gender: Male
License Number: A49307
NPI: 1982662193
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Tagalog
Cultural Competency: N

Hospital Affiliation: SHARP
CHULA VISTA MED CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center



Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
Hours: M-TU 8:30AM-5:30PM





PEDIATRICS


CABARLO, JEHRIB

Provider ID: 227411
Provider Gender: Male
License Number: 20A8516
NPI: 1770661340

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Tagalog
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR

 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: syhealth.org/clinics/maternal-child-health-center



Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

PEDIATRICS

CABARLO, JEHRIB





Provider ID: 227411

Provider Gender: Male
License Number: 20A8516
NPI: 1770661340

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Tagalog
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR

 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: syhealth.org/clinics/maternal-child-health-center


Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

PEDIATRICS

CHAIT LLAMAS, LWBBA

Provider ID: 227411
Provider Gender: Female
License Number: A138938
NPI: 1134567530

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PIONEERS
MEMORIAL HOSPITAL
Board Certified Specialty: No

D2. Directorio de atención primaria

IHP of Southern Cal-PHP
SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR

4050 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

CHAIT LLAMAS, LWBBA

Provider ID: 227411

Provider Gender: Female

License Number: A138938

NPI: 1134567530

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PIONEERS
MEMORIAL HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

MATERNAL AND CHILD

HEALTH CTR

4050 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

FUJII, CINDY

Provider ID: 227411

Provider Gender: Female

License Number: G52183

NPI: 1871664821

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

MATERNAL AND CHILD

HEALTH CTR

4050 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

FUJII, CINDY

Provider ID: 227411

Provider Gender: Female

License Number: G52183

NPI: 1871664821

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

MATERNAL AND CHILD

HEALTH CTR

4050 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

GHAHREMANI, SIMIN

Provider ID: 206292

Provider Gender: Female

License Number: C51110

NPI: 1508904657

Provider English Spoken: Y

Provider Language(s)
Spoken: Faroese, Farsi

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SHARP CHULA VISTA

MED CTR, SCRIPPS MERCY

HOSPITAL

D2. Directorio de atención primaria

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

PEDIATRICS

GHAHREMANI, SIMIN

Provider ID: 206292

Provider Gender: Female

License Number: C51110

NPI: 1508904657

Provider English Spoken: Y

Provider Language(s)

Spoken: Faroese, Farsi

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SHARP CHULA VISTA

MED CTR, SCRIPPS MERCY

HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

4004 BEYER BLVD

SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

PEDIATRICS

HERMAN, ANDREA

Provider ID: 227411

Provider Gender: Female

License Number: A72721

NPI: 1518970037

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SHARP CHULA VISTA

MED CTR, SCRIPPS MEMORIAL

HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

MATERNAL AND CHILD

HEALTH CTR

4050 BEYER BLVD

SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 205-1948

After Hours Phone: (619)

662-4100

Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

HERMAN, ANDREA

Provider ID: 227411

Provider Gender: Female

License Number: A72721

NPI: 1518970037

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SHARP CHULA VISTA

MED CTR, SCRIPPS MEMORIAL

HOSPITAL

Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

MATERNAL AND CHILD

HEALTH CTR

4050 BEYER BLVD

SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 205-1948

After Hours Phone: (619)
662-4100

Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

D2. Directorio de atención primaria

American Sign Language (ASL): **PEDIATRICS**

N

 Accessibility: CONTACT PROVIDER

PEDIATRICS


NISSAN, BETI

Provider ID: 206292

Provider Gender: Female

License Number: A64487

NPI: 1396705299

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi, Persian

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, HOLLYWOOD

PRESBYTERIAN MED CTR,

SHARP MEMORIAL HOSPITAL

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN


YSIDRO HEALTH CENTER

 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM


NISSAN, BETI

Provider ID: 206292

Provider Gender: Female

License Number: A64487

NPI: 1396705299

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi, Persian

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, HOLLYWOOD

PRESBYTERIAN MED CTR,

SHARP MEMORIAL HOSPITAL

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN


YSIDRO HEALTH CENTER

 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

PEDIATRICS

PIANSAY, MARIACORAZON


Provider ID: 206292

Provider Gender: Female

License Number: A93785

NPI: 1669680351

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL

CHULA VISTA

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN


YSIDRO HEALTH CENTER

 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PEDIATRICS

PIANSAY, MARIACORAZON


Provider ID: 206292

Provider Gender: Female

License Number: A93785

NPI: 1669680351

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL

D2. Directorio de atención primaria

CHULA VISTA

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

4004 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

RODRIGUEZ, ALDO

Provider ID: 227411

Provider Gender: Male

License Number: A134995

NPI: 1508209651

Provider English Spoken: Y

Provider Language(s)
Spoken: Portuguese,
Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR

4050 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)

662-4100

Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

RODRIGUEZ, ALDO

Provider ID: 227411

Provider Gender: Male

License Number: A134995

NPI: 1508209651

Provider English Spoken: Y

Provider Language(s)
Spoken: Portuguese,
Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR

4050 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

PEDIATRICS

RUELAS, ROBERTO

Provider ID: 227411

Provider Gender: Male

License Number: A170141

NPI: 1194257386

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR

4050 BEYER BLVD
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

RUELAS, ROBERTO

Provider ID: 227411

Provider Gender: Male

License Number: A170141

NPI: 1194257386





Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

D2. Directorio de atención primaria


MATERNAL AND CHILD HEALTH CTR

 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS


SAHMS, TIMOTHY

Provider ID: 227411

Provider Gender: Male

License Number: G51462

NPI: 1780697276

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO


Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

MATERNAL AND CHILD

HEALTH CTR

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 205-1948

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

s/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS


SAHMS, TIMOTHY

Provider ID: 206292

Provider Gender: Male

License Number: G51462

NPI: 1780697276

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-7:30PM

SA 8:30AM-2:00PM

PEDIATRICS

SAHMS, TIMOTHY

Provider ID: 227411

Provider Gender: Male

License Number: G51462

NPI: 1780697276

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

MATERNAL AND CHILD


HEALTH CTR

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 205-1948

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

SAHMS, TIMOTHY


Provider ID: 206292


Provider Gender: Male

License Number: G51462

NPI: 1780697276

D2. Directorio de atención primaria

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN


YSIDRO HEALTH CENTER

 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100


 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-7:30PM

SA 8:30AM-2:00PM

PEDIATRICS

SHAHIDYAZDANI, TINA

Provider ID: 227411

Provider Gender: Female

License Number: A94813

NPI: 1891924858

 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP


SAN YSIDRO HEALTH


MATERNAL AND CHILD


HEALTH CTR

 4050 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS


SHAHIDYAZDANI, TINA

Provider ID: 227411

Provider Gender: Female

License Number: A94813

NPI: 1891924858

 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP


SAN YSIDRO HEALTH


MATERNAL AND CHILD


HEALTH CTR

 4050 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS

SULLIVAN, ELISSA

Provider ID: 227411

Provider Gender: Female

License Number: A169577

NPI: 1790216422

 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP


SAN YSIDRO HEALTH


MATERNAL AND CHILD


HEALTH CTR

 4050 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:00PM

PEDIATRICS

SULLIVAN, ELISSA

Provider ID: 227411

Provider Gender: Female

License Number: A169577

NPI: 1790216422

 Provider English Spoken: Y

Cultural Competency: N





Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HEALTH

D2. Directorio de atención primaria

MATERNAL AND CHILD HEALTH CTR

 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:00PM

PEDIATRICS


TAYLOR, TASHA


Provider ID: 227411

Provider Gender: Female

License Number: A82187

NPI: 1528144433

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP


SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 205-1948

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

s/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PEDIATRICS


TAYLOR, TASHA


Provider ID: 227411

Provider Gender: Female

License Number: A82187

NPI: 1528144433

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP


SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 205-1948

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

BUCKNER, JOSEPH

Provider ID: 206292

Provider Gender: Male


License Number: PA18363


NPI: 1215909205


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

BUCKNER, JOSEPH

Provider ID: 206292

Provider Gender: Male

License Number: PA18363

NPI: 1215909205


 Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173


D2. Directorio de atención primaria

 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT


GI, HUNG


Provider ID: 206292

Provider Gender: Male

License Number: PA16994

NPI: 1023207404

 Provider English Spoken: Y

 Provider Language(s) Spoken: Chinese, French, Spanish


Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100


 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT


GI, HUNG


Provider ID: 206292

Provider Gender: Male

License Number: PA16994

NPI: 1023207404

 Provider English Spoken: Y

 Provider Language(s) Spoken: Chinese, French, Spanish

Cultural Competency: N


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT


HARMIS, NATASHA

Provider ID: 227469

Provider Gender: Female

License Number: PA58672

NPI: 1013516996

 Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP

SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS

 3364 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT

HARMIS, NATASHA

Provider ID: 227469

Provider Gender: Female

License Number: PA58672

NPI: 1013516996

 Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No

IHP of Southern Cal-PHP


SAN YSIDRO HLTH SAN DIEGO

PACE SENIOR HLTH SVS

 3364 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

D2. Directorio de atención primaria

Hours: M-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT

KAMOTO, LYNN

Provider ID: 206292

Provider Gender: Female

License Number: PA17162

NPI: 1447326459

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP

SAN YSIDRO HEALTH SAN


YSIDRO HEALTH CENTER

 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

KAMOTO, LYNN

Provider ID: 206292

Provider Gender: Female

License Number: PA17162

NPI: 1447326459

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN


YSIDRO HEALTH CENTER

 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

PORTOMADURSKI, KRISTINE

Provider ID: 227411

Provider Gender: Female

License Number: PA16269

NPI: 1053403782

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP


SAN YSIDRO HEALTH


MATERNAL AND CHILD


HEALTH CTR

 4050 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

PORTOMADURSKI, KRISTINE

Provider ID: 227411

Provider Gender: Female

License Number: PA16269

NPI: 1053403782

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP


SAN YSIDRO HEALTH


MATERNAL AND CHILD


HEALTH CTR

 4050 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

ROSS, COLLIN

Provider ID: 206292

Provider Gender: Male

License Number: PA16058

NPI: 1629182050

Provider English Spoken: Y







Provider Language(s)


D2. Directorio de atención primaria

Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT


ROSS, COLLIN


Provider ID: 206292
Provider Gender: Male
License Number: PA16058
NPI: 1629182050
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center

- center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

SHARPE, NORMA


Provider ID: 206292
Provider Gender: Female
License Number: PA20490
NPI: 1619100237
 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT






SHARPE, NORMA

Provider ID: 206292
Provider Gender: Female
License Number: PA20490
NPI: 1619100237

 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

SMITH, DOUGLAS

Provider ID: 206292
Provider Gender: Male
License Number: PA12304
NPI: 1902016611
 *Provider English Spoken: Y*
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes

D2. Directorio de atención primaria

Min/Max Age: 0\150

American Sign Language (ASL): IHP of Southern Cal-PHP

N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

SMITH, DOUGLAS

Provider ID: 206292

Provider Gender: Male

License Number: PA12304

NPI: 1902016611

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN


YSIDRO HEALTH CENTER

 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): SAN YSIDRO HLTH SAN DIEGO

N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

SUNA-SITTO, MOHEEN

Provider ID: 227469

Provider Gender: Female

License Number: PA22855

NPI: 1497196729

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HLTH SAN DIEGO

PACE SENIOR HLTH SVS

 3364 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

SUNA-SITTO, MOHEEN

Provider ID: 227469

Provider Gender: Female

License Number: PA22855

NPI: 1497196729

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HLTH SAN DIEGO

PACE SENIOR HLTH SVS

 3364 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

PHYSICIANS ASSISTANT

TRUJILLO, MIGUEL

Provider ID: 206292

Provider Gender: Male

License Number: PA15656

NPI: 1285806794

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN


YSIDRO HEALTH CENTER

 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

TRUJILLO, MIGUEL

Provider ID: 206292

Provider Gender: Male

License Number: PA15656

NPI: 1285806794

Provider English Spoken: Y

Provider Language(s)


Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No







D2. Directorio de atención primaria


IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: [www.syhealth.org](http://www.syhealth.org/clinics/san-ysidro-health-center)
/clinics/san-ysidro-health
- center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER

PODIATRIST








MANCHEL, BRUCE

Provider ID: 206292
Provider Gender: Male
License Number: DPM2930
NPI: 1790890788
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
CORONADO HOSP AND
HEALTHCARE CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
Fax: (619) 205-6341
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org

/clinics/san-ysidro-health
- center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER







PODIATRIST

MANCHEL, BRUCE

Provider ID: 206292
Provider Gender: Male
License Number: DPM2930
NPI: 1790890788
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
CORONADO HOSP AND
HEALTHCARE CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
Fax: (619) 205-6341
 After Hours Phone: (619)
662-4100
 Website: [www.syhealth.org](http://www.syhealth.org/clinics/san-ysidro-health-center)
/clinics/san-ysidro-health
- center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER



PODIATRIST

MANCHEL, BRUCE

Provider ID: 227469
Provider Gender: Male
License Number: DPM2930
NPI: 1790890788
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
CORONADO HOSP AND
HEALTHCARE CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS
 3364 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: <https://www.syhealth.org/locations>
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER



PODIATRIST

MANCHEL, BRUCE

Provider ID: 227469
Provider Gender: Male
License Number: DPM2930
NPI: 1790890788
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N


D2. Directorio de atención primaria




*Hospital Affiliation: SHARP
CORONADO HOSP AND
HEALTHCARE CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS*


 3364 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: <https://www.syhealth.org/locations>
*Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER*

REGISTERED PHYSICAL THERAPIST

SHAUF, JOANN


*Provider ID: 206292
Provider Gender: Female
License Number: PT296607
NPI: 1134732522
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER*


 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center


*Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER*

REGISTERED PHYSICAL THERAPIST

SHAUF, JOANN

*Provider ID: 206292
Provider Gender: Female
License Number: PT296607
NPI: 1134732522
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER*


 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center

*Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER*


SPEECH PATHOLOGIST

HILL, CARLA

*Provider ID: 206292
Provider Gender: Female
License Number: SP9075
NPI: 1043950751*


 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center

*Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER*

SPEECH PATHOLOGIST

HILL, CARLA

*Provider ID: 206292
Provider Gender: Female
License Number: SP9075
NPI: 1043950751
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER*

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes

D2. Directorio de atención primaria

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

SURGERY GENERAL

OKWUOSA, CHRIS

Provider ID: 206292

Provider Gender: Male

License Number: A170738

NPI: 1114336260

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Providence
St Mary Medical Center


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100


 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

SURGERY GENERAL

OKWUOSA, CHRIS

Provider ID: 206292

Provider Gender: Male

License Number: A170738

NPI: 1114336260

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Providence
St Mary Medical Center


Board Certified Specialty: No


IHP of Southern Cal-PHP


SAN YSIDRO HEALTH SAN

YSIDRO HEALTH CENTER

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

 Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM

SA 8:30AM-2:00PM

SANTEE



PEDIATRICS

ARLATA, TAMANTHA

Provider ID: 615945

Provider Gender: Female

NPI: 1568721934

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL

CTR

Board Certified Specialty: No
Rady Childrens Health Network
TAMANTHA S ARLATA


 9600 CUYAMACA ST STE
101

SANTEE, CA 92071

 Phone: (619) 749-2150

Fax: (619) 456-9744

 After Hours Phone: (619)
749-2150

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

MANGINE, REGINA

Provider ID: 366456

Provider Gender: Female

NPI: 1417177577

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, GROSSMONT

HOSPITAL, SHARP MARY

BIRCH HOSP FOR WOMEN

AND NEWBORNS

Board Certified Specialty: No



Rady Childrens Health Network

REGINA M MANGINE


 9600 CUYAMACA ST STE
101

SANTEE, CA 92071


D2. Directorio de atención primaria

 Phone: (619) 749-2150
 Fax: (619) 456-9744

 After Hours Phone: (619) 749-2150

 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM



SPRING VALLEY

CERTIFIED NURSE

PRACTITIONER

LEONARD, BEVERLY



Provider ID: 206361
Provider Gender: Female
License Number: NP10943
NPI: 1285772392


 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish

Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC

 8788 JAMACHA RD
SPRING VALLEY, CA 91977

 Phone: (619) 515-2555
 After Hours Phone: (619) 515-2555

 Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):

N



 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

LEONARD, BEVERLY



Provider ID: 206361
Provider Gender: Female
License Number: NP10943
NPI: 1285772392


 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish

Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego

GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC

 8788 JAMACHA RD
SPRING VALLEY, CA 91977

 Phone: (619) 515-2555
 After Hours Phone: (619) 515-2555

 Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N



 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER



WILLIAMS, TAKISHA

Provider ID: 206361
Provider Gender: Female
License Number: NP95013978
NPI: 1881727386

 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San Diego
GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC

 8788 JAMACHA RD
SPRING VALLEY, CA 91977

 Phone: (619) 515-2555
 After Hours Phone: (619) 515-2555

 Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N



 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE

PRACTITIONER

WILLIAMS, TAKISHA





Provider ID: 206361
Provider Gender: Female
License Number: NP95013978
NPI: 1881727386

 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish

Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC

 8788 JAMACHA RD
SPRING VALLEY, CA 91977

D2. Directorio de atención primaria

 Phone: (619) 515-2555
 After Hours Phone: (619) 515-2555
 Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

BACHARACH, REBECCA

Provider ID: 206361
Provider Gender: Female
License Number: 20A15459
NPI: 1225442643
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC

 8788 JAMACHA RD
SPRING VALLEY, CA 91977
 Phone: (619) 515-2555
 After Hours Phone: (619) 515-2555
 Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

BACHARACH, REBECCA

Provider ID: 206361
Provider Gender: Female
License Number: 20A15459
NPI: 1225442643
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC

 8788 JAMACHA RD
SPRING VALLEY, CA 91977
 Phone: (619) 515-2555
 After Hours Phone: (619) 515-2555
 Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

CARDONES, ARTHUR

Provider ID: 206361
Provider Gender: Male
License Number: A55932
NPI: 1962436451
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Tagalog
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC
 8788 JAMACHA RD

SPRING VALLEY, CA 91977
 Phone: (619) 515-2555
 After Hours Phone: (619) 515-2555
 Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

CARDONES, ARTHUR

Provider ID: 206361
Provider Gender: Male
License Number: A55932
NPI: 1962436451
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Tagalog
Cultural Competency: N
Board Certified Specialty: No
Family Health Centers of San Diego
GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC
 8788 JAMACHA RD
SPRING VALLEY, CA 91977
 Phone: (619) 515-2555
 After Hours Phone: (619) 515-2555
 Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

D2. Directorio de atención primaria

FAMILY PRACTICE


CONSTANTINO, STEPHANIE


Provider ID: 206361

Provider Gender: Female

License Number: A149063

NPI: 1366824971

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Mandarin


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL


Board Certified Specialty: No
Family Health Centers of San
Diego

GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC

 8788 JAMACHA RD
SPRING VALLEY, CA 91977

 Phone: (619) 515-2555

 After Hours Phone: (619)
515-2555


 Website: www.fhcsd.org
Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM

TU 8:30AM-7:00PM

W-F 8:30AM-5:30PM

FAMILY PRACTICE


CONSTANTINO, STEPHANIE


Provider ID: 206361

Provider Gender: Female

License Number: A149063

NPI: 1366824971

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Mandarin


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL


Board Certified Specialty: No
Family Health Centers of San
Diego

GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC

 8788 JAMACHA RD
SPRING VALLEY, CA 91977

 Phone: (619) 515-2555

 After Hours Phone: (619)
515-2555

 Website: www.fhcsd.org
Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM

TU 8:30AM-7:00PM

W-F 8:30AM-5:30PM

FAMILY PRACTICE

ROSE, PATRICIA

Provider ID: 206361

Provider Gender: Female

License Number: A76059

NPI: 1588677314


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San
Diego


GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC

 8788 JAMACHA RD

SPRING VALLEY, CA 91977

 Phone: (619) 515-2555

 After Hours Phone: (619)
515-2555

 Website: www.fhcsd.org
Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM

TU 8:30AM-7:00PM

W-F 8:30AM-5:30PM

FAMILY PRACTICE

ROSE, PATRICIA

Provider ID: 206361

Provider Gender: Female

License Number: A76059


NPI: 1588677314


 Provider English Spoken: Y
Cultural Competency: N


Board Certified Specialty: No
Family Health Centers of San
Diego

GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC

 8788 JAMACHA RD
SPRING VALLEY, CA 91977

 Phone: (619) 515-2555

 After Hours Phone: (619)
515-2555

 Website: www.fhcsd.org
Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N
 Accessibility: CONTACT

D2. Directorio de atención primaria

PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-7:00PM
W-F 8:30AM-5:30PM

FQHC

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC,


Provider ID: 206361
NPI: 1508801069

Provider English Spoken: Y
Cultural Competency: N
Family Health Centers of San
Diego

GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC

 8788 JAMACHA RD
SPRING VALLEY, CA 91977
 Phone: (619) 515-2555
Fax: (619) 462-5584

 After Hours Phone: (619)
515-2555

 Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER



FQHC

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC,


Provider ID: 206361
NPI: 1508801069

Provider English Spoken: Y
Cultural Competency: N
Family Health Centers of San
Diego

GROSSMONT SPRING VALLEY

FAMILY HLTH CTRS INC
 8788 JAMACHA RD
SPRING VALLEY, CA 91977
 Phone: (619) 515-2555
Fax: (619) 462-5584

 After Hours Phone: (619)
515-2555

 Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI


Provider ID: 206361
Provider Gender: Female
License Number: 20A14919
NPI: 1619397031

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego

GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC

 8788 JAMACHA RD
SPRING VALLEY, CA 91977
 Phone: (619) 515-2555
 After Hours Phone: (619)
515-2555

 Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM
TU 8:30AM-7:00PM
W-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI


Provider ID: 206361
Provider Gender: Female
License Number: 20A14919
NPI: 1619397031

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego

GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC

 8788 JAMACHA RD
SPRING VALLEY, CA 91977
 Phone: (619) 515-2555
 After Hours Phone: (619)
515-2555

 Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM

D2. Directorio de atención primaria

TU 8:30AM-7:00PM
W-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

Provider ID: 206361

Provider Gender: Female

License Number: A68463

NPI: 1376663831

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL


CHULA VISTA, SHARP MARY
BIRCH HOSP FOR WOMEN


AND NEWBORNS

Board Certified Specialty: No
Family Health Centers of San
Diego

GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC

 8788 JAMACHA RD
SPRING VALLEY, CA 91977

 Phone: (619) 515-2555

 After Hours Phone: (619)
515-2555

 Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE

Provider ID: 206361

Provider Gender: Female

License Number: A68463

NPI: 1376663831

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL


CHULA VISTA, SHARP MARY
BIRCH HOSP FOR WOMEN


AND NEWBORNS

Board Certified Specialty: No
Family Health Centers of San
Diego

GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC

 8788 JAMACHA RD
SPRING VALLEY, CA 91977

 Phone: (619) 515-2555

 After Hours Phone: (619)
515-2555

 Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

Provider ID: 206361

Provider Gender: Male

License Number: A113001

NPI: 1225231582

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,


GROSSMONT HOSPITAL, TRI
CITY MEDICAL CTR


Board Certified Specialty: No
Family Health Centers of San
Diego

GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC

 8788 JAMACHA RD
SPRING VALLEY, CA 91977

 Phone: (619) 515-2555

 After Hours Phone: (619)
515-2555


 Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM

TU 8:30AM-7:00PM

W-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

CARTER, KHALIL

Provider ID: 206361

Provider Gender: Male

License Number: A113001

NPI: 1225231582

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,

D2. Directorio de atención primaria

GROSSMONT HOSPITAL, TRI
CITY MEDICAL CTR

Board Certified Specialty: No
Family Health Centers of San
Diego

GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC

8788 JAMACHA RD
SPRING VALLEY, CA 91977

Phone: (619) 515-2555

After Hours Phone: (619)
515-2555

Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM

TU 8:30AM-7:00PM

W-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA

Provider ID: 206361

Provider Gender: Female

License Number: A163464

NPI: 1326531401

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No

Family Health Centers of San
Diego

GROSSMONT SPRING VALLEY

FAMILY HLTH CTRS INC

8788 JAMACHA RD
SPRING VALLEY, CA 91977

Phone: (619) 515-2555

After Hours Phone: (619)
515-2555

Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

CHAKRABARTI, PRIYA

Provider ID: 206361

Provider Gender: Female

License Number: A163464

NPI: 1326531401

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No

Family Health Centers of San
Diego

GROSSMONT SPRING VALLEY

FAMILY HLTH CTRS INC

8788 JAMACHA RD
SPRING VALLEY, CA 91977

Phone: (619) 515-2555

After Hours Phone: (619)
515-2555

Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS

Provider ID: 206361

Provider Gender: Male

License Number: A108228

NPI: 1629277322

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San
Diego

GROSSMONT SPRING VALLEY

FAMILY HLTH CTRS INC

8788 JAMACHA RD
SPRING VALLEY, CA 91977

Phone: (619) 515-2555

After Hours Phone: (619)
515-2555

Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

DE MIK, TRAVIS

Provider ID: 206361

Provider Gender: Male

License Number: A108228

NPI: 1629277322

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

D2. Directorio de atención primaria

Family Health Centers of San Diego

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

8788 JAMACHA RD
SPRING VALLEY, CA 91977

Phone: (619) 515-2555
After Hours Phone: (619) 515-2555

Website: www.fhcsd.org
Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY

Provider ID: 206361

Provider Gender: Female

License Number: A178499

NPI: 1033613732

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No

Family Health Centers of San Diego

GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC

8788 JAMACHA RD
SPRING VALLEY, CA 91977

Phone: (619) 515-2555
After Hours Phone: (619) 515-2555

Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY

Provider ID: 206361

Provider Gender: Female

License Number: A178499

NPI: 1033613732

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No

Family Health Centers of San Diego

GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC

8788 JAMACHA RD
SPRING VALLEY, CA 91977

Phone: (619) 515-2555
After Hours Phone: (619) 515-2555

Website: www.fhcsd.org
Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

FOLCHTORRES-AGUIAR, BEATRIZ

Provider ID: 206361

Provider Gender: Female

License Number: A148014

NPI: 1457794752

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish, Yue
Chinese

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,

Sharp Grossmont Hospital,
SCRIPPS MERCY HOSPITAL

CHULA VISTA

Board Certified Specialty: No

Family Health Centers of San

Diego
GROSSMONT SPRING VALLEY

FAMILY HLTH CTRS INC

8788 JAMACHA RD
SPRING VALLEY, CA 91977

Phone: (619) 515-2555
After Hours Phone: (619) 515-2555

Website: www.fhcsd.org
Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

FOLCHTORRES-AGUIAR, BEATRIZ


D2. Directorio de atención primaria


Provider ID: 206361

Provider Gender: Female

License Number: A148014

NPI: 1457794752

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish, Yue
Chinese

Cultural Competency: N


Hospital Affiliation:


GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
Sharp Grossmont Hospital,
SCRIPPS MERCY HOSPITAL
CHULA VISTA


Board Certified Specialty: No
Family Health Centers of San
Diego

GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC

 8788 JAMACHA RD
SPRING VALLEY, CA 91977

 Phone: (619) 515-2555

 After Hours Phone: (619)
515-2555

 Website: www.fhcsd.org


Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY


HANLEY, LAUREN

Provider ID: 206361

Provider Gender: Female

License Number: C174771

NPI: 1053392035

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp


Grossmont Hospital


Board Certified Specialty: No

Family Health Centers of San
Diego

GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC

 8788 JAMACHA RD
SPRING VALLEY, CA 91977

 Phone: (619) 515-2555

 After Hours Phone: (619)
515-2555

 Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY


HANLEY, LAUREN

Provider ID: 206361

Provider Gender: Female

License Number: C174771

NPI: 1053392035

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, Sharp

Grossmont Hospital


Board Certified Specialty: No


Family Health Centers of San

Diego

GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC

 8788 JAMACHA RD
SPRING VALLEY, CA 91977

 Phone: (619) 515-2555

 After Hours Phone: (619)
515-2555

 Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA

Provider ID: 206361

Provider Gender: Female

License Number: A72005

NPI: 1649208711

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND

HEALTHCARE CTR, SCRIPPS

MERCY HOSPITAL,


GROSSMONT HOSPITAL


Board Certified Specialty: No

Family Health Centers of San
Diego

GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC

 8788 JAMACHA RD
SPRING VALLEY, CA 91977

 Phone: (619) 515-2555

 After Hours Phone: (619)

D2. Directorio de atención primaria

515-2555
 Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-7:00PM
W-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA

Provider ID: 206361
Provider Gender: Female
License Number: A72005
NPI: 1649208711
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
CORONADO HOSP AND
HEALTHCARE CTR, SCRIPPS
MERCY HOSPITAL,
GROSSMONT HOSPITAL
Board Certified Specialty: No
Family Health Centers of San
Diego
GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC
 8788 JAMACHA RD
SPRING VALLEY, CA 91977
 Phone: (619) 515-2555
 After Hours Phone: (619)
515-2555
 Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes

Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-7:00PM
W-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON

Provider ID: 206361
Provider Gender: Female
License Number: A116680
NPI: 1700073962
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
Family Health Centers of San
Diego
GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC
 8788 JAMACHA RD
SPRING VALLEY, CA 91977
 Phone: (619) 515-2555
 After Hours Phone: (619)
515-2555
 Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT

PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-7:00PM
W-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON

Provider ID: 206361
Provider Gender: Female
License Number: A116680
NPI: 1700073962
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
Family Health Centers of San
Diego
GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC
 8788 JAMACHA RD
SPRING VALLEY, CA 91977
 Phone: (619) 515-2555
 After Hours Phone: (619)
515-2555
 Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-7:00PM
W-F 8:30AM-5:30PM

D2. Directorio de atención primaria

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA

Provider ID: 206361

Provider Gender: Female

License Number: A164859

NPI: 1952751711

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL


Board Certified Specialty: No
Family Health Centers of San
Diego

GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC

 8788 JAMACHA RD
SPRING VALLEY, CA 91977

 Phone: (619) 515-2555

 After Hours Phone: (619)
515-2555

 Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA

Provider ID: 206361

Provider Gender: Female

License Number: A164859

NPI: 1952751711

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL

Board Certified Specialty: No
Family Health Centers of San
Diego

GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC

 8788 JAMACHA RD
SPRING VALLEY, CA 91977

 Phone: (619) 515-2555

 After Hours Phone: (619)
515-2555

 Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA

Provider ID: 206361

Provider Gender: Female

License Number: 20A13958

NPI: 1932269198

Provider English Spoken: Y


Cultural Competency: N


Hospital Affiliation: Sharp
Grossmont Hospital

Board Certified Specialty: No
Family Health Centers of San
Diego


GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC

 8788 JAMACHA RD
SPRING VALLEY, CA 91977

 Phone: (619) 515-2555

 After Hours Phone: (619)

515-2555

 Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

STABEN, REBECCA

Provider ID: 206361

Provider Gender: Female

License Number: 20A13958

NPI: 1932269198

Provider English Spoken: Y


Cultural Competency: N


Hospital Affiliation: Sharp
Grossmont Hospital

Board Certified Specialty: No
Family Health Centers of San
Diego

GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC

 8788 JAMACHA RD
SPRING VALLEY, CA 91977

 Phone: (619) 515-2555

 After Hours Phone: (619)
515-2555

 Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

OBSTETRICS / GYNECOLOGY

WINESBURG, JENNIFER

D2. Directorio de atención primaria

Provider ID: 206361
Provider Gender: Female
License Number: 20A11535
NPI: 1811162456
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR,
GROSSMONT HOSPITAL,
DESERT REGIONAL MED CTR
Board Certified Specialty: No
Family Health Centers of San
Diego
GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC
 8788 JAMACHA RD
SPRING VALLEY, CA 91977
 Phone: (619) 515-2555
 After Hours Phone: (619)
515-2555
 Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-7:00PM
W-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

WINESBURG, JENNIFER

Provider ID: 206361
Provider Gender: Female
License Number: 20A11535

NPI: 1811162456
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR,
GROSSMONT HOSPITAL,
DESERT REGIONAL MED CTR
Board Certified Specialty: No
Family Health Centers of San
Diego
GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC
 8788 JAMACHA RD
SPRING VALLEY, CA 91977
 Phone: (619) 515-2555
 After Hours Phone: (619)
515-2555
 Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-7:00PM
W-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 206361
Provider Gender: Male
License Number: G78814
NPI: 1699790634
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
Family Health Centers of San
Diego
GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC
 8788 JAMACHA RD
SPRING VALLEY, CA 91977
 Phone: (619) 515-2555
 After Hours Phone: (619)
515-2555
 Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 9:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN

Provider ID: 206361
Provider Gender: Male
License Number: G78814
NPI: 1699790634
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,

D2. Directorio de atención primaria

SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Board Certified Specialty: No
Family Health Centers of San
Diego

GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC

8788 JAMACHA RD
SPRING VALLEY, CA 91977

Phone: (619) 515-2555

After Hours Phone: (619)
515-2555

Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 9:00AM-5:00PM

PEDIATRICS

JI, AMANDA

Provider ID: 206361

Provider Gender: Female

License Number: A169342

NPI: 1750745493

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL

Board Certified Specialty: No
Family Health Centers of San
Diego

GROSSMONT SPRING VALLEY

FAMILY HLTH CTRS INC

8788 JAMACHA RD
SPRING VALLEY, CA 91977

Phone: (619) 515-2555

After Hours Phone: (619)
515-2555

Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

JI, AMANDA

Provider ID: 206361

Provider Gender: Female

License Number: A169342

NPI: 1750745493

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL

Board Certified Specialty: No
Family Health Centers of San
Diego

GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC

8788 JAMACHA RD
SPRING VALLEY, CA 91977

Phone: (619) 515-2555

After Hours Phone: (619)
515-2555

Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PHYSICIANS ASSISTANT

LOPEZ, MARIO

Provider ID: 206361

Provider Gender: Male

License Number: PA21385

NPI: 1932335080

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
Family Health Centers of San
Diego

GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC

8788 JAMACHA RD
SPRING VALLEY, CA 91977

Phone: (619) 515-2555

After Hours Phone: (619)
515-2555

Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM

W-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

LOPEZ, MARIO

Provider ID: 206361

Provider Gender: Male

License Number: PA21385

NPI: 1932335080

Provider English Spoken: Y
Cultural Competency: N

D2. Directorio de atención primaria

Board Certified Specialty: No
Family Health Centers of San Diego

GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC

8788 JAMACHA RD
SPRING VALLEY, CA 91977

Phone: (619) 515-2555

After Hours Phone: (619)
515-2555

Website: www.fhcsd.org
Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM

W-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

TRAN, TU-UYEN

Provider ID: 206361

Provider Gender: Female

License Number: PA54588

NPI: 1598293748

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San Diego

GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC

8788 JAMACHA RD
SPRING VALLEY, CA 91977

Phone: (619) 515-2555

After Hours Phone: (619)
515-2555

Website: www.fhcsd.org

Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM

TU 8:30AM-7:00PM

W-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

TRAN, TU-UYEN

Provider ID: 206361

Provider Gender: Female

License Number: PA54588

NPI: 1598293748

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San Diego

GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC

8788 JAMACHA RD
SPRING VALLEY, CA 91977

Phone: (619) 515-2555

After Hours Phone: (619)
515-2555

Website: www.fhcsd.org
Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM

TU 8:30AM-7:00PM

W-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

TURNER, ERIC

Provider ID: 206361

Provider Gender: Male

License Number: PA55067

NPI: 1669756128

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

Family Health Centers of San Diego

GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC

8788 JAMACHA RD
SPRING VALLEY, CA 91977

Phone: (619) 515-2555

After Hours Phone: (619)
515-2555

Website: www.fhcsd.org
Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT

TURNER, ERIC

Provider ID: 206361

Provider Gender: Male

License Number: PA55067

NPI: 1669756128

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No

D2. Directorio de atención primaria

Family Health Centers of San Diego
GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

8788 JAMACHA RD
SPRING VALLEY, CA 91977

Phone: (619) 515-2555
After Hours Phone: (619) 515-2555

Website: www.fhcsd.org
Email: angelad@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM

VALLEY CENTER

CLINIC OUTPATIENT

NEIGHBORHOOD

HEALTHCARE,

Provider ID: 519918

NPI: 1437335148

Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP
NEIGHBORHOOD

HEALTHCARE

28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

Phone: (760) 742-9919
Fax: (360) 462-2750

After Hours Phone: (760) 742-9919

Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

CLINIC OUTPATIENT

NEIGHBORHOOD

HEALTHCARE,

Provider ID: 519918

NPI: 1437335148

Provider English Spoken: Y
Cultural Competency: N

IHP of Southern Cal-PHP
NEIGHBORHOOD

HEALTHCARE

28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

Phone: (760) 742-9919
Fax: (360) 462-2750

After Hours Phone: (760) 742-9919

Website: N/A

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

AYON MARTINEZ, CARLOS

Provider ID: 519918

Provider Gender: Male

License Number: A114419

NPI: 1154583128

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE

28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

Phone: (760) 742-9919
After Hours Phone: (760) 742-9919

Website: N/A

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

AYON MARTINEZ, CARLOS

Provider ID: 519918

Provider Gender: Male

License Number: A114419

NPI: 1154583128

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE

28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

Phone: (760) 742-9919
After Hours Phone: (760) 742-9919

Website: N/A

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

D2. Directorio de atención primaria

FAMILY PRACTICE


CASTANER, ZALYA

Provider ID: 519918

Provider Gender: Female

License Number: A139490

NPI: 1487072179

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER


Board Certified Specialty: No


IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE

 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

 Phone: (760) 742-9912

 After Hours Phone: (760)
742-9912

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE

CASTANER, ZALYA

Provider ID: 519918

Provider Gender: Female

License Number: A139490

NPI: 1487072179

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER


Board Certified Specialty: No


IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE

 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

 Phone: (760) 742-9912

 After Hours Phone: (760)
742-9912

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE


SCHULTZ, JAMES

Provider ID: 519918

Provider Gender: Male

License Number: G61829

NPI: 1356376164

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Farsi, Greek,
Spanish

Cultural Competency: N

Hospital Affiliation:

SOUTHWEST HEALTHCARE

INLAND VALLEY HOSPITAL,

SOUTHWEST HEALTHCARE

RANCHO SPRINGS HOSPITAL,

PALOMAR MEDICAL CENTER


Board Certified Specialty: No

IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE

 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

 Phone: (760) 742-9919

 After Hours Phone: (760)
742-9919

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FAMILY PRACTICE

SCHULTZ, JAMES

Provider ID: 519918

Provider Gender: Male

License Number: G61829

NPI: 1356376164

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Farsi, Greek,
Spanish

Cultural Competency: N

Hospital Affiliation:

SOUTHWEST HEALTHCARE

INLAND VALLEY HOSPITAL,

SOUTHWEST HEALTHCARE

RANCHO SPRINGS HOSPITAL,

PALOMAR MEDICAL CENTER


Board Certified Specialty: No


IHP of Southern Cal-PHP

NEIGHBORHOOD

HEALTHCARE

 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

 Phone: (760) 742-9919

 After Hours Phone: (760)
742-9919

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999


American Sign Language (ASL):
N

D2. Directorio de atención primaria



 *Accessibility: CONTACT PROVIDER*

FQHC NEIGHBORHOOD HEALTHCARE,


*Provider ID: 519918
NPI: 1437335148*

 *Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE*

 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
 *Phone: (760) 742-9919
Fax: (360) 462-2750*


 *After Hours Phone: (760)
742-9919*
 *Website: N/A*

*Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM*

FQHC NEIGHBORHOOD HEALTHCARE,


*Provider ID: 519918
NPI: 1437335148*

 *Provider English Spoken: Y
Cultural Competency: N
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE*


 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
 *Phone: (760) 742-9919*

Fax: (360) 462-2750

 *After Hours Phone: (760)
742-9919*

 *Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999*



*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM*

PEDIATRICS


CRAYCHEE, LEO



*Provider ID: 71887
Provider Gender: Male
NPI: 1265432710*

 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO*


*Board Certified Specialty: No
Rady Childrens Health Network
LEO C CRAYCHEE*

 28714 VALLEY CENTER RD
STE L
VALLEY CENTER, CA 92082

 *Phone: (760) 749-7770
Fax: (760) 751-9988*

 *After Hours Phone: (760)
749-7770*
 *Website: N/A*

*Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N*


 *Accessibility: CONTACT
PROVIDER
Hours: M-F 8:30AM-5:00PM*

PHYSICIANS ASSISTANT


AGUEY, OMAR

*Provider ID: 519918
Provider Gender: Male
License Number: PA18708
NPI: 1851479372*

 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP
NEIGHBORHOOD
HEALTHCARE*

 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
 *Phone: (760) 742-9919*
 *After Hours Phone: (760)
742-9919*

 *Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER
Hours: M-F 8:00AM-5:00PM*

PHYSICIANS ASSISTANT

AGUEY, OMAR

*Provider ID: 519918
Provider Gender: Male
License Number: PA18708
NPI: 1851479372*

 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
IHP of Southern Cal-PHP*

D2. Directorio de atención primaria

NEIGHBORHOOD

HEALTHCARE

28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082

Phone: (760) 742-9919

After Hours Phone: (760)
742-9919

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

VISTA

CERTIFIED NURSE

PRACTITIONER

HALGEDAHL, YI TING

Provider ID: 400339

Provider Gender: Female

License Number: NP95006826

NPI: 1619246907

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese, Mandarin

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

GRAPEVINE

134 GRAPEVINE RD
VISTA, CA 92083

Phone: (760) 631-5000

After Hours Phone: (760)
631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): **PRACTITIONER**

N

Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-5:00PM

TU 10:30AM-7:30PM

W-F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

HALGEDAHL, YI TING

Provider ID: 400339

Provider Gender: Female

License Number: NP95006826

NPI: 1619246907

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese, Mandarin

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

GRAPEVINE

134 GRAPEVINE RD
VISTA, CA 92083

Phone: (760) 631-5000

After Hours Phone: (760)
631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-5:00PM

TU 10:30AM-7:30PM

W-F 8:00AM-5:00PM

CERTIFIED NURSE

KELLEHER, BRIDGET

Provider ID: 400339

Provider Gender: Female

License Number: NP95003447

NPI: 1245695006

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR

Board Certified Specialty: No

IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

GRAPEVINE

134 GRAPEVINE RD
VISTA, CA 92083

Phone: (760) 631-5000

After Hours Phone: (760)
631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-5:00PM

TU 10:30AM-7:30PM

W-F 8:00AM-5:00PM

CERTIFIED NURSE

PRACTITIONER

KELLEHER, BRIDGET

Provider ID: 400339


Provider Gender: Female

License Number: NP95003447



NPI: 1245695006

Provider English Spoken: Y

D2. Directorio de atención primaria

 *Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR
Board Certified Specialty: No
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
GRAPEVINE*

 134 GRAPEVINE RD
VISTA, CA 92083

 *Phone: (760) 631-5000*
 *After Hours Phone: (760)
631-5000*

 *Website: www.vistacommunityclinic.org*

*Medi-Cal Open Panel: Yes
Min/Max Age: 0\999*

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

*Hours: M 8:00AM-5:00PM
TU 10:30AM-7:30PM
W-F 8:00AM-5:00PM*

CERTIFIED NURSE

PRACTITIONER

WILLIAMS, JINA

Provider ID: 400339

Provider Gender: Female

License Number: NP95020624



NPI: 1225500259

 *Provider English Spoken: Y
Cultural Competency: N*

*Board Certified Specialty: No
IHP of Southern Cal-PHP*

*VISTA COMMUNITY CLINIC
GRAPEVINE*

 134 GRAPEVINE RD
VISTA, CA 92083

 *Phone: (760) 631-5000*
 *After Hours Phone: (760)
631-5000*

 *Website: www.vistacommunityclinic.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

CERTIFIED NURSE

PRACTITIONER

WILLIAMS, JINA

Provider ID: 400339

Provider Gender: Female

License Number: NP95020624



NPI: 1225500259

 *Provider English Spoken: Y
Cultural Competency: N*

*Board Certified Specialty: No
IHP of Southern Cal-PHP*

*VISTA COMMUNITY CLINIC
GRAPEVINE*

 134 GRAPEVINE RD
VISTA, CA 92083

 *Phone: (760) 631-5000*
 *After Hours Phone: (760)
631-5000*

 *Website: www.vistacommunityclinic.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

CHIROPRACTOR

JU, NATHANIEL

Provider ID: 400339

Provider Gender: Male

License Number: DC32054

NPI: 1972883882



 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Chinese*

Cultural Competency: N

*Board Certified Specialty: No
IHP of Southern Cal-PHP*

*VISTA COMMUNITY CLINIC
GRAPEVINE*

 134 GRAPEVINE RD
VISTA, CA 92083

 *Phone: (760) 631-5000*
 *After Hours Phone: (760)
631-5000*

 *Website: www.vistacommunityclinic.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

*Hours: M 8:00AM-5:00PM
TU 10:30AM-7:30PM*

W-F 8:00AM-5:00PM

CHIROPRACTOR



JU, NATHANIEL

Provider ID: 400339

Provider Gender: Male

License Number: DC32054

NPI: 1972883882

 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Chinese*

Cultural Competency: N

*Board Certified Specialty: No
IHP of Southern Cal-PHP*

*VISTA COMMUNITY CLINIC
GRAPEVINE*

D2. Directorio de atención primaria

GRAPEVINE


 134 GRAPEVINE RD
VISTA, CA 92083
 Phone: (760) 631-5000
 After Hours Phone: (760)
631-5000
 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M 8:00AM-5:00PM

TU 10:30AM-7:30PM

W-F 8:00AM-5:00PM

FAMILY PRACTICE


ESPINOSA-SILVA, YAMINAH

Provider ID: 400339

Provider Gender: Female

License Number: 20A12958

NPI: 1003172016

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, TRI CITY MEDICAL
CTR

Board Certified Specialty: No


IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

GRAPEVINE

 134 GRAPEVINE RD

VISTA, CA 92083

 Phone: (760) 631-5000

 After Hours Phone: (760)

631-5000

 Website: www.vistacommunityclinic.org

nityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE


ESPINOSA-SILVA, YAMINAH

Provider ID: 400339

Provider Gender: Female

License Number: 20A12958

NPI: 1003172016

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, TRI CITY MEDICAL
CTR

Board Certified Specialty: No


IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

GRAPEVINE

 134 GRAPEVINE RD

VISTA, CA 92083

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

KETCHEL, CLINT


Provider ID: 400339

Provider Gender: Male

License Number: A135564

NPI: 1699038125

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, Chaldean
Neo-Aramaic, Spanish,
Syriac

Cultural Competency: N

Hospital Affiliation:

SOUTHWEST HEALTHCARE

RANCHO SPRINGS HOSPITAL,

SOUTHWEST HEALTHCARE

INLAND VALLEY HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL ENCINITAS, TRI CITY

MEDICAL CTR, WHITTIER

HOSPITAL MEDICAL CENTER

Board Certified Specialty: No


IHP of Southern Cal-PHP


VISTA COMMUNITY CLINIC


GRAPEVINE

 134 GRAPEVINE RD

VISTA, CA 92083

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M 8:00AM-5:00PM

TU 10:30AM-7:30PM

W-F 8:00AM-5:00PM

D2. Directorio de atención primaria

FAMILY PRACTICE

KETCHEL, CLINT

Provider ID: 400339

Provider Gender: Male

License Number: A135564

NPI: 1699038125

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic, Chaldean
Neo-Aramaic, Spanish,
Syriac

Cultural Competency: N

Hospital Affiliation:

SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL ENCINITAS, TRI CITY
MEDICAL CTR, WHITTIER

HOSPITAL MEDICAL CENTER

Board Certified Specialty: No

IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

GRAPEVINE

134 GRAPEVINE RD
VISTA, CA 92083

Phone: (760) 631-5000

After Hours Phone: (760)
631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-5:00PM

TU 10:30AM-7:30PM

W-F 8:00AM-5:00PM

FQHC

VCC DURIAN,

Provider ID: 411518

NPI: 1851300123

Provider English Spoken: Y

Cultural Competency: N

IHP of Southern Cal-PHP

VCC DURIAN

105 DURIAN ST STE A
VISTA, CA 92083

Phone: (844) 308-5003

Fax: (760) 414-3892

After Hours Phone: (844)
308-5003

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:00PM

FQHC

VCC DURIAN,

Provider ID: 411518

NPI: 1851300123

Provider English Spoken: Y

Cultural Competency: N

IHP of Southern Cal-PHP

VCC DURIAN

105 DURIAN ST STE A
VISTA, CA 92083

Phone: (844) 308-5003

Fax: (760) 414-3892

After Hours Phone: (844)
308-5003

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-5:00PM

FQHC

VISTA COMMUNITY CLINIC

GRAPEVINE,

Provider ID: 400339

NPI: 1851300123

Provider English Spoken: Y

Cultural Competency: N

IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

GRAPEVINE

134 GRAPEVINE RD
VISTA, CA 92083

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-5:00PM

TU 10:30AM-7:30PM

W-F 8:00AM-5:00PM

FQHC

VISTA COMMUNITY CLINIC

GRAPEVINE,

Provider ID: 400339


NPI: 1851300123

Provider English Spoken: Y

D2. Directorio de atención primaria

Cultural Competency: N
IHP of Southern Cal-PHP
VISTA COMMUNITY CLINIC
GRAPEVINE

 134 GRAPEVINE RD
VISTA, CA 92083

 *Phone: (760) 631-5000*
Fax: (760) 414-3892

 *After Hours Phone: (760)*
631-5000

 *Website: www.vistacommunityclinic.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M 8:00AM-5:00PM

TU 10:30AM-7:30PM

W-F 8:00AM-5:00PM


PEDIATRICS

AMBO, STANLEY

Provider ID: 52269

Provider Gender: Male

NPI: 1891735676

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL


ENCINITAS, RADY CHILDRENS


HOSPITAL SAN DIEGO

Board Certified Specialty: No

Rady Childrens Health Network

STANLEY G AMBO

 2067 W VISTA WAY STE 180
VISTA, CA 92083

 *Phone: (760) 945-3434*

Fax: (760) 945-6761

 *After Hours Phone: (760)*
945-3434

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:00AM-5:00PM


PEDIATRICS

ASSELIN, LYNETTE

Provider ID: 65507

Provider Gender: Female

NPI: 1053484568

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: TRI CITY


MEDICAL CTR

Board Certified Specialty: No

Rady Childrens Health Network

LYNETTE M ASSELIN

 2067 W VISTA WAY STE 280
VISTA, CA 92083

 *Phone: (760) 941-3630*

Fax: (760) 941-1214

 *After Hours Phone: (760)*
941-3630

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:30AM-6:00PM
SA 9:00AM-1:00PM

PEDIATRICS

BEDROSIAN, DIANE

Provider ID: 80272

Provider Gender: Female

NPI: 1447323951

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY


MEDICAL CTR

Board Certified Specialty: No

Rady Childrens Health Network

DIANE H BEDROSIAN

 2067 W VISTA WAY STE 280
VISTA, CA 92083

 *Phone: (760) 941-3630*

Fax: (760) 941-1214

 *After Hours Phone: (760)*
941-3630

 *Website: N/A*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F 8:30AM-6:00PM

SA 9:00AM-1:00PM

PEDIATRICS

CASTRO, JORGE

Provider ID: 100779

Provider Gender: Male

NPI: 1326082868

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

D2. Directorio de atención primaria

MEDICAL CTR, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, RADY CHILDRENS
HOSPITAL SAN DIEGO
Board Certified Specialty: No
Rady Childrens Health Network
JORGE L CASTRO

2067 W VISTA WAY STE 180
VISTA, CA 92083

Phone: (760) 945-3434

Fax: (760) 945-6761

After Hours Phone: (760)
945-3434

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

HARTFORD, NICOLE

Provider ID: 411518

Provider Gender: Female

License Number: 20A14390

NPI: 1346530466

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

VCC DURIAN

105 DURIAN ST STE A
VISTA, CA 92083

Phone: (844) 308-5003

After Hours Phone: (844)
308-5003

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

HARTFORD, NICOLE

Provider ID: 411518

Provider Gender: Female

License Number: 20A14390

NPI: 1346530466

Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
IHP of Southern Cal-PHP

VCC DURIAN

105 DURIAN ST STE A
VISTA, CA 92083

Phone: (844) 308-5003

After Hours Phone: (844)
308-5003

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PEDIATRICS

KARP, MICHAEL

Provider ID: 95672

Provider Gender: Male

NPI: 1295808632

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Board Certified Specialty: No

Rady Childrens Health Network

MICHAEL W KARP

2067 W VISTA WAY STE 280
VISTA, CA 92083

Phone: (760) 941-3630

Fax: (760) 941-1214

After Hours Phone: (760)
941-3630

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 8:30AM-6:00PM
SA 9:00AM-1:00PM

PEDIATRICS

KRAK, MICHAEL

Provider ID: 23455

Provider Gender: Male

NPI: 1003989419

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

ENCINITAS, TRI CITY MEDICAL
CTR

Board Certified Specialty: Yes

Rady Childrens Health Network
MICHAEL D KRAK

2067 W VISTA WAY STE 280
VISTA, CA 92083

Phone: (760) 941-3630

Fax: (760) 941-1214

After Hours Phone: (760)
941-3630

Website: N/A

Medi-Cal Open Panel: Yes

D2. Directorio de atención primaria

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-6:00PM
SA 9:00AM-1:00PM

PEDIATRICS

LUSCHWITZ, BRIAN

Provider ID: 400339

Provider Gender: Male

License Number: A60517

NPI: 1205868510

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: TRI CITY
MEDICAL CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC
GRAPEVINE

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M 8:00AM-5:00PM

TU 10:30AM-7:30PM

W-F 8:00AM-5:00PM

PEDIATRICS

LUSCHWITZ, BRIAN

Provider ID: 400339

Provider Gender: Male

License Number: A60517

NPI: 1205868510

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: TRI CITY
MEDICAL CTR

Board Certified Specialty: No
IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC
GRAPEVINE

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

 Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Hours: M 8:00AM-5:00PM

TU 10:30AM-7:30PM

W-F 8:00AM-5:00PM

PEDIATRICS

NAUDIN, VERONICA

Provider ID: 84118

Provider Gender: Female

NPI: 1093755878

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, SCRIPPS


MEMORIAL HOSPITAL

ENCINITAS, RADY CHILDRENS
HOSPITAL SAN DIEGO

Board Certified Specialty: No

Rady Childrens Health Network
VERONICA L NAUDIN

 2067 W VISTA WAY STE 180
VISTA, CA 92083

 Phone: (760) 945-3434

Fax: (760) 945-6761

 After Hours Phone: (760)
945-3434

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

PEDIATRICS

PERTL, URSULA

Provider ID: 593894

Provider Gender: Female

NPI: 1609947464

Provider English Spoken: Y

Provider Language(s)
Spoken: German, Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, RADY CHILDRENS
HOSPITAL SAN DIEGO,

CHILDRENS HOSP OF LOS
ANGELES

D2. Directorio de atención primaria

Board Certified Specialty: No
Rady Childrens Health Network
URSULA G PERTL

2067 W VISTA WAY STE 180
VISTA, CA 92083

Phone: (760) 945-3434

Fax: (760) 945-6761

After Hours Phone: (760)
945-3434

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: SU 10:00AM-2:00PM

M-F 8:00AM-5:00PM

SA 8:00AM-0:00PM

PEDIATRICS

RONAN, KEVIN

Provider ID: 400339

Provider Gender: Male

License Number: G77176

NPI: 1225017353

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS

Board Certified Specialty: No

IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

GRAPEVINE

134 GRAPEVINE RD

VISTA, CA 92083

Phone: (760) 631-5000

After Hours Phone: (760)
631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-5:00PM

TU 10:30AM-7:30PM

W-F 8:00AM-5:00PM

PEDIATRICS

RONAN, KEVIN

Provider ID: 400339

Provider Gender: Male

License Number: G77176

NPI: 1225017353

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS

Board Certified Specialty: No

IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

GRAPEVINE

134 GRAPEVINE RD

VISTA, CA 92083

Phone: (760) 631-5000

After Hours Phone: (760)
631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-5:00PM

TU 10:30AM-7:30PM

W-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT

WEAVER, APRIL

Provider ID: 400339

Provider Gender: Female

License Number: PA20775

NPI: 1063552800

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

GRAPEVINE

134 GRAPEVINE RD

VISTA, CA 92083

Phone: (760) 631-5000

After Hours Phone: (760)
631-5000

Website: www.vistacommunityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH 9:00AM-2:00PM

F 8:00AM-5:00PM

SA 8:00AM-4:00PM

PHYSICIANS ASSISTANT

WEAVER, APRIL

D2. Directorio de atención primaria

Provider ID: 400339

Provider Gender: Female

License Number: PA20775

NPI: 1063552800

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No


IHP of Southern Cal-PHP

VISTA COMMUNITY CLINIC

GRAPEVINE

 *134 GRAPEVINE RD*

VISTA, CA 92083

 *Phone: (760) 631-5000*

 *After Hours Phone: (760)*

631-5000

 *Website: www.vistacommunityclinic.org*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-TH 9:00AM-2:00PM

F 8:00AM-5:00PM

SA 8:00AM-4:00PM

D3. Directorio de proveedores especialistas

ALPINE

OPTOMETRIST

AOTO, KIM

Provider ID: 268720

Board Certified Specialty: No
KIM N AOTO

📍 1620 ALPINE BLVD STE 117
ALPINE, CA 91901

☎ Phone: (800) 898-2020

Fax: (844) 897-3788

🕒 After Hours Phone: (800)
898-2020

Provider Gender: Female

NPI: 1780935650

🗨 Provider English Spoken: Y

🗨 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:30AM-5:00PM

🌐 Website: N/A

PSYCHOLOGIST

TORRES, RANDALL

Provider ID: 306854

Board Certified Specialty: No
RANDALL P TORRES

📍 1620 ALPINE BLVD STE 110
ALPINE, CA 91901

☎ Phone: (619) 662-4100

🕒 After Hours Phone: (619)
662-4100

Provider Gender: Male

NPI: 1871696435

🗨 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 12\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

CARLSBAD

CERTIFIED NURSE

PRACTITIONER

HOOPER, BONNIE

Provider ID: 275252

Board Certified Specialty: No
BONNIE J HOOPER

📍 6010 HIDDEN VALLEY RD
STE 120

CARLSBAD, CA 92011

☎ Phone: (760) 884-5990

Fax: (760) 448-4404

🕒 After Hours Phone: (760)
884-5990

Provider Gender: Female

NPI: 1821062878

🗨 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

RICE, ELIZABETH

Provider ID: 304664

Board Certified Specialty: No
ELIZABETH M RICE

📍 6010 HIDDEN VALLEY RD
STE 200

CARLSBAD, CA 92011

☎ Phone: (760) 631-3000

Fax: (760) 631-3016

🕒 After Hours Phone: (760)
631-3000

Provider Gender: Female

NPI: 1902470537

🗨 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

DERMATOLOGY

ZUBAIR, RAHEEL

Provider ID: 306519

Board Certified Specialty: No
RAHEEL A ZUBAIR

📍 6010 HIDDEN VALLEY RD
STE 120

CARLSBAD, CA 92011

☎ Phone: (760) 448-4484

Fax: (760) 448-4404

🕒 After Hours Phone: (760)
448-4484

Provider Gender: Male

NPI: 1326493024

🗨 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

D3. Directorio de proveedores especialistas

N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

FAMILY PRACTICE

CHAVEZSANTOS, MARIA

Provider ID: 307651
Board Certified Specialty: No
MARIA J CHAVEZSANTOS
1295 CARLSBAD VILLAGE
DR STE 100
CARLSBAD, CA 92008
Phone: (760) 736-6767
Fax: (760) 720-7204
After Hours Phone: (760)
736-6767

Provider Gender: Female
NPI: 1780061440

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):

N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-8:00PM
SA 8:00AM-5:00PM
Website: N/A

HEARING AID DEALER / SUPPLIER

DAVIS, KELLE

Provider ID: 268654
Board Certified Specialty: No
KELLE L DAVIS

1820 MARRON RD STE 102
CARLSBAD, CA 92008
Phone: (760) 434-0125
Fax: (760) 434-4531
After Hours Phone: (760)
434-0125

Provider Gender: Female
NPI: 1902853344

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):

N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:30AM-5:00PM
Website: N/A

NEUROLOGY

DROKER, BRIAN

Provider ID: 306953
Board Certified Specialty: No
BRIAN S DROKER

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Phone: (760) 631-3000
Fax: (760) 270-9534
After Hours Phone: (760)
631-3000

Provider Gender: Male
NPI: 1801112669

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER
Hours: M 8:00AM-5:00PM
W 8:00AM-5:00PM
Website: N/A

NEUROLOGY

YOSHII-CONTRERAS, JUNE

Provider ID: 296589
Board Certified Specialty: No
JUNE YOSHII-CONTRERAS
6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Phone: (760) 631-3000
Fax: (760) 631-3016

After Hours Phone: (760)
631-3000
Provider Gender: Female
NPI: 1437441763

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, SCRIPPS
MEMORIAL HOSPITAL,
PALOMAR MEDICAL CENTER,
TRI CITY MEDICAL CTR,
SCRIPPS MERCY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

OTOLARYNGOLOGY

D3. Directorio de proveedores especialistas

CHANG, EDWARD

Provider ID: 309534

Board Certified Specialty: No
EDWARD W CHANG

2390 FARADAY AVE
CARLSBAD, CA 92008

Phone: (858) 909-0770

Fax: (858) 909-0880

After Hours Phone: (858)
909-0770

Provider Gender: Male

NPI: 1528146008

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL): N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OTOLARYNGOLOGY

DONALDSON, CHADWICK

Provider ID: 268146

Board Certified Specialty: No
CHADWICK J DONALDSON

2390 FARADAY AVE
CARLSBAD, CA 92008

Phone: (858) 909-0770

Fax: (858) 909-0880

After Hours Phone: (858)
909-0770

Provider Gender: Male

NPI: 1891743910

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
TEMECULA VALLEY HOSPITAL N

INC, SCRIPPS MEMORIAL
HOSPITAL, SOUTHWEST

HEALTHCARE RANCHO

SPRINGS HOSPITAL,

SOUTHWEST HEALTHCARE

INLAND VALLEY HOSPITAL,

SHARP MEMORIAL HOSPITAL,

SHARP CHULA VISTA MED

CTR, SHARP CHULA VISTA

MED CTR, Sharp Grossmont
Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

HERMANSON, KATHLEEN

Provider ID: 269004

Board Certified Specialty: No
KATHLEEN H HERMANSON

6010 HIDDEN VALLEY RD
STE 200

CARLSBAD, CA 92011

Phone: (760) 631-3000

Fax: (760) 631-3016

After Hours Phone: (760)
631-3000

Provider Gender: Female

NPI: 1598160343

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-4:00PM

Website: N/A

PHYSICIANS ASSISTANT

INOCELDA, ANDREW

Provider ID: 269089

Board Certified Specialty: No
ANDREW G INOCELDA

6010 HIDDEN VALLEY RD
STE 200

CARLSBAD, CA 92011

Phone: (760) 631-3000

Fax: (760) 631-3016

After Hours Phone: (760)
631-3000

Provider Gender: Male

NPI: 1497950208

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

SHIMIZU, KELSIE

Provider ID: 296819

Board Certified Specialty: No
KELSIE SHIMIZU

2390 FARADAY AVE

CARLSBAD, CA 92008

Phone: (858) 909-0770

D3. Directorio de proveedores especialistas

Fax: (858) 909-0880

☎ After Hours Phone: (858) 909-0770

Provider Gender: Female

NPI: 1972107811

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: KECK

HOSPITAL OF USC, USC

KENNETH NORRIS JR CANCER

HOSPITAL, USC VERDUGO

HILLS HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PHYSICIANS ASSISTANT

WILAND, WINONA

Provider ID: 296809

Board Certified Specialty: No

WINONA L WILAND

📍 2390 FARADAY AVE
CARLSBAD, CA 92008

☎ Phone: (858) 909-0770

Fax: (858) 909-0880

☎ After Hours Phone: (858) 909-0770

Provider Gender: Female

NPI: 1043967383

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

REGISTERED PHYSICAL

THERAPIST

AMBROSE, CHRISTOPHER

Provider ID: 248010

Board Certified Specialty: No

CHRISTOPHER S AMBROSE

📍 3070 MADISON ST
CARLSBAD, CA 92008

☎ Phone: (760) 434-6100

Fax: (760) 471-5139

☎ After Hours Phone: (760) 591-7750

Provider Gender: Male

NPI: 1114977535

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 8\125

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M 7:00AM-7:00PM
TU 7:00AM-5:00PM

W 7:00AM-7:00PM

TH 7:00AM-5:00PM

F 7:00AM-7:00PM

🌐 Website: N/A

REGISTERED PHYSICAL

THERAPIST

MCGEE, JACQUELINE

Provider ID: 252472

Board Certified Specialty: No

JACQUELINE M MCGEE

📍 3070 MADISON ST

CARLSBAD, CA 92008

☎ Phone: (760) 434-6100

Fax: (760) 434-4583

☎ After Hours Phone: (760) 434-6100

Provider Gender: Female

NPI: 1194217133

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 8\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
7:00AM-6:00PM

🌐 Website: N/A

SURGERY NEUROLOGICAL

BEN-HAIM, SHARONA

Provider ID: 244069

Board Certified Specialty: No

SHARONA BEN-HAIM

📍 6010 HIDDEN VALLEY RD
STE 200

CARLSBAD, CA 92011

☎ Phone: (800) 926-8273

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1942469663

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Hebrew, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

D3. Directorio de proveedores especialistas

American Sign Language (ASL): NIKHIL K MURTHY

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


SURGERY NEUROLOGICAL

BLASKIEWICZ, DONALD

Provider ID: 270283

Board Certified Specialty: No
DONALD J BLASKIEWICZ

 6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1215176839

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


SURGERY NEUROLOGICAL

MURTHY, NIKHIL

Provider ID: 299996

Board Certified Specialty: No

 6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1710371273

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


 Website: N/A



SURGERY NEUROLOGICAL

PHAM, MARTIN

Provider ID: 203510

Board Certified Specialty: No
MARTIN H PHAM

 6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

 Phone: (619) 543-5540
 After Hours Phone: (619)
543-5540

Provider Gender: Male

NPI: 1609130921

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CHULA VISTA

ANESTHESIOLOGY PAIN

MANAGEMENT


DAIRO, BRANDON

Provider ID: 300088

Board Certified Specialty: No

BRANDON DAIRO

 340 4TH AVE STE 19
CHULA VISTA, CA 91910

 Phone: (619) 761-5308
Fax: (619) 591-1910

 After Hours Phone: (619)
761-5308

Provider Gender: Male

NPI: 1689092470

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA


VISTA


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

ANESTHESIOLOGY PAIN

MANAGEMENT

D3. Directorio de proveedores especialistas

DAIRO, BRANDON

Provider ID: 299879

Board Certified Specialty: No
BRANDON DAIRO

340 4TH AVE STE 19
CHULA VISTA, CA 91910

Phone: (619) 761-5308

Fax: (619) 591-1910

After Hours Phone: (619)
761-5308

Provider Gender: Male

NPI: 1689092470

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA
VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 18\100

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CARDIOVASCULAR DISEASE

LERNER, JONATHAN

Provider ID: 303445

Board Certified Specialty: No
JONATHAN H LERNER

765 MEDICAL CENTER CT
STE 211

CHULA VISTA, CA 91911

Phone: (619) 616-2100

Fax: (619) 616-2104

After Hours Phone: (619)
616-2100

Provider Gender: Male

NPI: 1962899823

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED ACUPUNCTURIST

LAM, KHANH

Provider ID: 295381

Board Certified Specialty: No

KHANH M LAM

340 4TH AVE STE 19
CHULA VISTA, CA 91910

Phone: (619) 761-5308

Fax: (619) 591-1910

After Hours Phone: (619)
761-5308

Provider Gender: Male

NPI: 1649594979

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese, French,
Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

CERTIFIED ACUPUNCTURIST

WILCOX, WENONAH

Provider ID: 290591

Board Certified Specialty: No
WENONAH WILCOX

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 425-1184

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1598037178

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED NURSE

PRACTITIONER

ARMSTON, LINDSEY

Provider ID: 309664

Board Certified Specialty: No
LINDSEY C ARMSTON

450 4TH AVE STE 215
CHULA VISTA, CA 91910

Phone: (619) 425-3840




Fax: (619) 425-3842

After Hours Phone: (619)
425-3840

Provider Gender: Female

NPI: 1841851375



D3. Directorio de proveedores especialistas

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, SCRIPPS
MERCY HOSPITAL CHULA
VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*


CERTIFIED NURSE

PRACTITIONER

BRACEY-ASIEDU,
ALEKSANDRYA

Provider ID: 309695
Board Certified Specialty: No
ALEKSANDRYA C
BRACEY-ASIEDU
 450 4TH AVE STE 215
CHULA VISTA, CA 91910
 *Phone: (619) 425-3840*
Fax: (619) 425-3842
 *After Hours Phone: (619)*
425-3840
Provider Gender: Female
NPI: 1336625524

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: TEMECULA
VALLEY HOSPITAL INC
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*

PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*


CERTIFIED NURSE




PRACTITIONER

BRAYTENBAH, MELANIE

Provider ID: 268746
Board Certified Specialty: No
MELANIE BRAYTENBAH
 752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
 *Phone: (619) 421-3361*
Fax: (619) 869-4378
 *After Hours Phone: (619)*
421-3361

Provider Gender: Female
NPI: 1508370875



 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
9:00AM-5:00PM
 *Website: N/A*

CERTIFIED NURSE

PRACTITIONER


BRAYTENBAH, MELANIE




Provider ID: 295830
Board Certified Specialty: No
MELANIE BRAYTENBAH
 752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
 *Phone: (619) 421-3361*

Fax: (619) 869-4378

 *After Hours Phone: (619)*
421-3361

Provider Gender: Female
NPI: 1508370875




 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N


 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
9:00AM-5:00PM
 *Website: N/A*



CERTIFIED NURSE

PRACTITIONER

BRAYTENBAH, MELANIE

Provider ID: 262342
Board Certified Specialty: No
MELANIE BRAYTENBAH
 752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
 *Phone: (619) 421-3361*
Fax: (619) 869-4378
 *After Hours Phone: (619)*
421-3361
Provider Gender: Female
NPI: 1508370875

 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
9:00AM-5:00PM

D3. Directorio de proveedores especialistas

 Website: N/A


CERTIFIED NURSE PRACTITIONER

CARRION GELABERT, ANA

Provider ID: 302402

Board Certified Specialty: No
ANA M CARRION GELABERT

 450 FOURTH AVESTE 215
CHULA VISTA, CA 91910

 Phone: (619) 425-3840

Fax: (619) 425-3842

 After Hours Phone: (619)
425-3840

Provider Gender: Female

NPI: 1023178233

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-6:00PM

 Website: N/A


CERTIFIED NURSE PRACTITIONER

DE DIOS, SARAH JANE

Provider ID: 302418

Board Certified Specialty: No
SARAH JANE J DE DIOS

 450 4TH AVE STE 215
CHULA VISTA, CA 91910

 Phone: (619) 425-3840

Fax: (619) 369-4880

 After Hours Phone: (619)
425-3840

Provider Gender: Female

NPI: 1528632742


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SHARP
CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE PRACTITIONER


IBARRA, MARTHA

Provider ID: 308352


Board Certified Specialty: No

MARTHA A IBARRA

 855 THIRD AVESTE 2220
CHULA VISTA, CA 91911



 Phone: (619) 662-4100

Fax: (619) 662-4196

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1114957289

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 14\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:30AM-5:30PM
SA 8:30AM-2:30PM

 Website: N/A


CERTIFIED NURSE PRACTITIONER

LANE, KIMBERLY

Provider ID: 301598

Board Certified Specialty: No
KIMBERLY A LANE

 752 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911

 Phone: (619) 397-4500

Fax: (858) 429-7931

 After Hours Phone: (619)
397-4500

Provider Gender: Female

NPI: 1457670119


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

EMERGENCY MEDICINE


DILLMAN, ARIANA

Provider ID: 290495

Board Certified Specialty: Yes
ARIANA N DILLMAN

D3. Directorio de proveedores especialistas

 333 H ST STE 2080
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

Fax: (661) 205-6305

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1497067862

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: BEVERLY
HOSPITAL, TRI CITY MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:30AM-5:30PM
SA 8:00AM-2:30PM

 Website: N/A


EMERGENCY MEDICINE

EINSTEIN, ERIC

Provider ID: 290482

Board Certified Specialty: No
ERIC R EINSTEIN

 333 H ST STE 2080
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

Provider Gender: Male

NPI: 1154683787

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: CORONA
REGIONAL MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:30AM-5:30PM
SA 8:00AM-2:30PM

 Website: N/A


EMERGENCY MEDICINE

FRENCH, TONIANNE


Provider ID: 290538

Board Certified Specialty: No
TONIANNE FRENCH

 333 H ST STE 2080
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1770578411

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MEMORIAL
HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:30AM-5:30PM
SA 8:00AM-2:30PM

 Website: N/A


EMERGENCY MEDICINE

GALASSO, MADISON

Provider ID: 290477

Board Certified Specialty: Yes
MADISON M GALASSO

 333 H ST STE 2080
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1053766766


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:30AM-5:30PM
SA 8:00AM-2:30PM

 Website: N/A


EMERGENCY MEDICINE

GRIESINGER, MICHAEL

Provider ID: 290537

Board Certified Specialty: Yes
MICHAEL G GRIESINGER

 333 H ST STE 2080
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

Provider Gender: Male

NPI: 1336556604

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Adventist
Health Bakersfield, SAN

D3. Directorio de proveedores especialistas

JOAQUIN GENERAL HOSP


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): Provider ID: 290637

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:30AM-5:30PM
SA 8:00AM-2:30PM

 Website: N/A

EMERGENCY MEDICINE


PHAM, LILY

Provider ID: 304935

Board Certified Specialty: No

LILY M PHAM

 386 E H ST STE 202
CHULA VISTA, CA 91910


 Phone: (858) 966-1720

Fax: (858) 966-1725

 After Hours Phone: (858)
966-1720

Provider Gender: Female

NPI: 1811423072

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

 Website: N/A


EMERGENCY MEDICINE

QUENZER, FAITH

Board Certified Specialty: No

FAITH C QUENZER

 333 H ST STE 2080
CHULA VISTA, CA 91910


 Phone: (619) 662-4100

Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1295112670

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:

UNIVERSITY OF CALIFORNIA
IRVINE MED CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:30AM-5:30PM
SA 8:30AM-2:30PM

 Website: N/A

EMERGENCY MEDICINE


REARDON, JACQUELINE

Provider ID: 290673


Board Certified Specialty: No

JACQUELINE R REARDON

 333 H ST STE 2080
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1417928557

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MEMORIAL
HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: SU 10:00AM-4:00PM
M-F 8:30AM-5:30PM
SA 8:00AM-2:30PM

 Website: N/A


EMERGENCY MEDICINE


ROXAS, ROGER

Provider ID: 290600

Board Certified Specialty: No

ROGER R ROXAS

 333 H ST STE 2080
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

Provider Gender: Male

NPI: 1578910840

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

D3. Directorio de proveedores especialistas

8:30AM-5:30PM
SA 8:00AM-2:30PM

 Website: N/A

ENDOCRINOLOGY


METABOLISM DIABETES

CARRILLO, MARITZA

Provider ID: 290970

Board Certified Specialty: No
MARITZA E CARRILLO

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

Fax: (619) 425-1184

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1649628587


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-8:00PM
SA 8:00AM-4:00PM

 Website: N/A


FAMILY PRACTICE

DEIS, CRISTINA

Provider ID: 302757

Board Certified Specialty: No
CRISTINA E DEIS

 1637 THIRD AVE STE H
CHULA VISTA, CA 91911

 Phone: (619) 662-4100

Fax: (619) 662-4196

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1639478811

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


FAMILY PRACTICE

VELASQUEZ, SHARON


Provider ID: 299164

Board Certified Specialty: No
SHARON F VELASQUEZ

 678 3RD AVE
CHULA VISTA, CA 91910



 Phone: (619) 662-4100

Fax: (619) 425-1184

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1972732584

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS


MERCY HOSPITAL CHULA
VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:30AM-5:30PM
SA 8:00AM-2:30PM

 Website: N/A


GASTROENTEROLOGY


SHAFFER, KATHERINE

Provider ID: 305510

Board Certified Specialty: No
KATHERINE M SHAFFER

 296 H ST STE 301
CHULA VISTA, CA 91910

 Phone: (619) 266-3332

 After Hours Phone: (619)
266-3332

Provider Gender: Female

NPI: 1336405695

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

GASTROENTEROLOGY

WIENER, GREGORY

D3. Directorio de proveedores especialistas

Provider ID: 290741

Board Certified Specialty: Yes

GREGORY J WIENER

353 CHURCH AVE STE A
CHULA VISTA, CA 91910

Phone: (619) 585-8883

Fax: (619) 585-0166

After Hours Phone: (619)
585-8883

Provider Gender: Male

NPI: 1811099534

Provider English Spoken: Y

Provider Language(s)
Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL, SCRIPPS MERCY

HOSPITAL, SHARP CHULA

VISTA MED CTR, SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH

8:30AM-4:30PM

F 8:30AM-3:00PM

Website: N/A

GASTROENTEROLOGY

WIENER, GREGORY

Provider ID: 257480

Board Certified Specialty: Yes

GREGORY J WIENER

353 CHURCH AVE STE A
CHULA VISTA, CA 91910

Phone: (619) 585-8883

Fax: (619) 585-0166

After Hours Phone: (619)
585-8883

Provider Gender: Male

NPI: 1811099534

Provider English Spoken: Y

Provider Language(s)
Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL, SCRIPPS MERCY

HOSPITAL, SHARP CHULA

VISTA MED CTR, SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH

8:30AM-4:30PM

F 8:30AM-3:00PM

Website: N/A

GENERAL PRACTICE

SAMI, REMAN

Provider ID: 295214

Board Certified Specialty: No

REMAN A SAMI

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 425-1184

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1295362242

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

HEARING AID DEALER / SUPPLIER

ANDERSON, ELAINE

Provider ID: 268688

Board Certified Specialty: No

ELAINE ANDERSON

310 3RD AVE STE C11
CHULA VISTA, CA 91910

Phone: (619) 426-0841

Fax: (619) 426-9197

After Hours Phone: (619)
426-0841

Provider Gender: Female

NPI: 1063558856

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

HEARING AID DEALER / SUPPLIER

D3. Directorio de proveedores especialistas

DAVIS, KELLE

Provider ID: 268651

Board Certified Specialty: No
KELLE L DAVIS

310 3RD AVE STE C11
CHULA VISTA, CA 91910

Phone: (619) 426-0841

Fax: (619) 426-9197

After Hours Phone: (619)
426-0841

Provider Gender: Female

NPI: 1902853344

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-5:00PM

Website: N/A

HEMATOLOGY / ONCOLOGY

JOHNSON, KENNETH

Provider ID: 262288

Board Certified Specialty: No
KENNETH B JOHNSON

769 MEDICAL CENTER CT
STE 202
CHULA VISTA, CA 91911

Phone: (619) 482-8430

Fax: (619) 482-8005

After Hours Phone: (619)
482-8430

Provider Gender: Male

NPI: 1063527711

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,
SHARP MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

INTERVENTIONAL

CARDIOLOGY

MOHAMEDALI, BURHAN

Provider ID: 245576

Board Certified Specialty: No
BURHAN MOHAMEDALI

765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911

Phone: (619) 616-2100

Fax: (619) 616-2104

After Hours Phone: (619)
616-2100

Provider Gender: Male

NPI: 1831393289

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish, Swahili

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,
Adventist Health and Rideout

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM
Website: N/A

INTERVENTIONAL **CARDIOLOGY**

MOHAMEDALI, BURHAN

Provider ID: 309249

Board Certified Specialty: No
BURHAN MOHAMEDALI

865 3RD AVE STE 133
CHULA VISTA, CA 91911

Phone: (619) 616-2100

Fax: (619) 616-2104

After Hours Phone: (619)
616-2100

Provider Gender: Male

NPI: 1831393289

Provider English Spoken: Y
Provider Language(s)

Spoken: Spanish, Swahili
Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,
Adventist Health and Rideout

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

INTERVENTIONAL **CARDIOLOGY**

NAGHI, JESSE

Provider ID: 247625

Board Certified Specialty: No
JESSE J NAGHI

D3. Directorio de proveedores especialistas








 752 MEDICAL CENTER CT
STE 207
CHULA VISTA, CA 91911
 Phone: (619) 867-0557
Fax: (619) 867-0558
 After Hours Phone: (619)
867-0557
Provider Gender: Male
NPI: 1386896736
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, Bulgarian,
Russian, Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MEMORIAL
HOSPITAL, GROSSMONT
HOSPITAL, SHARP MEMORIAL
HOSPITAL, ALVARADO
HOSPITAL LLC, SHARP CHULA
VISTA MED CTR, SHARP
CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

INTERVENTIONAL CARDIOLOGY

ROUGH, STEVEN

Provider ID: 302985
Board Certified Specialty: No
STEVEN J ROUGH






 754 MEDICAL CENTER CT



STE 101
CHULA VISTA, CA 91911
 Phone: (619) 434-4208
Fax: (619) 434-4315
 After Hours Phone: (619)
434-4208
Provider Gender: Male
NPI: 1386821460
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

INTERVENTIONAL CARDIOLOGY

ROUGH, STEVEN

Provider ID: 298442
Board Certified Specialty: No
STEVEN J ROUGH






 754 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
 Phone: (619) 434-4208
Fax: (619) 434-4315
 After Hours Phone: (619)
434-4208
Provider Gender: Male
NPI: 1386821460
 Provider English Spoken: Y
 Provider Language(s)

Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

INTERVENTIONAL CARDIOLOGY

SHEREV, DIMITRI

Provider ID: 268950
Board Certified Specialty: No
DIMITRI A SHEREV

 752 MEDICAL CENTER CT
STE 207
CHULA VISTA, CA 91911
 Phone: (619) 867-0557
Fax: (619) 867-0558
 After Hours Phone: (619)
867-0557
Provider Gender: Male
NPI: 1154323996
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Bulgarian, Russian,
Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,
GROSSMONT HOSPITAL,
SHARP MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL, ALVARADO


D3. Directorio de proveedores especialistas

HOSPITAL LLC, SHARP CHULA VISTA MED CTR, TRI CITY MEDICAL CTR, TRI CITY MEDICAL CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, Sharp Grossmont

Hospital, SHARP CORONADO HOSP AND HEALTHCARE CTR Medi-Cal Open Panel: Yes Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8:30AM-5:00PM

 Website: N/A


INTERVENTIONAL CARDIOLOGY

SUDHAKAR, DEEPTHI

Provider ID: 295846 Board Certified Specialty: No DEEPTHI SUDHAKAR

 765 MEDICAL CENTER CT STE 211

CHULA VISTA, CA 91911

 Phone: (619) 616-2100

Fax: (619) 616-2104

 After Hours Phone: (619) 616-2100

Provider Gender: Female

NPI: 1811307051

 Provider English Spoken: Y Cultural Competency: N

Hospital Affiliation: Sharp Grossmont Hospital, SHARP

CHULA VISTA MED CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 15\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8:00AM-5:00PM

 Website: N/A

INTERVENTIONAL

CARDIOLOGY


SUDHAKAR, DEEPTHI

Provider ID: 296051

Board Certified Specialty: No DEEPTHI SUDHAKAR

 765 MEDICAL CENTER CT STE 211

CHULA VISTA, CA 91911

 Phone: (619) 616-2100

Fax: (619) 616-2104

 After Hours Phone: (619) 616-2100

Provider Gender: Female

NPI: 1811307051

 Provider English Spoken: Y Cultural Competency: N

Hospital Affiliation: Sharp Grossmont Hospital, SHARP


CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 15\99

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8:00AM-5:00PM

 Website: N/A

INTERVENTIONAL

CARDIOLOGY


SUDHAKAR, DEEPTHI

Provider ID: 309098


Board Certified Specialty: No

DEEPTHI SUDHAKAR

 865 3RD AVE STE 133 CHULA VISTA, CA 91911

 Phone: (760) 294-0480

Fax: (760) 294-0481

 After Hours Phone: (760) 294-0480

Provider Gender: Female

NPI: 1811307051

 Provider English Spoken: Y Cultural Competency: N

Hospital Affiliation: Sharp Grossmont Hospital, SHARP


CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 15\99

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8:00AM-5:00PM

 Website: N/A

MATERNAL AND FETAL


MEDICINE

MCCULLOUGH, DEIRDRE

Provider ID: 277263

Board Certified Specialty: No DEIRDRE M MCCULLOUGH

 386 E H ST STE 202 CHULA VISTA, CA 91910

 Phone: (858) 966-6710

Fax: (858) 966-6711

 After Hours Phone: (858) 966-6710

Provider Gender: Female

NPI: 1639153018

 Provider English Spoken: Y Cultural Competency: N

Hospital Affiliation: SHARP

MARY BIRCH HOSP FOR

D3. Directorio de proveedores especialistas


WOMEN AND NEWBORNS,
Sharp Grossmont Hospital,
SHARP MEMORIAL HOSPITAL,
RADY CHILDRENS HOSPITAL
SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

MATERNAL AND FETAL MEDICINE


MELBER, DORA

Provider ID: 296993

Board Certified Specialty: No

DORA J MELBER

 386 E H ST STE 202
CHULA VISTA, CA 91910


 Phone: (858) 966-6710


Fax: (858) 966-6711

 After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1124413026

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hungarian, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, RADY CHILDRENS

HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

MATERNAL AND FETAL MEDICINE


REIMERS, REBECCA

Provider ID: 294653

Board Certified Specialty: No

REBECCA M REIMERS

 386 E H ST STE 202
CHULA VISTA, CA 91910


 Phone: (858) 966-6710

Fax: (858) 966-6711

 After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1801207634

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

MATERNAL AND FETAL MEDICINE


RICHARDSON, ALVIE

Provider ID: 264687

Board Certified Specialty: No

ALVIE C RICHARDSON

 386 E H ST STE 202
CHULA VISTA, CA 91910

 Phone: (858) 966-6710

Fax: (858) 966-6711

 After Hours Phone: (858)
966-6710

Provider Gender: Male

NPI: 1154305977

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, RADY

CHILDRENS HOSPITAL SAN
DIEGO, Sharp Grossmont

Hospital


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

MATERNAL AND FETAL MEDICINE


WESTERMANN, MELISSA

Provider ID: 242523

Board Certified Specialty: No

MELISSA L WESTERMANN

 386 E H ST STE 202
CHULA VISTA, CA 91910

 Phone: (858) 966-6710

Fax: (858) 966-6711

 After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1760730758




 Provider English Spoken: Y

Cultural Competency: N

D3. Directorio de proveedores especialistas

Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, EARL AND LORRAINE MILLER CHILDRENS HSP, LONG BEACH MEMORIAL MED CTR, UNIVERSITY OF CALIFORNIA IRVINE MED CTR, SHARP MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, Sharp Grossmont Hospital, Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*


NEONATAL / PERINATAL MEDICINE

FLEMING, SARAH

Provider ID: 205646
Board Certified Specialty: No
SARAH E FLEMING




 435 H ST
CHULA VISTA, CA 91910
 *Phone: (619) 691-7000*
 *After Hours Phone: (619) 691-7000*

Provider Gender: Female
NPI: 1679809826

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*



NEONATAL / PERINATAL MEDICINE

MATOKA, NANA

Provider ID: 297976
Board Certified Specialty: No
NANA MATOKA

 435 H ST
CHULA VISTA, CA 91910
 *Phone: (619) 691-7000*
Fax: (619) 260-7055
 *After Hours Phone: (619) 691-7000*




Provider Gender: Female
NPI: 1801952197

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Japanese*

Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

NEONATAL / PERINATAL

MEDICINE



NIEMI, ANNA-KAISA

Provider ID: 262159
Board Certified Specialty: No
ANNA-KAISA NIEMI

 435 H ST
CHULA VISTA, CA 91910
 *Phone: (858) 966-5818*
Fax: (858) 966-7483

 *After Hours Phone: (858) 966-5818*

Provider Gender: Female
NPI: 1497941397


 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Finnish, French, German, Spanish, Swedish*

Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8:00AM-5:00PM*









 *Website: N/A*

NEONATAL / PERINATAL MEDICINE

NYMAN, KATHERINE

Provider ID: 301823
Board Certified Specialty: No
KATHERINE N NYMAN





D3. Directorio de proveedores especialistas

 435 H ST
CHULA VISTA, CA 91910
 Phone: (619) 691-7000
Fax: (619) 260-7055
 After Hours Phone: (619)
691-7000
Provider Gender: Female
NPI: 1003260951
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A




NEONATAL / PERINATAL MEDICINE

SPEZIALE, MARK

Provider ID: 304829
Board Certified Specialty: No
MARK V SPEZIALE

 435 H ST
CHULA VISTA, CA 91910
 Phone: (619) 691-7000
Fax: (619) 260-7055
 After Hours Phone: (619)
691-7000
Provider Gender: Male
NPI: 1801978143
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, RADY
CHILDRENS HOSPITAL SAN
DIEGO, SOUTHWEST
HEALTHCARE INLAND VALLEY
HOSPITAL, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL, SCRIPPS
MERCY HOSPITAL, UCSD
MEDICAL CTR, UCSD MEDICAL
CTR, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

NEPHROLOGY

HOREISH, ADAM

Provider ID: 99947
Board Certified Specialty: No
ADAM K HOREISH MD




 340 4TH AVE STE 4
CHULA VISTA, CA 91910
 Phone: (619) 427-1144
Fax: (619) 427-1185
 After Hours Phone: (619)
427-1144
Provider Gender: Male
NPI: 1760461206
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, Spanish
Cultural Competency: N
Hospital Affiliation: SHARP

CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL,
PARADISE VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
9:00AM-5:00PM
 Website: N/A

NEPHROLOGY

HOREISH, ADAM

Provider ID: 99947
Board Certified Specialty: No
ADAM K HOREISH MD

 340 4TH AVE STE 4
CHULA VISTA, CA 91910
 Phone: (619) 427-1144
Fax: (619) 427-1185
 After Hours Phone: (619)
427-1144

Provider Gender: Male
NPI: 1760461206

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL,
PARADISE VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F

D3. Directorio de proveedores especialistas

9:00AM-5:00PM
Website: N/A

NEPHROLOGY

HOREISH, ADAM

Provider ID: 290100
Board Certified Specialty: No
ADAM K HOREISH MD

340 4TH AVE STE 4
CHULA VISTA, CA 91910

Phone: (619) 427-1144

Fax: (619) 427-1185

After Hours Phone: (619)
427-1144

Provider Gender: Male

NPI: 1760461206

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL,
PARADISE VALLEY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

NEPHROLOGY

PATEL, AMAR

Provider ID: 245639
Board Certified Specialty: No
AMAR V PATEL

340 4TH AVE STE 4
CHULA VISTA, CA 91910

Phone: (619) 427-1144

Fax: (619) 427-1185

After Hours Phone: (619)
427-1144

Provider Gender: Male

NPI: 1821359605

Provider English Spoken: Y

Provider Language(s)
Spoken: Gujarati, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

NEPHROLOGY

PHAM, JENNIFER

Provider ID: 302863
Board Certified Specialty: No

JENNIFER A PHAM

340 FOURTH AVE STE 4
CHULA VISTA, CA 91910

Phone: (619) 427-1144

Fax: (619) 427-1185

After Hours Phone: (619)
427-1144

Provider Gender: Female

NPI: 1235629932

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP

CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

NEPHROLOGY

VIDEEN, JOHN

Provider ID: 65646
Board Certified Specialty: No
JOHN S VIDEEN

752 MEDICAL CENTER CT
STE 302

CHULA VISTA, CA 91911

Phone: (619) 421-3361

Fax: (619) 869-4378

After Hours Phone: (619)
421-3361

Provider Gender: Male

NPI: 1043318199

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
PARADISE VALLEY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\150

American Sign Language (ASL):
N

Accessibility: CONTACT

D3. Directorio de proveedores especialistas

PROVIDER
Hours: M-F
9:00AM-5:00PM
Website: N/A

NEPHROLOGY

VIDEEN, JOHN

Provider ID: 290110
Board Certified Specialty: No
JOHN S VIDEEN

752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Phone: (619) 421-3361
Fax: (619) 869-4378
After Hours Phone: (619)
421-3361

Provider Gender: Male
NPI: 1043318199

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
PARADISE VALLEY HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F
9:00AM-5:00PM
Website: N/A

NEPHROLOGY

VIDEEN, JOHN

Provider ID: 262286
Board Certified Specialty: No

JOHN S VIDEEN
752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Phone: (619) 421-3361
Fax: (619) 869-4378
After Hours Phone: (619)
421-3361

Provider Gender: Male
NPI: 1043318199

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
PARADISE VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
9:00AM-5:00PM
Website: N/A

NEPHROLOGY

YUAN, HENRY

Provider ID: 268551
Board Certified Specialty: No
HENRY YUAN

340 4TH AVE STE 4
CHULA VISTA, CA 91910
Phone: (619) 427-1144
Fax: (619) 427-1185

After Hours Phone: (619)
427-1144

Provider Gender: Male
NPI: 1043442379

Provider English Spoken: Y
Provider Language(s)
Spoken: Chinese, Mandarin
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, PARADISE
VALLEY HOSPITAL, Providence
St Joseph Hospital, Providence
St Jude Medical Center, SOUTH
COAST GLOBAL MEDICAL
CENTER INC, ENCOMPASS
HEALTH REHABILITATION
HOSPITAL OF TUSTIN, Foothill
Regional Medical Center,
Foothill Regional Medical
Center, KINDRED HOSPITAL
BREA, KINDRED HOSPITAL LA
MIRADA, KINDRED HOSPITAL
SANTA ANA

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM
Website: N/A

NEUROLOGY

GUPTA, MONIKA

Provider ID: 307937
Board Certified Specialty: No
MONIKA A GUPTA

450 4TH AVE STE 215
CHULA VISTA, CA 91910
Phone: (619) 425-3840
Fax: (619) 425-3842

After Hours Phone: (619)
425-3840

Provider Gender: Female

D3. Directorio de proveedores especialistas

NPI: 1922243401

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Hindi, Spanish

Cultural Competency: N

Hospital Affiliation: TEMECULA
VALLEY HOSPITAL INC, UCSD

LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

NEUROLOGY

HOSSEINZADEHMALEKI, ANA

Provider ID: 304999

Board Certified Specialty: No
ANA HOSSEINZADEHMALEKI

📍 450 FOURTH AVESTE 215
CHULA VISTA, CA 91910

☎ Phone: (619) 425-3840

Fax: (619) 485-5440

🕒 After Hours Phone: (619)
425-3840

Provider Gender: Female

NPI: 1316471485

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Arabic, Persian

Cultural Competency: N

Hospital Affiliation: TEMECULA
VALLEY HOSPITAL INC

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): MAKSYM S MAREK

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

NEUROLOGY

MANDEVILLE, ROSS

Provider ID: 309932

Board Certified Specialty: No

ROSS M MANDEVILLE

📍 450 4TH AVE STE 215
CHULA VISTA, CA 91910

☎ Phone: (619) 425-3840

Fax: (619) 425-3842

🕒 After Hours Phone: (619)
425-3840

Provider Gender: Male

NPI: 1205084183

☐ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,
MAYERS MEMORIAL HOSP

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

NEUROLOGY

MAREK, MAKSYM

Provider ID: 306707

Board Certified Specialty: No

📍 450 FOURTH AVESTE 215
CHULA VISTA, CA 91910

☎ Phone: (619) 425-3840

Fax: (619) 425-3842

🕒 After Hours Phone: (619)
425-3840

Provider Gender: Male

NPI: 1881182079

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Hindi, Spanish,
Tagalog

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

NEUROLOGY

MOHAMMAD, AHMADSHAH

Provider ID: 127244

Board Certified Specialty: No
AHMADSHAH S MOHAMMAD

📍 750 MEDICAL CENTER CT
STE 6

CHULA VISTA, CA 91911

☎ Phone: (619) 337-7900

Fax: (619) 337-7902

🕒 After Hours Phone: (619)
337-7900

Provider Gender: Male

NPI: 1902973472

D3. Directorio de proveedores especialistas

Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, Farsi,
French, German, Pashto,
Persian, Spanish
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS MERCY
HOSPITAL, SHARP CHULA
VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

NEUROLOGY

SORIALOPEZ, JOSE

Provider ID: 295744
Board Certified Specialty: No
JOSE A SORIALOPEZ
 450 4TH AVE STE 215
CHULA VISTA, CA 91910
 Phone: (619) 425-3840
Fax: (619) 485-5440
 After Hours Phone: (619)
425-3840
Provider Gender: Male
NPI: 1225474034
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON,

SCRIPPS MERCY HOSPITAL
CHULA VISTA, TEMECULA
VALLEY HOSPITAL INC
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-6:00PM
 Website: N/A

OBSTETRICS / GYNECOLOGY

ATIGA, SCHUBERT

Provider ID: 268953
Board Certified Specialty: Yes
SCHUBERT J ATIGA
 752 MEDICAL CENTER CT
STE 106
CHULA VISTA, CA 91911
 Phone: (619) 482-8406
Fax: (619) 482-6656
 After Hours Phone: (619)
482-8406
Provider Gender: Male
NPI: 1033138714

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
PARADISE VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-TH
8:00AM-5:00PM

F 8:00AM-0:00PM
 Website: N/A

OBSTETRICS / GYNECOLOGY

ATIGA, SCHUBERT

Provider ID: 290331
Board Certified Specialty: Yes
SCHUBERT J ATIGA
 752 MEDICAL CENTER CT
STE 106
CHULA VISTA, CA 91911
 Phone: (619) 482-8406
Fax: (619) 482-6656
 After Hours Phone: (619)
482-8406
Provider Gender: Male
NPI: 1033138714
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
PARADISE VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 13\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-TH
8:00AM-5:00PM
F 8:00AM-0:00PM
 Website: N/A

OCCUPATIONAL THERAPIST

MORRIS, SHEILA

Provider ID: 268926
Board Certified Specialty: No
SHEILA M MORRIS
 1020 TIERRA DEL REY STE
A-1

D3. Directorio de proveedores especialistas

CHULA VISTA, CA 91910

Phone: (619) 585-7104

Fax: (619) 585-7106

After Hours Phone: (619) 585-7104

Provider Gender: Female

NPI: 1689039877

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F

7:00AM-6:00PM

SA 7:00AM-2:00PM

Website: N/A

OPHTHALMOLOGY

GOLDMAN, DAVID

Provider ID: 308604

Board Certified Specialty: No

DAVID J GOLDMAN

311 DEL MAR AVE

CHULA VISTA, CA 91910

Phone: (619) 427-3355

Fax: (619) 427-0955

After Hours Phone: (619) 427-3355

Provider Gender: Male

NPI: 1629185467

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

OPHTHALMOLOGY

GOLDMAN, DAVID

Provider ID: 308450

Board Certified Specialty: No

DAVID J GOLDMAN

311 DEL MAR AVE

CHULA VISTA, CA 91910

Phone: (619) 427-3355

Fax: (619) 427-0955

After Hours Phone: (619) 427-3355

Provider Gender: Male

NPI: 1629185467

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

OPHTHALMOLOGY

HO, AMIEE

Provider ID: 297633

Board Certified Specialty: No

AMIEE HO

342 F ST

CHULA VISTA, CA 91910

Phone: (619) 422-1471

Fax: (619) 422-0450

After Hours Phone: (619) 422-1471

Provider Gender: Female

NPI: 1396009478

Provider English Spoken: Y

Provider Language(s)

Spoken: Chinese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

OPTOMETRIST

CHAIN, PEI CHI

Provider ID: 297621

Board Certified Specialty: No

PEI C CHAIN

342 F ST

CHULA VISTA, CA 91910

Phone: (619) 422-1471

Fax: (619) 422-2025

After Hours Phone: (619) 422-1471

Provider Gender: Female

NPI: 1730676727

Provider English Spoken: Y

Provider Language(s)

Spoken: Mandarin

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F

9:00AM-5:00PM

Website: N/A

OPTOMETRIST

KOO, ANITA

D3. Directorio de proveedores especialistas

Provider ID: 306902

Board Certified Specialty: No

ANITA K KOO

835 THIRD AVESTE A
CHULA VISTA, CA 91911

Phone: (619) 425-7755

Fax: (619) 425-2138

After Hours Phone: (619)
425-7755

Provider Gender: Female

NPI: 1669825667

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPTOMETRIST

KOO, ANITA

Provider ID: 304830

Board Certified Specialty: No

ANITA K KOO

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1669825667

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Website: N/A

OPTOMETRIST

KOO, ANITA

Provider ID: 304537

Board Certified Specialty: No

ANITA K KOO

835 THIRD AVESTE A
CHULA VISTA, CA 91911

Phone: (619) 425-7755

Fax: (619) 425-2138

After Hours Phone: (619)
425-7755

Provider Gender: Female

NPI: 1669825667

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPTOMETRIST

MASCARENO, EFRAIN

Provider ID: 262228

Board Certified Specialty: No

EFRAIN MASCARENO

2260 OTAY LAKES RD STE
111
CHULA VISTA, CA 91915

Phone: (619) 421-5550

Fax: (866) 254-5707

After Hours Phone: (619)
421-5550

Provider Gender: Male

NPI: 1457507279

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-6:00PM

Website: N/A

OPTOMETRIST

MASCARENO, EFRAIN

Provider ID: 268679

Board Certified Specialty: No

EFRAIN MASCARENO

2260 OTAY LAKES RD STE
111
CHULA VISTA, CA 91915

Phone: (619) 421-5550

Fax: (866) 254-5707

After Hours Phone: (619)
421-5550

Provider Gender: Male

NPI: 1457507279

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: No

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-6:00PM

Website: N/A

D3. Directorio de proveedores especialistas

OPTOMETRIST

MASCARENO, EFRAIN


Provider ID: 262229

Board Certified Specialty: No


EFRAIN MASCARENO

 440 4TH AVE STE 9

CHULA VISTA, CA 91910


 Phone: (619) 427-2020

Fax: (866) 254-5707

 After Hours Phone: (619) 427-2020

Provider Gender: Male

NPI: 1457507279

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-6:00PM

 Website: N/A

OPTOMETRIST

MASCARENO, EFRAIN


Provider ID: 268680

Board Certified Specialty: No

EFRAIN MASCARENO

 440 4TH AVE STE 9

CHULA VISTA, CA 91910


 Phone: (619) 427-2020

Fax: (866) 254-5707

 After Hours Phone: (619) 427-2020

Provider Gender: Male

NPI: 1457507279

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: No

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-6:00PM

 Website: N/A


OPTOMETRIST

NGUYEN, THU


Provider ID: 265518

Board Certified Specialty: No

THU T NGUYEN

 342 F ST

CHULA VISTA, CA 91910

 Phone: (619) 422-1471


Fax: (619) 422-0450

 After Hours Phone: (619) 422-1471

Provider Gender: Female

NPI: 1326323627

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Tagalog,
Vietnamese


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OPTOMETRIST

NGUYEN, THU


Provider ID: 298022

Board Certified Specialty: No

THU T NGUYEN

 342 F ST

CHULA VISTA, CA 91910

 Phone: (619) 422-1471


Fax: (619) 422-0450

 After Hours Phone: (619) 422-1471

Provider Gender: Female

NPI: 1326323627

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Tagalog,
Vietnamese


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OPTOMETRIST

NGUYEN, THU


Provider ID: 125032

Board Certified Specialty: No

THU T NGUYEN

 342 F ST

CHULA VISTA, CA 91910

 Phone: (619) 422-1471


Fax: (619) 422-0450

 After Hours Phone: (619) 422-1471

Provider Gender: Female

NPI: 1326323627

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Tagalog,








D3. Directorio de proveedores especialistas

Vietnamese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 13\150
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

OPTOMETRIST

RICHARDSON, JULIA

Provider ID: 297645
Board Certified Specialty: No
JULIA RICHARDSON




 342 F ST
CHULA VISTA, CA 91910
 Phone: (619) 422-1471
Fax: (619) 422-2025
 After Hours Phone: (619)
422-1471
Provider Gender: Female
NPI: 1770154528
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

OPTOMETRIST

SCOVILL, ALEXANDRA

Provider ID: 297625
Board Certified Specialty: No
ALEXANDRA L SCOVILL

 342 F ST
CHULA VISTA, CA 91910
 Phone: (619) 422-1471
Fax: (619) 422-0114
 After Hours Phone: (619)
422-1471
Provider Gender: Female
NPI: 1184146094
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N



 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

OPTOMETRIST

TRAN, JESSICA

Provider ID: 304888
Board Certified Specialty: No
JESSICA A TRAN

 340 FOURTH AVE STE 19
CHULA VISTA, CA 91910
 Phone: (619) 761-5308
Fax: (619) 591-1910
 After Hours Phone: (619)
761-5308
Provider Gender: Female
NPI: 1457922957
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N




 Accessibility: CONTACT PROVIDER
 Website: N/A

OTOLARYNGOLOGY

CHANG, EDWARD

Provider ID: 309536
Board Certified Specialty: No
EDWARD W CHANG






 577 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 426-5181
Fax: (619) 426-0714
 After Hours Phone: (619)
426-5181
Provider Gender: Male
NPI: 1528146008
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

OTOLARYNGOLOGY

MCCALLION, PATRICK

Provider ID: 290541
Board Certified Specialty: No
PATRICK G MCCALLION

 765 MEDICAL CENTER CT
STE 210
CHULA VISTA, CA 91911
 Phone: (619) 482-0565
Fax: (619) 482-2775
 After Hours Phone: (619)
482-0565
Provider Gender: Male
NPI: 1134144454
 Provider English Spoken: Y
 Provider Language(s)

D3. Directorio de proveedores especialistas

Spoken: Arabic, Spanish

Cultural Competency: N

Hospital Affiliation:


GROSSMONT HOSPITAL,
ALVARADO HOSPITAL LLC


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


OTOLARYNGOLOGY

SAEZ, NEIL

Provider ID: 302432

Board Certified Specialty: No
NEIL A SAEZ

 765 MEDICAL CENTER CT
STE 210
CHULA VISTA, CA 91911



 Phone: (619) 482-0565

Fax: (619) 482-2775

 After Hours Phone: (619)
482-0565

Provider Gender: Male

NPI: 1518456508

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SHARP MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE

AGHILI, ROXANA

Provider ID: 303782

Board Certified Specialty: No
ROXANA AGHILI

 386 E H ST STE 202
CHULA VISTA, CA 91910



 Phone: (858) 966-1720

Fax: (858) 966-1725

 After Hours Phone: (858)
966-1720

Provider Gender: Female

NPI: 1851927883

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Farsi

Cultural Competency: N

Hospital Affiliation: KAISER
FOUNDATION HOSPITAL SAN
DIEGO, RADY CHILDRENS
HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE


DEVERA, GEMMIE

Provider ID: N/A

Board Certified Specialty: No
GEMMIE S DEVERA

 386 E H ST STE 202
CHULA VISTA, CA 91910

 Phone: (858) 966-1720

 After Hours Phone: (858)
966-1720

Provider Gender: Female

NPI: 1366622078

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE

GORHAM, LAURA


Provider ID: 275787

Board Certified Specialty: No
LAURA M GORHAM

 386 E H ST STE 202
CHULA VISTA, CA 91910

 Phone: (858) 966-1720

Fax: (858) 966-1725

 After Hours Phone: (858)
966-1720

Provider Gender: Female

NPI: 1316162324

 Provider English Spoken: Y
Cultural Competency: N


D3. Directorio de proveedores especialistas

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

 Website: N/A


PEDIATRIC EMERGENCY **MEDICINE**


GROSS, MATTHEW

Provider ID: 297176

Board Certified Specialty: No
MATTHEW F GROSS

 386 E H ST STE 202
CHULA VISTA, CA 91910

 Phone: (858) 966-1720
Fax: (858) 966-1725

 After Hours Phone: (858)
966-1720

Provider Gender: Male

NPI: 1942223664


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM

SA 1:00PM-10:00PM
 Website: N/A


PEDIATRIC EMERGENCY **MEDICINE**

MENDES, CHANTAL

Provider ID: 295669

Board Certified Specialty: No
CHANTAL M MENDES

 386 E H ST STE 202
CHULA VISTA, CA 91910

 Phone: (858) 966-1720
Fax: (858) 966-1725

 After Hours Phone: (858)
966-1720

Provider Gender: Female

NPI: 1134681265

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

 Website: N/A


PEDIATRIC EMERGENCY **MEDICINE**

VAIDYA, KAMALA

Provider ID: 289411

Board Certified Specialty: No
KAMALA VAIDYA

 386 E H ST STE 202
CHULA VISTA, CA 91910

 Phone: (858) 966-1720
Fax: (858) 966-1725

 After Hours Phone: (858)
966-1720

Provider Gender: Female

NPI: 1083840920

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

 Website: N/A


PEDIATRICS

ROWHANI, NAGHMEH

Provider ID: 306065

Board Certified Specialty: No
NAGHMEH ROWHANI

 280 E ST
CHULA VISTA, CA 91910

 Phone: (619) 662-4100
Fax: (619) 426-2170

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1992876759

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Persian

Cultural Competency: N

Medi-Cal Open Panel: Yes


Min/Max Age: 0\17

American Sign Language (ASL):

D3. Directorio de proveedores especialistas

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICAL MEDICINE /

REHABILITATION


RICHARDSON, HENRY

Provider ID: 295275

Board Certified Specialty: No

HENRY A RICHARDSON

 340 4TH AVE STE 19
CHULA VISTA, CA 91910

 Phone: (760) 607-5350

Fax: (760) 607-5365

 After Hours Phone: (760)
607-5350

Provider Gender: Male

NPI: 1407052459

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, PALOMAR MEDICAL


CENTER


Medi-Cal Open Panel: Yes


Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT


GI, HUNG

Provider ID: 302126

Board Certified Specialty: No

HUNG GI

 280 E ST
CHULA VISTA, CA 91910


 Phone: (619) 662-4100


Fax: (619) 662-4196

 After Hours Phone: (619)
662-4100

Provider Gender: Male

NPI: 1023207404

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese, French,
Spanish

Cultural Competency: N


Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT


GUTH, CARA

Provider ID: 299110


Board Certified Specialty: No

CARA A GUTH

 480 4TH AVE STE 501
CHULA VISTA, CA 91910

 Phone: (619) 425-9510

Fax: (858) 455-7197

 After Hours Phone: (619)
425-9510

Provider Gender: Female

NPI: 1992177182

 Provider English Spoken: Y


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 21\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT


INDA, PRISCILLA

Provider ID: 309072

Board Certified Specialty: No

PRISCILLA S INDA

 429 BROADWAY
CHULA VISTA, CA 91910

 Phone: (619) 434-0204


Fax: (619) 337-0191

 After Hours Phone: (619)
434-0204

Provider Gender: Female

NPI: 1679008379

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, Russian,
Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA


VISTA


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:30AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT

INDA, PRISCILLA

Provider ID: 265072

D3. Directorio de proveedores especialistas

Board Certified Specialty: No
PRISCILLA S INDA

450 4TH AVE STE 215
CHULA VISTA, CA 91910

Phone: (619) 434-0204

Fax: (619) 337-0191

After Hours Phone: (619)
434-0204

Provider Gender: Female

NPI: 1679008379

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic, Russian,
Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA
VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 18\110

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

MARISCAL, MIGUEL

Provider ID: 308408

Board Certified Specialty: No
MIGUEL A MARISCAL

855 THIRD AVE STE 2200
CHULA VISTA, CA 91911

Phone: (619) 662-4100

Fax: (619) 662-4196

After Hours Phone: (619)
662-4100

Provider Gender: Male

NPI: 1760508923

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

VARGAS, CHRISTOPHER

Provider ID: 295945

Board Certified Specialty: No
CHRISTOPHER B VARGAS

2452 FENTON ST STE C101
CHULA VISTA, CA 91914

Phone: (619) 600-5309

Fax: (619) 655-4700

After Hours Phone: (619)
600-5309

Provider Gender: Male

NPI: 1922505775

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA
VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

VARGAS, CHRISTOPHER

Provider ID: 295828

Board Certified Specialty: No
CHRISTOPHER B VARGAS

2452 FENTON ST STE C203
CHULA VISTA, CA 91914

Phone: (619) 600-5309

Fax: (619) 655-4700

After Hours Phone: (619)
600-5309

Provider Gender: Male

NPI: 1922505775

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA

VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

VARGAS, CHRISTOPHER

Provider ID: 268744

Board Certified Specialty: No
CHRISTOPHER B VARGAS

2452 FENTON ST STE C203
CHULA VISTA, CA 91914

Phone: (619) 600-5309

Fax: (619) 655-4700

After Hours Phone: (619)
600-5309

D3. Directorio de proveedores especialistas

Provider Gender: Male

NPI: 1922505775

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA
VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

WRIGHT, DEREK

Provider ID: 302389

Board Certified Specialty: No
DEREK J WRIGHT

340 FOURTH AVESTE 19
CHULA VISTA, CA 91910

Phone: (619) 761-5308

Fax: (619) 591-1910

After Hours Phone: (619)
761-5308

Provider Gender: Male

NPI: 1629674858

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PODIATRIST

BRAZIER, SETH

Provider ID: 306399

Board Certified Specialty: No
SETH J BRAZIER

855 THIRD AVESTE 1100
CHULA VISTA, CA 91911

Phone: (619) 880-5057

Fax: (858) 485-1515

After Hours Phone: (619)
880-5057

Provider Gender: Male

NPI: 1033554324

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: KAWEAH
DELTA DISTRICT HOSP, SELMA

COMMUNITY HOSPITAL,
ADVENTIST MEDICAL CENTER,

ADVENTIST MED CTR

REEDLEY

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

PODIATRIST

CAINE, SAMUEL

Provider ID: 308211

Board Certified Specialty: No
SAMUEL CAINE

345 F ST STE 100

CHULA VISTA, CA 91910

Phone: (619) 727-3481

Fax: (619) 420-7087

After Hours Phone: (619)
727-3481

Provider Gender: Male

NPI: 1396230298

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Sharp
Grossmont Hospital, SCRIPPS

MERCY HOSPITAL CHULA
VISTA, SCRIPPS MERCY

HOSPITAL, SHARP MEMORIAL
HOSPITAL, SHARP CHULA

VISTA MED CTR, SHARP

CORONADO HOSP AND
HEALTHCARE CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PODIATRIST

CAINE, SAMUEL

Provider ID: 308636

Board Certified Specialty: No
SAMUEL CAINE

345 F ST STE 100

CHULA VISTA, CA 91910

Phone: (619) 727-3481


Fax: (619) 420-7087

After Hours Phone: (619)
727-3481

Provider Gender: Male


NPI: 1396230298

D3. Directorio de proveedores especialistas

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: Sharp
Grossmont Hospital, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MERCY
HOSPITAL, SHARP MEMORIAL
HOSPITAL, SHARP CHULA
VISTA MED CTR, SHARP
CORONADO HOSP AND
HEALTHCARE CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

 *Hours: M-F*
8:00AM-5:00PM

 *Website: N/A*


PODIATRIST

DAVIDSONIII, JOHN


Provider ID: 129545

Board Certified Specialty: No
JOHN A DAVIDSONIII III

 *345 F ST STE 100*
CHULA VISTA, CA 91910

 *Phone: (619) 427-3481*


Fax: (619) 420-7807

 *After Hours Phone: (619)*
427-3481

Provider Gender: Male

NPI: 1689069874

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA


VISTA, SHARP CHULA VISTA
MED CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

 *Hours: M-F*
9:00AM-4:30PM

 *Website: N/A*


PODIATRIST

READ, TRENTON

Provider ID: 296655

Board Certified Specialty: No
TRENTON READ

 *855 3RD AVE STE 1100*
CHULA VISTA, CA 91911

 *Phone: (619) 631-4033*


Fax: (619) 880-5057

 *After Hours Phone: (619)*
631-4033

Provider Gender: Male

NPI: 1952963431

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Spanish


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

 *Hours: M-F*
9:00AM-5:00PM

 *Website: N/A*


PSYCHOLOGIST

BAYLON, ALDO

Provider ID: 290243

Board Certified Specialty: No
ALDO BAYLON

 *678 3RD AVE*
CHULA VISTA, CA 91910

 *Phone: (619) 662-4100*


Fax: (619) 425-1184

 *After Hours Phone: (619)*
662-4100

Provider Gender: Male

NPI: 1649429150

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 14\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

 *Hours: M-F*
8:00AM-8:00PM

SA 8:00AM-4:00PM

 *Website: N/A*


PSYCHOLOGIST

CELAYA, PATRICIA

Provider ID: 294875

Board Certified Specialty: No
PATRICIA E CELAYA

 *678 3RD AVE*
CHULA VISTA, CA 91910

 *Phone: (619) 662-4100*


Fax: (619) 425-1184

 *After Hours Phone: (619)*
662-4100

Provider Gender: Female

NPI: 1952656902

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Spanish

Cultural Competency: N

D3. Directorio de proveedores especialistas

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-8:00PM

SA 8:00AM-4:00PM

 Website: N/A

PSYCHOLOGIST


GALLO, LINDA

Provider ID: 296782

Board Certified Specialty: No

LINDA C GALLO

 780 BAY BLVD STE 200
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

Fax: (619) 240-7852

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1427773621


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A


PSYCHOLOGIST

GOULD, HILARY


Provider ID: 290467

Board Certified Specialty: No


HILARY GOULD

 678 3RD AVE

CHULA VISTA, CA 91910


 Phone: (619) 662-4100

Fax: (619) 271-0260

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1104297696

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: SU 10:00AM-4:00PM

M-F 8:30AM-5:30PM

SA 8:00AM-2:30PM

 Website: N/A

PSYCHOLOGIST


WIJAYARATNE, IMANIE

Provider ID: 290092

Board Certified Specialty: No

IMANIE S WIJAYARATNE

 678 3RD AVE
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

Fax: (619) 245-1184

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1932358355

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 5\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

RADIATION ONCOLOGY


CARMONA, RUBEN

Provider ID: 303101

Board Certified Specialty: No

RUBEN CARMONA

 769 MEDICAL CENTER CT
CHULA VISTA, CA 91911

 Phone: (858) 939-5010

Fax: (619) 740-8499

 After Hours Phone: (858)
939-5010

Provider Gender: Male

NPI: 1275929242

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR, Sharp

Grossmont Hospital, SHARP

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

RADIATION ONCOLOGY


COLEMAN, LORI

Provider ID: 206393

Board Certified Specialty: No

LORI A COLEMAN

 769 MEDICAL CENTER CT
CHULA VISTA, CA 91911

 Phone: (619) 502-5851

D3. Directorio de proveedores especialistas

Fax: (619) 502-5865

☎ After Hours Phone: (619) 502-5851

Provider Gender: Female

NPI: 1053348920

☑ Provider English Spoken: Y

☑ Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,
SHARP MEMORIAL HOSPITAL,
GROSSMONT HOSPITAL,
PALOMAR MEDICAL CENTER,

Sharp Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 19\100

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

RADIATION ONCOLOGY

VOLPP, PAUL

Provider ID: 221102

Board Certified Specialty: No

PAUL B VOLPP

📍 769 MEDICAL CENTER CT
CHULA VISTA, CA 91911

☎ Phone: (619) 502-5851

Fax: (619) 502-5865

☎ After Hours Phone: (619) 502-5851

Provider Gender: Male

NPI: 1225186232

☑ Provider English Spoken: Y

☑ Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, SHARP
CHULA VISTA MED CTR,
GROSSMONT HOSPITAL,
PALOMAR MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 19\100

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

REGISTERED PHYSICAL

THERAPIST

CHENG, BRANDON

Provider ID: 304529

Board Certified Specialty: No

BRANDON G CHENG

📍 1392 E PALOMAR ST STE
503

CHULA VISTA, CA 91913

☎ Phone: (619) 482-3000

Fax: (619) 482-3001

☎ After Hours Phone: (619) 482-3000

Provider Gender: Male

NPI: 1336894724

☑ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-TH
7:00AM-7:00PM
F 7:00AM-5:00PM

SA 8:00AM-1:00PM

🌐 Website: N/A

REGISTERED PHYSICAL THERAPIST

CHENG, BRANDON

Provider ID: 307786

Board Certified Specialty: No

BRANDON G CHENG

📍 1392 E PALOMAR ST STE
503

CHULA VISTA, CA 91913

☎ Phone: (619) 482-3000

Fax: (619) 482-3001

☎ After Hours Phone: (619) 482-3000

Provider Gender: Male

NPI: 1336894724

☑ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-TH
7:00AM-7:00PM

F 7:00AM-5:00PM

SA 8:00AM-1:00PM

🌐 Website: N/A

REGISTERED PHYSICAL THERAPIST

JAIN, ALEXANDRA

Provider ID: 305150

Board Certified Specialty: No

ALEXANDRA F JAIN

📍 880 THIRD AVESTE A
CHULA VISTA, CA 91911

☎ Phone: (619) 205-4585

Fax: (619) 271-3183

☎ After Hours Phone: (619)

D3. Directorio de proveedores especialistas

205-4585
Provider Gender: Female
NPI: 1063170603

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 55\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

REGISTERED PHYSICAL THERAPIST

JIMENEZ, ANDREA
Provider ID: 299889
Board Certified Specialty: No
ANDREA L JIMENEZ

1392 E PALOMAR ST STE
503
CHULA VISTA, CA 91913
 Phone: (619) 482-3000
Fax: (619) 482-3001
 After Hours Phone: (619)
482-3000

Provider Gender: Female
NPI: 1407440670

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

Hours: M-F 7:00AM-7:00PM
 Website: N/A

REGISTERED PHYSICAL THERAPIST

KARANDE, PRACHI
Provider ID: 301380
Board Certified Specialty: No
PRACHI KARANDE

1392 E PALOMAR ST STE
503
CHULA VISTA, CA 91913
 Phone: (619) 482-3000
Fax: (619) 482-3001
 After Hours Phone: (619)
482-3000

Provider Gender: Female
NPI: 1699357525

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

REGISTERED PHYSICAL THERAPIST

KARANDE, PRACHI
Provider ID: 287100
Board Certified Specialty: No
PRACHI KARANDE

1392 E PALOMAR ST STE
503
CHULA VISTA, CA 91913
 Phone: (619) 482-3000
Fax: (619) 482-3001
 After Hours Phone: (619)

482-3000
Provider Gender: Female
NPI: 1699357525

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

REGISTERED PHYSICAL THERAPIST

NGUYEN, TIA
Provider ID: 305014
Board Certified Specialty: No
TIA NGUYEN

1392 E PALOMAR ST STE
503
CHULA VISTA, CA 91913
 Phone: (619) 482-3000
Fax: (619) 482-3001
 After Hours Phone: (619)
482-3000

Provider Gender: Female
NPI: 1457136269

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
 Hours: M-TH
7:00AM-7:00PM
F 7:00AM-4:00PM
 Website: N/A

D3. Directorio de proveedores especialistas

REGISTERED PHYSICAL THERAPIST

NGUYEN, TIA

Provider ID: 305013

Board Certified Specialty: No
TIA NGUYEN

1392 E PALOMAR ST STE 503
CHULA VISTA, CA 91913
Phone: (619) 482-3000
Fax: (619) 482-3001
After Hours Phone: (619) 482-3000

Provider Gender: Female
NPI: 1457136269

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-TH
7:00AM-7:00PM
F 7:00AM-4:00PM
Website: N/A

REGISTERED PHYSICAL THERAPIST

NOVENCIDO, ANDREW

Provider ID: 301994

Board Certified Specialty: No
ANDREW NOVENCIDO

1392 E PALOMAR ST STE 503
CHULA VISTA, CA 91913
Phone: (619) 482-3000
Fax: (619) 482-3001
After Hours Phone: (619) 482-3000

Provider Gender: Male

NPI: 1447723937

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

REGISTERED PHYSICAL THERAPIST

NOVENCIDO, ANDREW

Provider ID: 286782

Board Certified Specialty: No
ANDREW NOVENCIDO

1392 E PALOMAR ST STE 503
CHULA VISTA, CA 91913
Phone: (619) 482-3000
Fax: (619) 482-3001
After Hours Phone: (619) 482-3000

Provider Gender: Male
NPI: 1447723937

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

REGISTERED PHYSICAL

THERAPIST

SPARKS, TODD

Provider ID: 129142

Board Certified Specialty: No
TODD M SPARKS

1392 E PALOMAR ST STE 503
CHULA VISTA, CA 91913
Phone: (619) 482-3000
Fax: (619) 482-3001

After Hours Phone: (619) 482-3000

Provider Gender: Male
NPI: 1265481139

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M 7:00AM-7:00PM
TU 7:00AM-0:00PM
W-TH 7:00AM-7:00PM
F 7:00AM-0:00PM
Website: N/A

REGISTERED PHYSICAL THERAPIST

SPARKS, TODD

Provider ID: 301108

Board Certified Specialty: No
TODD M SPARKS

1392 E PALOMAR ST STE 503
CHULA VISTA, CA 91913
Phone: (619) 482-3000
Fax: (619) 482-3001

After Hours Phone: (619)

D3. Directorio de proveedores especialistas

482-3000
Provider Gender: Male
NPI: 1265481139
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M 7:00AM-7:00PM
TU 7:00AM-0:00PM
W-TH 7:00AM-7:00PM
F 7:00AM-0:00PM
 Website: N/A

REGISTERED PHYSICAL THERAPIST

STAHL, KEVIN
Provider ID: 305424
Board Certified Specialty: No
KEVIN STAHL
 1392 E PALOMAR ST STE
503
CHULA VISTA, CA 91913
 Phone: (619) 482-3000
Fax: (619) 482-3001
 After Hours Phone: (619)
482-3000
Provider Gender: Male
NPI: 1760194302
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM
 Website: N/A
**REGISTERED PHYSICAL
THERAPIST**
STAHL, KEVIN
Provider ID: 301418
Board Certified Specialty: No
KEVIN STAHL
 1392 E PALOMAR ST STE
503
CHULA VISTA, CA 91913
 Phone: (619) 482-3000
Fax: (619) 482-3001
 After Hours Phone: (619)
482-3000
Provider Gender: Male
NPI: 1760194302

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

REGISTERED PHYSICAL THERAPIST

VILLANUEVA, GIOVANNI
Provider ID: 301532
Board Certified Specialty: No
GIOVANNI X VILLANUEVA
 1392 E PALOMAR ST STE
503
CHULA VISTA, CA 91913
 Phone: (619) 482-3000
Fax: (619) 482-3001

After Hours Phone: (619)
482-3000
Provider Gender: Male
NPI: 1063046878
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F 7:00AM-7:00PM
 Website: N/A

RHEUMATOLOGY


CHITKARA, PUJA
Provider ID: 262358
Board Certified Specialty: No
PUJA CHITKARA
 765 MEDICAL CENTER CT
STE 216
CHULA VISTA, CA 91911
 Phone: (619) 623-3000
Fax: (619) 623-3001
 After Hours Phone: (619)
623-3000
Provider Gender: Female
NPI: 1871718189
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Hindi, Russian,
Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS MERCY
HOSPITAL
Medi-Cal Open Panel: Yes


D3. Directorio de proveedores especialistas

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:30AM-5:00PM

 Website: N/A

RHEUMATOLOGY


CHWA, JEFFREY

Provider ID: 268780

Board Certified Specialty: No
JEFFREY K CHWA

 765 MEDICAL CENTER CT
STE 216

CHULA VISTA, CA 91911

 Phone: (619) 623-3000

Fax: (619) 623-3001

 After Hours Phone: (619)
623-3000

Provider Gender: Male

NPI: 1285989236

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SHARP
CHULA VISTA MED CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SPEECH PATHOLOGIST


AROCHO-SALGADO, MIRELIS

Provider ID: 296928

Board Certified Specialty: No

MIRELIS AROCHO-SALGADO

 333 H ST STE 5000
CHULA VISTA, CA 91910

 Phone: (877) 757-8353

Fax: (818) 357-2505

 After Hours Phone: (877)
757-8353

Provider Gender: Female

NPI: 1063660165

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


SPEECH PATHOLOGIST

CLARK, MELISSA

Provider ID: 296923

Board Certified Specialty: No
MELISSA A CLARK

 333 H ST STE 5000
CHULA VISTA, CA 91910



 Phone: (877) 757-8353

Fax: (818) 357-2505

 After Hours Phone: (877)
757-8353

Provider Gender: Female

NPI: 1760546428

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Arabic, Armenian,
Farsi, Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes


Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Hours: SU 7:00AM-7:00PM
M-F 7:00AM-7:00PM

 Website: N/A


SPEECH PATHOLOGIST

DURNAN, CASSANDRA

Provider ID: 307884

Board Certified Specialty: No
CASSANDRA L DURNAN

 333 H ST STE 5000
CHULA VISTA, CA 91910

 Phone: (877) 757-8353


Fax: (818) 357-2505

 After Hours Phone: (877)
757-8353

Provider Gender: Female

NPI: 1073873501

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 7:00AM-7:00PM

 Website: N/A


SURGERY GENERAL

CASILLAS BERUMEN, SERGIO

Provider ID: 304607

Board Certified Specialty: No
SERGIO G CASILLAS
BERUMEN

 1111 BROADWAY STE 305
CHULA VISTA, CA 91911

 Phone: (619) 576-7007

Fax: (619) 567-7775

 After Hours Phone: (619)

D3. Directorio de proveedores especialistas

576-7007
Provider Gender: Male
NPI: 1437470762
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR
HEALTH, PARADISE VALLEY
HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA,
SCRIPPS MERCY HOSPITAL,
PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

SURGERY ORTHOPEDIC

ANDRY, JAMES

Provider ID: 302084
Board Certified Specialty: No
JAMES P ANDRY
 750 MEDICAL CENTER CT
STE 14
CHULA VISTA, CA 91911
 Phone: (858) 824-1703
Fax: (858) 455-6473
 After Hours Phone: (858)
824-1703
Provider Gender: Male
NPI: 1679726103
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PARADISE

VALLEY HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, SCRIPPS MERCY
HOSPITAL, SHARP CHULA
VISTA MED CTR, SHARP
CORONADO HOSP AND
HEALTHCARE CTR, Sharp
Grossmont Hospital, SHARP
MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL, TRI
CITY MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

SURGERY ORTHOPEDIC

KUSNEZOV, NICHOLAS

Provider ID: 303195
Board Certified Specialty: No
NICHOLAS A KUSNEZOV
 750 MEDICAL CENTER CT
STE 14
CHULA VISTA, CA 91911
 Phone: (858) 824-1703
Fax: (858) 455-6473
 After Hours Phone: (858)
824-1703
Provider Gender: Male
NPI: 1396185161
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: TWIN
CITIES COMMUNITY
HOSPITAL, TRI CITY MEDICAL

CTR, PARADISE VALLEY
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, SHARP CHULA
VISTA MED CTR, SHARP
CORONADO HOSP AND
HEALTHCARE CTR, Sharp
Grossmont Hospital, Sharp
Grossmont Hospital, SHARP
MEMORIAL HOSPITAL, UCSD
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

CMP PENDLETON

CERTIFIED NURSE PRACTITIONER


FREEMAN, WANDA


Provider ID: 298117
Board Certified Specialty: No
WANDA FREEMAN
 619 CROUCH ST
CMP PENDLETON, CA
92054
 Phone: (760) 736-6767
 After Hours Phone: (760)
736-6767
Provider Gender: Female
NPI: 1659504264
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

D3. Directorio de proveedores especialistas

American Sign Language (ASL):  Phone: (619) 437-8154

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

CORONADO


CERTIFIED NURSE


PRACTITIONER

LANE, KIMBERLY

Provider ID: 301599

Board Certified Specialty: No
KIMBERLY A LANE

 230 PROSPECT PL STE 210
CORONADO, CA 92118

 Phone: (619) 299-0670

Fax: (858) 429-7929

 After Hours Phone: (619)
299-0670

Provider Gender: Female

NPI: 1457670119

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

HEARING AID DEALER /


SUPPLIER

DAVIS, KELLE

Provider ID: 268655

Board Certified Specialty: No
KELLE L DAVIS

 801 ORANGE AVE
CORONADO, CA 92118

 Phone: (619) 437-8154
Fax: (310) 989-3092

 After Hours Phone: (619)
437-8154

Provider Gender: Female

NPI: 1902853344

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:30AM-5:00PM

 Website: N/A


SURGERY ORTHOPEDIC

ANDRY, JAMES

Provider ID: 302087

Board Certified Specialty: No
JAMES P ANDRY

 230 PROSPECT PL STE 230
CORONADO, CA 92118



 Phone: (619) 435-7282

Fax: (619) 435-3723

 After Hours Phone: (619)
435-7282

Provider Gender: Male

NPI: 1679726103

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PARADISE
VALLEY HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, SCRIPPS MERCY

HOSPITAL, SHARP CHULA

VISTA MED CTR, SHARP

CORONADO HOSP AND

HEALTHCARE CTR, Sharp
Grossmont Hospital, SHARP
MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL, TRI
CITY MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY ORTHOPEDIC

PALLIA, CHRISTOPHER


Provider ID: 302102

Board Certified Specialty: No
CHRISTOPHER S PALLIA

 230 PROSPECT PL STE 230
CORONADO, CA 92118

 Phone: (619) 435-7282

Fax: (619) 435-3723

 After Hours Phone: (619)
435-7282

Provider Gender: Male

NPI: 1497751457

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND

HEALTHCARE CTR, SCRIPPS

MEMORIAL HOSPITAL, SHARP

MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL ENCINITAS


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

D3. Directorio de proveedores especialistas

American Sign Language (ASL): *Provider ID: 290945*

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

Email: INFO@PALLIAMD.COM

EL CAJON


CARDIOVASCULAR DISEASE

LERNER, JONATHAN

Provider ID: 303446

*Board Certified Specialty: No
JONATHAN H LERNER*

 *1625 E MAIN ST STE 201
EL CAJON, CA 92021*


 *Phone: (619) 486-6512*

Fax: (619) 616-2104

 *After Hours Phone: (619)
486-6512*

Provider Gender: Male

NPI: 1962899823

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

Hospital Affiliation: SHARP


CHULA VISTA MED CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


CERTIFIED ACUPUNCTURIST

CRAFT, KEVIN


Board Certified Specialty: No

KEVIN E CRAFT

 *855 E MADISON AVE
EL CAJON, CA 92020*


 *Phone: (619) 440-2751*

Fax: (360) 462-2746

 *After Hours Phone: (619)
440-2751*

Provider Gender: Male

NPI: 1659745610

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: TU-F
8:00AM-5:00PM*

 *Website: N/A*

CERTIFIED NURSE


PRACTITIONER

HAMID, WAHIDA

Provider ID: 302295

*Board Certified Specialty: No
WAHIDA N HAMID*

 *875 EL CAJON BLVD
EL CAJON, CA 92020*


 *Phone: (619) 662-4100*


Fax: (619) 205-6305

 *After Hours Phone: (619)
662-4100*

Provider Gender: Female

NPI: 1164812293

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Persian, Spanish*

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

CERTIFIED NURSE


PRACTITIONER

MANRIQUEZ, LISETTE

Provider ID: 307102

*Board Certified Specialty: No
LISETTE MANRIQUEZ*

 *875 EL CAJON BLVD
EL CAJON, CA 92020*

 *Phone: (619) 662-4100*


Fax: (619) 205-6305

 *After Hours Phone: (619)
662-4100*

Provider Gender: Female

NPI: 1760058911

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, UCSD MEDICAL CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

D3. Directorio de proveedores especialistas

CERTIFIED NURSE

PRACTITIONER

PIRTLE, KEYSHONE

Provider ID: 284244

Board Certified Specialty: No
KEYSHONE D PIRTLE

📍 5442 SYCUAN RD
EL CAJON, CA 92019

☎ Phone: (619) 445-0707

Fax: (619) 445-9764

🕒 After Hours Phone: (619)
445-0707

Provider Gender: Male

NPI: 1417567827

☑ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-4:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

WILLIAMS, SHANTRICE

Provider ID: 296007

Board Certified Specialty: No
SHANTRICE M WILLIAMS

📍 855 E MADISON AVE
EL CAJON, CA 92020

☎ Phone: (619) 440-2751

Fax: (360) 462-2746

🕒 After Hours Phone: (619)
440-2751

Provider Gender: Female

NPI: 1578865549

☑ Provider English Spoken: Y

☑ Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M 8:00AM-2:00PM
TU-F 8:00AM-5:00PM

🌐 Website: N/A

DERMATOLOGY

LIN, SHINKO

Provider ID: 308218

Board Certified Specialty: No
SHINKO K LIN

📍 222 W MADISON AVE
EL CAJON, CA 92020

☎ Phone: (619) 579-5115

Fax: (619) 749-6174

🕒 After Hours Phone: (619)
579-5115

Provider Gender: Female

NPI: 1205130036

☑ Provider English Spoken: Y

☑ Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:30AM-4:30PM

🌐 Website: N/A

DERMATOLOGY

LIN, SHINKO

Provider ID: 306321

Board Certified Specialty: No
SHINKO K LIN

📍 222 W MADISON AVE
EL CAJON, CA 92020

☎ Phone: (619) 579-5115

Fax: (619) 749-6174

🕒 After Hours Phone: (619)
579-5115

Provider Gender: Female

NPI: 1205130036

☑ Provider English Spoken: Y

☑ Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:30AM-4:30PM

🌐 Website: N/A

GASTROENTEROLOGY

NOVO, MEGAN

Provider ID: 296067

Board Certified Specialty: No
MEGAN E NOVO

📍 2732 NAVAJO RD STE 200
EL CAJON, CA 92020

☎ Phone: (619) 266-3332

Fax: (619) 266-6000




🕒 After Hours Phone: (619)
266-3332

Provider Gender: Female





NPI: 1770961971



☑ Provider English Spoken: Y

D3. Directorio de proveedores especialistas




Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, UCSD LA JOLLA
JOHN SALLY THORNTON,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, UNIVERSITY OF
CALIFORNIA IRVINE MED CTR,
UCSD MEDICAL CTR, SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A


HEARING AID DEALER / SUPPLIER




ANDERSON, ELAINE
Provider ID: 268692
Board Certified Specialty: No
ELAINE ANDERSON
 1767 E MAIN ST
EL CAJON, CA 92021
 Phone: (619) 440-6516
Fax: (619) 440-6547
 After Hours Phone: (619)
440-6516
Provider Gender: Female
NPI: 1063558856
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A



HEARING AID DEALER / SUPPLIER




DAVIS, KELLE
Provider ID: 268650
Board Certified Specialty: No
KELLE L DAVIS
 1767 E MAIN ST
EL CAJON, CA 92021
 Phone: (619) 440-6516
Fax: (619) 440-6547
 After Hours Phone: (619)
440-6516
Provider Gender: Female
NPI: 1902853344

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N






 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:30AM-5:00PM
 Website: N/A

INTERNAL MEDICINE

AWDISHO, ALAN
Provider ID: 291282
Board Certified Specialty: No
ALAN AWDISHO
 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
Fax: (619) 205-6305


 After Hours Phone: (619)
662-4100
Provider Gender: Male
NPI: 1164795498
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Assyrian, Syriac
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A


INTERNAL MEDICINE

MAY, LOUIS
Provider ID: 294916
Board Certified Specialty: No
LOUIS M MAY
 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
Fax: (619) 205-6305
 After Hours Phone: (619)
662-4100
Provider Gender: Male
NPI: 1720497514
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
EISENHOWER MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):

D3. Directorio de proveedores especialistas

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


INTERNAL MEDICINE

MICHAEL, RAMI

Provider ID: 294908

Board Certified Specialty: No
RAMI Y MICHAEL

 875 EL CAJON BLVD
EL CAJON, CA 92020


 Phone: (619) 662-4100


Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

Provider Gender: Male

NPI: 1467871673

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, Chaldean
Neo-Aramaic

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:30AM-5:00PM

 Website: N/A

INTERVENTIONAL

CARDIOLOGY


MOHAMEDALI, BURHAN

Provider ID: 309247

Board Certified Specialty: No

BURHAN MOHAMEDALI

 1625 E MAIN ST STE 201
EL CAJON, CA 92021


 Phone: (619) 486-6512


Fax: (619) 486-6470

 After Hours Phone: (619)
486-6512

Provider Gender: Male

NPI: 1831393289

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Swahili

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

Adventist Health and Rideout


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A

INTERVENTIONAL

CARDIOLOGY


SHEREV, DIMITRI


Provider ID: 302988

Board Certified Specialty: No

DIMITRI A SHEREV


 1380 EL CAJON BLVD
EL CAJON, CA 92020


 Phone: (619) 867-0557

 After Hours Phone: (619)
867-0557

Provider Gender: Male

NPI: 1154323996

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Bulgarian, Russian,

Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,

GROSSMONT HOSPITAL,

SHARP MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL, ALVARADO

HOSPITAL LLC, SHARP CHULA

VISTA MED CTR, TRI CITY

MEDICAL CTR, TRI CITY

MEDICAL CTR, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, Sharp Grossmont

Hospital, SHARP CORONADO


HOSP AND HEALTHCARE CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

INTERVENTIONAL

CARDIOLOGY


SUDHAKAR, DEEPTHI

Provider ID: 295843

Board Certified Specialty: No

DEEPTHI SUDHAKAR

 1625 E MAIN ST STE 201
EL CAJON, CA 92021

 Phone: (619) 486-6512

Fax: (619) 616-2104

 After Hours Phone: (619)
486-6512

Provider Gender: Female

NPI: 1811307051

 Provider English Spoken: Y

Cultural Competency: N

D3. Directorio de proveedores especialistas

*Hospital Affiliation: Sharp
Grossmont Hospital, SHARP
CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 15\999
American Sign Language (ASL):*

*N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A*

INTERVENTIONAL CARDIOLOGY

SUDHAKAR, DEEPTHI
*Provider ID: 309095
Board Certified Specialty: No
DEEPTHI SUDHAKAR
1625 E MAIN ST STE 201
EL CAJON, CA 92021
Phone: (619) 486-6512
Fax: (619) 616-2104
After Hours Phone: (619)
486-6512
Provider Gender: Female
NPI: 1811307051*

*Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp
Grossmont Hospital, SHARP
CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 15\99
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A*

OPTOMETRIST

AOTO, KIM
*Provider ID: 268721
Board Certified Specialty: No
KIM N AOTO
450 FLETCHER PKWY STE
112
EL CAJON, CA 92020
Phone: (800) 898-2020
Fax: (844) 897-3788
After Hours Phone: (800)
898-2020*

*Provider Gender: Female
NPI: 1780935650
Provider English Spoken: Y
Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A*

OPTOMETRIST

KOO, ANITA
*Provider ID: 306904
Board Certified Specialty: No
ANITA K KOO
231 W MAIN ST
EL CAJON, CA 92020
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619)
425-7755
Provider Gender: Female
NPI: 1669825667*

*Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A*

PHYSICIANS ASSISTANT

INDA, PRISCILLA
*Provider ID: 265073
Board Certified Specialty: No
PRISCILLA S INDA
328 HIGHLAND AVE STE
200
EL CAJON, CA 92020
Phone: (619) 930-9404
Fax: (619) 930-9426
After Hours Phone: (619)
930-9404
Provider Gender: Female
NPI: 1679008379*

*Provider English Spoken: Y
Provider Language(s)
Spoken: Arabic, Russian,
Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 18\110
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:30AM-5:00PM*

D3. Directorio de proveedores especialistas

 Website: N/A


PHYSICIANS ASSISTANT

LE, TAYLOR

Provider ID: 304574

Board Certified Specialty: No
TAYLOR T LE

 855 E MADISON AVE
EL CAJON, CA 92020


 Phone: (619) 440-2751

Fax: (360) 462-2746

 After Hours Phone: (619)
440-2751

Provider Gender: Female

NPI: 1396478400

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT

RAMOS, JACQUELYN

Provider ID: 301106

Board Certified Specialty: No
JACQUELYN RAMOS

 855 E MADISON AVE
EL CAJON, CA 92020


 Phone: (619) 440-2751

Fax: (360) 462-2746

 After Hours Phone: (619)
440-2751

Provider Gender: Female

NPI: 1003515131

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT

ROSENBLATT, SHERILYN

Provider ID: 305449

Board Certified Specialty: No
SHERILYN ROSENBLATT

 875 EL CAJON BLVD
EL CAJON, CA 92020

 Phone: (619) 662-4100

Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1114041621

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PSYCHOLOGIST

ARAIZA, ERNESTINA

Provider ID: 290286

Board Certified Specialty: No
ERNESTINA ARAIZA

 875 EL CAJON BLVD
EL CAJON, CA 92020

 Phone: (619) 662-4100

Fax: (619) 785-3356

 After Hours Phone: (619)
662-4100

Provider Gender: Female


NPI: 1568608636

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PSYCHOLOGIST

CASEY, SHANNON

Provider ID: 306785

Board Certified Specialty: No
SHANNON K CASEY

 215 W MADISON AVE
EL CAJON, CA 92020

 Phone: (760) 737-6935


Fax: (760) 741-2782

 After Hours Phone: (760)
737-6935

Provider Gender: Female

NPI: 1548873755

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Sign Language

Cultural Competency: N

Medi-Cal Open Panel: No


Min/Max Age: 0\999

American Sign Language (ASL):

D3. Directorio de proveedores especialistas

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
9:00AM-7:00PM*

 *Website: N/A*


PSYCHOLOGIST

CASEY, SHANNON

Provider ID: 290309

*Board Certified Specialty: No
SHANNON K CASEY*

 215 W MADISON AVE
EL CAJON, CA 92020


 *Phone: (760) 737-6935*

Fax: (760) 741-2782

 *After Hours Phone: (760)
737-6935*

Provider Gender: Female

NPI: 1548873755

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Sign Language*


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
9:00AM-7:00PM*

 *Website: N/A*


PSYCHOLOGIST

GUARDADO-SOTO, RAQUEL

Provider ID: 290342

*Board Certified Specialty: No
RAQUEL GUARDADO-SOTO*

 855 E MADISON AVE
EL CAJON, CA 92020

 *Phone: (619) 440-2751*

Fax: (360) 462-2746

 *After Hours Phone: (619)
440-2751*

Provider Gender: Female

NPI: 1194999276

 *Provider English Spoken: Y
Cultural Competency: N*

Medi-Cal Open Panel: Yes

Min/Max Age: 13\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*


PSYCHOLOGIST

WHEELER, KIM

Provider ID: 302144

*Board Certified Specialty: No
KIM N WHEELER*

 875 EL CAJON BLVD
EL CAJON, CA 92020

 *Phone: (619) 662-4100*

Fax: (619) 785-3356

 *After Hours Phone: (619)
662-4100*

Provider Gender: Female

NPI: 1700577434

 *Provider English Spoken: Y
Cultural Competency: N*


Medi-Cal Open Panel: Yes


Min/Max Age: 11\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


REGISTERED PHYSICAL THERAPIST

CAMPA, PATRICIA

Provider ID: 302398

*Board Certified Specialty: No
PATRICIA CAMPA*

 860 JAMACHA RD STE 203
EL CAJON, CA 92019

 *Phone: (619) 573-6373*

Fax: (619) 378-6578

 *After Hours Phone: (619)
573-6373*

Provider Gender: Female

NPI: 1528079357

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


REGISTERED PHYSICAL THERAPIST

MORRIS, CHAD

Provider ID: 302403

*Board Certified Specialty: No
CHAD R MORRIS*

 860 JAMACHA RD STE 203
EL CAJON, CA 92019

 *Phone: (619) 573-6373*

Fax: (619) 378-6578

 *After Hours Phone: (619)
573-6373*

Provider Gender: Male

NPI: 1841307063

 *Provider English Spoken: Y
Cultural Competency: N*

D3. Directorio de proveedores especialistas

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

ENCINITAS

CARDIOVASCULAR DISEASE

DURAN, EDWARD

Provider ID: 310052

Board Certified Specialty: No

EDWARD K DURAN

 477 N EL CAMINO REAL
STE D300

ENCINITAS, CA 92024


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1578903936

 Provider English Spoken: Y


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

CERTIFIED ACUPUNCTURIST

ARELLANO, JACQUELINE

Provider ID: 304139

Board Certified Specialty: No

JACQUELINE ARELLANO

 1200 GARDEN VIEW RD

ENCINITAS, CA 92024


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1104129485

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


CERTIFIED ACUPUNCTURIST

GONZALEZ, ANDRES


Provider ID: 298659

Board Certified Specialty: No

ANDRES D GONZALEZ

 1130 2ND ST

ENCINITAS, CA 92024


 Phone: (760) 736-6767

Fax: (760) 736-8740

 After Hours Phone: (760)
736-6767

Provider Gender: Male

NPI: 1841857729

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese, Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

CERTIFIED ACUPUNCTURIST

JULIAN, FIDES

Provider ID: 304133

Board Certified Specialty: No

FIDES Q JULIAN

 1200 GARDEN VIEW RD
ENCINITAS, CA 92024

 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1407401128

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

CERTIFIED NURSE


PRACTITIONER


CARDINELL, ANNA

Provider ID: 291412

Board Certified Specialty: No

ANNA C CARDINELL

 1200 GARDEN VIEW RD
ENCINITAS, CA 92024

 Phone: (800) 926-8273

Fax: (888) 539-8781

D3. Directorio de proveedores especialistas

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1306978614

🗉 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

CHAMBERS, KATRINA

Provider ID: 303521

Board Certified Specialty: No
KATRINA N CHAMBERS

📍 781 GARDEN VIEW CT STE 100

ENCINITAS, CA 92024

☎ Phone: (760) 183-0441

Fax: (760) 635-5972

☎ After Hours Phone: (760) 183-0441

Provider Gender: Female

NPI: 1710695143

🗉 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

DWYER, ERIN

Provider ID: 301447

Board Certified Specialty: No
ERIN DWYER

📍 320 SANTA FE DR STE 108
ENCINITAS, CA 92024

☎ Phone: (760) 436-4558

Fax: (858) 429-7926

☎ After Hours Phone: (760) 436-4558

Provider Gender: Female

NPI: 1003260894

🗉 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

HEAD, KRISTIN

Provider ID: 268657

Board Certified Specialty: No
KRISTIN N HEAD

📍 477 N EL CAMINO REAL
STE D302

ENCINITAS, CA 92024

☎ Phone: (760) 944-5545

Fax: (760) 944-3927

☎ After Hours Phone: (760) 944-5545

Provider Gender: Female

NPI: 1699078923

🗉 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

HOOPER, BONNIE

Provider ID: 275253

Board Certified Specialty: No
BONNIE J HOOPER

📍 477 N EL CAMINO REAL
STE D308

ENCINITAS, CA 92024

☎ Phone: (760) 436-2300

Fax: (760) 436-5482

☎ After Hours Phone: (760) 436-2300

Provider Gender: Female

NPI: 1821062878

🗉 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

D3. Directorio de proveedores especialistas

CERTIFIED NURSE

PRACTITIONER

KORMANIK, PATRICIA

Provider ID: 282071

Board Certified Specialty: No

PATRICIA A KORMANIK

1200 GARDEN VIEW RD
STE 200

ENCINITAS, CA 92024

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1093895047

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

LANE, KIMBERLY

Provider ID: 301602

Board Certified Specialty: No

KIMBERLY A LANE

320 SANTA FE DR STE 108
ENCINITAS, CA 92024

Phone: (760) 436-4558

Fax: (858) 429-7926

After Hours Phone: (760)

436-4558

Provider Gender: Female

NPI: 1457670119

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

PAKENHAM, KATE

Provider ID: 296268

Board Certified Specialty: No

KATE E PAKENHAM

1130 2ND ST

ENCINITAS, CA 92024

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1578299343

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: SU 8:00AM-8:00PM
M-F 8:00AM-8:00PM
SA 8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

SRILASAK, MICHELE

Provider ID: 281856

Board Certified Specialty: No

MICHELE SRILASAK

1200 GARDEN VIEW RD
STE 200

ENCINITAS, CA 92024

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1265487326

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

YEO, ALEXANDRIA

Provider ID: 299940

Board Certified Specialty: No

ALEXANDRIA YEO

1505 ENCINITAS BLVD
ENCINITAS, CA 92024

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

D3. Directorio de proveedores especialistas

926-8273
Provider Gender: Female
NPI: 1902368319
☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🌐 Website: N/A

ENDOCRINOLOGY

METABOLISM DIABETES

HUPFELD, CHRISTOPHER

Provider ID: 277111
Board Certified Specialty: No
CHRISTOPHER J HUPFELD
📍 1200 GARDEN VIEW RD
STE 100
ENCINITAS, CA 92024
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1568429165
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

GASTROENTEROLOGY

PATEL, JANKI

Provider ID: 305301
Board Certified Specialty: No
JANKI R PATEL
📍 781 GARDEN VIEW CT STE
100
ENCINITAS, CA 92024
☎ Phone: (760) 354-9697
Fax: (760) 635-5972
🕒 After Hours Phone: (760) 354-9697
Provider Gender: Female
NPI: 1548606668
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Gujarati, Hindi
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🌐 Website: N/A

HOSPICE AND PALLIATIVE MEDICINE

RUBENZI, TAMARA

Provider ID: 245575
Board Certified Specialty: No
TAMARA T RUBENZI
📍 1200 GARDEN VIEW RD
STE 100
ENCINITAS, CA 92024
☎ Phone: (800) 926-8273
Fax: (888) 539-8781

🕒 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1811200652
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

HOSPICE AND PALLIATIVE MEDICINE

RUBENZI, TAMARA

Provider ID: 282127
Board Certified Specialty: No
TAMARA T RUBENZI
📍 1200 GARDEN VIEW RD
STE 200
ENCINITAS, CA 92024
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1811200652
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR


D3. Directorio de proveedores especialistas

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): Board Certified Specialty: No
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


MATERNAL AND FETAL MEDICINE


BALLAS, JERASIMOS

Provider ID: 209562

Board Certified Specialty: No
JERASIMOS BALLAS

 781 GARDEN VIEW CT STE
200
ENCINITAS, CA 92024

 Phone: (858) 657-7200

 After Hours Phone: (858)
657-7200

Provider Gender: Male

NPI: 1871767384

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,


EISENHOWER MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

MATERNAL AND FETAL MEDICINE


HULL, ANDREW


Provider ID: 209483

Board Certified Specialty: No
ANDREW D HULL

 781 GARDEN VIEW CT STE
200

ENCINITAS, CA 92024

 Phone: (858) 657-7200

 After Hours Phone: (858)
657-7200

Provider Gender: Male

NPI: 1902862121

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,

PALOMAR MEDICAL CENTER,

SCRIPPS MEMORIAL

HOSPITAL, UCSD LA JOLLA

JOHN SALLY THORNTON,

UCSD LA JOLLA JOHN SALLY


THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

MATERNAL AND FETAL MEDICINE

LAURENT, LOUISE


Provider ID: 208641


Board Certified Specialty: No

LOUISE C LAURENT

 781 GARDEN VIEW CT STE
200


ENCINITAS, CA 92024

 Phone: (858) 657-7200

 After Hours Phone: (858)
657-7200

Provider Gender: Female

NPI: 1770532707

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,

PALOMAR MEDICAL CENTER,

SCRIPPS MEMORIAL


HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

MATERNAL AND FETAL MEDICINE


MOORE, THOMAS


Provider ID: 208645

Board Certified Specialty: No
THOMAS R MOORE

 781 GARDEN VIEW CT STE
200

ENCINITAS, CA 92024

 Phone: (858) 657-7200

 After Hours Phone: (858)
657-7200

Provider Gender: Male

D3. Directorio de proveedores especialistas

NPI: 1184682379

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, SCRIPPS
MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


MATERNAL AND FETAL MEDICINE

RICHARDSON, ALVIE

Provider ID: 277315

Board Certified Specialty: No
ALVIE C RICHARDSON

 477 N EL CAMINO REAL
BLDG D STE 302
ENCINITAS, CA 92024

 Phone: (858) 966-6710

Fax: (858) 966-6711

 After Hours Phone: (858)
966-6710

Provider Gender: Male

NPI: 1154305977

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, RADY
CHILDRENS HOSPITAL SAN
DIEGO, Sharp Grossmont
Hospital


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


MATERNAL AND FETAL MEDICINE


WOELKERS, DOUGLAS

Provider ID: 209384

Board Certified Specialty: No
DOUGLAS A WOELKERS



 781 GARDEN VIEW CT STE
200
ENCINITAS, CA 92024

 Phone: (858) 657-7200

 After Hours Phone: (858)
657-7200

Provider Gender: Male

NPI: 1013965748

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, PALOMAR
MEDICAL CENTER, UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes


Min/Max Age: 16\999

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


MATERNAL AND FETAL MEDICINE


WOLF, RICHARD

Provider ID: 209254

Board Certified Specialty: No
RICHARD B WOLF

 781 GARDEN VIEW CT STE
200
ENCINITAS, CA 92024

 Phone: (858) 657-7200

 After Hours Phone: (858)
657-7200

Provider Gender: Male

NPI: 1497713846

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, PALOMAR
MEDICAL CENTER, UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON,
UCSD LA JOLLA JOHN SALLY
THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

D3. Directorio de proveedores especialistas

 Website: N/A


NEONATAL / PERINATAL MEDICINE


BAI-TONG, SHIYU

Provider ID: 283286

Board Certified Specialty: No
SHIYU S BAI-TONG


 354 SANTA FE DR
ENCINITAS, CA 92024

 Phone: (760) 633-6120

 After Hours Phone: (760)
633-6120

Provider Gender: Female

NPI: 1528454188

 Provider English Spoken: Y

Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEONATAL / PERINATAL MEDICINE

NYMAN, KATHERINE

Provider ID: 301821

Board Certified Specialty: No
KATHERINE N NYMAN

 354 SANTA FE DR
ENCINITAS, CA 92024

 Phone: (760) 633-6120


Fax: (760) 633-7385

 After Hours Phone: (760)

633-6120

Provider Gender: Female

NPI: 1003260951

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEONATAL / PERINATAL MEDICINE

SAUER, CHARLES

Provider ID: 303905

Board Certified Specialty: No
CHARLES W SAUER

 354 SANTA FE DR
ENCINITAS, CA 92024


 Phone: (760) 633-6120

Fax: (760) 633-7385

 After Hours Phone: (760)
633-6120

Provider Gender: Male

NPI: 1538388988

 Provider English Spoken: Y


Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
PALOMAR MEDICAL CENTER,

SCRIPPS MERCY HOSPITAL
CHULA VISTA, PALOMAR
HEALTH, SCRIPPS MEMORIAL
HOSPITAL, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

NEUROLOGY


BUI, JONATHAN

Provider ID: 269966

Board Certified Specialty: No
JONATHAN D BUI

 477 N EL CAMINO REAL
STE 302

ENCINITAS, CA 92024

 Phone: (760) 944-6377


Fax: (760) 944-3927

 After Hours Phone: (760)
944-6377

Provider Gender: Male

NPI: 1730247974

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish,
Vietnamese

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

D3. Directorio de proveedores especialistas


DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEUROLOGY

JINDAL, ANUJA


Provider ID: 206264

Board Certified Specialty: No
ANUJA V JINDAL

 477 N EL CAMINO REAL
STE 302
ENCINITAS, CA 92024

 Phone: (760) 944-5545

Fax: (760) 944-3927

 After Hours Phone: (760)
944-5545

Provider Gender: Female

NPI: 1194046581

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

NEUROLOGY

SCHORR, EMILY


Provider ID: 305022

Board Certified Specialty: No

EMILY M SCHORR

 1200 GARDEN VIEW RD
ENCINITAS, CA 92024

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1255862041

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A


NEUROLOGY CHILD


KIMMCMANUS, OLIVIA

Provider ID: 206258

Board Certified Specialty: No

OLIVIA S KIMMCMANUS

 477 N EL CAMINO REAL
BLDG D STE 302
ENCINITAS, CA 92024

 Phone: (760) 944-5545

Fax: (760) 944-3927

 After Hours Phone: (760)
944-5545

Provider Gender: Female

NPI: 1174870067

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:
UNIVERSITY OF CALIFORNIA
IRVINE MED CTR, CHILDRENS
HOSPITAL OF ORANGE
COUNTY, RADY CHILDRENS


HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEUROLOGY CHILD

SAHAGIAN, MICHELLE


Provider ID: 206073

Board Certified Specialty: No
MICHELLE L SAHAGIAN

 477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024

 Phone: (760) 944-5545

Fax: (760) 944-3927

 After Hours Phone: (760)
944-5545

Provider Gender: Female

NPI: 1275604035

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OBSTETRICS / GYNECOLOGY

BINDER, PRATIBHA

D3. Directorio de proveedores especialistas

Provider ID: 282167

Board Certified Specialty: No
PRATIBHA S BINDER

1200 GARDEN VIEW RD
STE 200
ENCINITAS, CA 92024

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1174758031

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OBSTETRICS / GYNECOLOGY

DELCORE, LAURA

Provider ID: 291325

Board Certified Specialty: No
LAURA M DELCORE

1200 GARDEN VIEW RD
ENCINITAS, CA 92024

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1790128759

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OBSTETRICS / GYNECOLOGY

DRIEBE, AMY

Provider ID: 291336

Board Certified Specialty: No

AMY M DRIEBE

1200 GARDEN VIEW RD
ENCINITAS, CA 92024

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1730507567

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OBSTETRICS / GYNECOLOGY

DRIEBE, AMY

Provider ID: 293448

Board Certified Specialty: No

AMY M DRIEBE

1505 ENCINITAS BLVD

ENCINITAS, CA 92024

Phone: (800) 926-8372

Fax: (888) 539-8781

After Hours Phone: (800)
926-8372

Provider Gender: Female

NPI: 1730507567

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OBSTETRICS / GYNECOLOGY

DRIEBE, AMY

Provider ID: 293447

Board Certified Specialty: No

AMY M DRIEBE

781 GARDEN VIEW CT STE
200

ENCINITAS, CA 92024

Phone: (800) 926-8372

Fax: (888) 539-8781

After Hours Phone: (800)
926-8372

Provider Gender: Female

NPI: 1730507567

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP



MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

D3. Directorio de proveedores especialistas

 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*

OBSTETRICS / GYNECOLOGY


LAMALE-SMITH, LEAH


Provider ID: 208682

Board Certified Specialty: No
LEAH M LAMALE-SMITH

 781 GARDEN VIEW CT STE 200


ENCINITAS, CA 92024

 *Phone: (858) 657-7200*

 *After Hours Phone: (858) 657-7200*

Provider Gender: Female

NPI: 1396904876

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL CTR, EISENHOWER MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8:00AM-5:00PM*

 *Website: N/A*

OBSTETRICS / GYNECOLOGY


MACKAY, GILLIAN

Provider ID: 303061

Board Certified Specialty: No
GILLIAN MACKAY

 1200 GARDEN VIEW RD

ENCINITAS, CA 92024

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800) 926-8273*

Provider Gender: Female

NPI: 1770702177

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*


 *Website: N/A*

OPHTHALMOLOGY


BANSAL, PREETI

Provider ID: 205617


Board Certified Specialty: No
PREETI BANSAL

 477 N EL CAMINO REAL STE D302

ENCINITAS, CA 92024

 *Phone: (858) 309-7702*


Fax: (760) 944-3927

 *After Hours Phone: (858) 309-7702*

Provider Gender: Female

NPI: 1871664631

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Hindi*

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT


HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL, TRI CITY MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8:00AM-5:00PM*

 *Website: N/A*

OPHTHALMOLOGY


BHATIA, SHAGUN

Provider ID: 267315

Board Certified Specialty: No
SHAGUN K BHATIA

 477 N EL CAMINO REAL STE D302

ENCINITAS, CA 92024

 *Phone: (760) 944-5545*

Fax: (760) 944-3927

 *After Hours Phone: (760) 944-5545*

Provider Gender: Female

NPI: 1104237353

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

D3. Directorio de proveedores especialistas

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*


 *Website: N/A*

OPHTHALMOLOGY


HENNEIN, LAUREN

Provider ID: 297012

*Board Certified Specialty: No
LAUREN M HENNEIN*

 *477 N EL CAMINO REAL
STE D302*

ENCINITAS, CA 92024

 *Phone: (760) 944-5545*

Fax: (760) 944-3927

 *After Hours Phone: (760)
944-5545*

Provider Gender: Female

NPI: 1699216010

 *Provider English Spoken: Y
Cultural Competency: N*

*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

OPHTHALMOLOGY

MOLL, ANGELA


Provider ID: 205507

*Board Certified Specialty: No
ANGELA M MOLL*

 *477 N EL CAMINO REAL*

STE D302

ENCINITAS, CA 92024

 *Phone: (760) 944-5545*

Fax: (760) 944-3927

 *After Hours Phone: (760)
944-5545*

Provider Gender: Female

NPI: 1861648602

 *Provider English Spoken: Y
Cultural Competency: N*

*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT
HOSPITAL, SHARP MEMORIAL
HOSPITAL, UCSF BENIOFF
CHILDREN'S HOSPITAL*

OAKLAND, SCRIPPS MERCY

HOSPITAL, SCRIPPS MERCY

HOSPITAL CHULA VISTA


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

OPHTHALMOLOGY


MOVAGHAR, MANSOOR


Provider ID: 216413

*Board Certified Specialty: No
MANSOOR MOVAGHAR*

 *477 N EL CAMINO REAL
BLD D STE 302*


ENCINITAS, CA 92024

 *Phone: (760) 944-5545*

 *After Hours Phone: (760)
944-5545*

Provider Gender: Male

NPI: 1497792220

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO*


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

OPHTHALMOLOGY


OHALLORAN, HENRY

Provider ID: 205886

*Board Certified Specialty: No
HENRY S OHALLORAN*

 *477 N EL CAMINO REAL
STE D302*

ENCINITAS, CA 92024


 *Phone: (760) 944-5545*

Fax: (760) 944-3927

 *After Hours Phone: (760)
944-5545*

Provider Gender: Male

NPI: 1235287947

 *Provider English Spoken: Y
Cultural Competency: N*

*Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

D3. Directorio de proveedores especialistas



N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*

OPTOMETRIST



AOTO, KIM

Provider ID: 296797

*Board Certified Specialty: No
KIM N AOTO*

 320 SANTA FE DR STE 104
ENCINITAS, CA 92024
 *Phone: (760) 943-7141*
Fax: (760) 943-0371
 *After Hours Phone: (760)
943-7141*


*Provider Gender: Female
NPI: 1780935650*

 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Vietnamese*

*Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999*

American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*

 *Hours: M 9:00AM-5:00PM
TU 8:30AM-4:30PM
W 7:30AM-4:30PM
TH 9:30AM-5:00PM
F 8:30AM-4:00PM*




 *Website: N/A*

OTOLARYNGOLOGY


BLISS, MORGAN

Provider ID: 206085

*Board Certified Specialty: No
MORGAN R BLISS*




 477 N EL CAMINO REAL
STE 302
ENCINITAS, CA 92024
 *Phone: (760) 944-5545*
Fax: (760) 944-3927
 *After Hours Phone: (760)
944-5545*

*Provider Gender: Female
NPI: 1760707657*

 *Provider English Spoken: Y*
*Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO*

*Medi-Cal Open Panel: Yes
Min/Max Age: 0\19*

American Sign Language (ASL):




N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*

OTOLARYNGOLOGY


FRIESEN, TZYYNONG

Provider ID: 244900

*Board Certified Specialty: No
TZYYNONG L FRIESEN*

 477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024
 *Phone: (760) 944-5545*
 *After Hours Phone: (760)
944-5545*

*Provider Gender: Female
NPI: 1952740177*

 *Provider English Spoken: Y*
*Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19*

American Sign Language (ASL):



N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*


OTOLARYNGOLOGY

LEUIN, SHELBY


Provider ID: 206112

*Board Certified Specialty: No
SHELBY C LEUIN*

 477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024
 *Phone: (760) 944-5545*
Fax: (760) 944-3927


 *After Hours Phone: (760)
944-5545*


*Provider Gender: Female
NPI: 1124230909*

 *Provider English Spoken: Y*
*Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND*

*Medi-Cal Open Panel: Yes
Min/Max Age: 0\19*

American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

OTOLARYNGOLOGY

PATEL, VIJAY

Provider ID: 297035

Board Certified Specialty: No

D3. Directorio de proveedores especialistas

VIJAY PATEL

477 N EL CAMINO REAL
STE D302

ENCINITAS, CA 92024

Phone: (760) 944-5545

Fax: (760) 944-3927

After Hours Phone: (760)
944-5545

Provider Gender: Male

NPI: 1508250747

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, VALLEY CHILDRENS
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

PEDIATRIC ALLERGY / IMMUNOLOGY

GREINER, ALEXANDER

Provider ID: 205696

Board Certified Specialty: No

ALEXANDER N GREINER

477 N EL CAMINO REAL
STE D302

ENCINITAS, CA 92024

Phone: (858) 966-4900

Fax: (760) 944-3927

After Hours Phone: (858)
966-4900

Provider Gender: Male

NPI: 1609801299

Provider English Spoken: Y

Provider Language(s)

Spoken: French, German,
Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

PEDIATRIC CARDIOLOGY

HALEY, JESSICA

Provider ID: 205688

Board Certified Specialty: No

JESSICA E HALEY

477 N EL CAMINO REAL
STE D302

ENCINITAS, CA 92024

Phone: (760) 944-5545

Fax: (760) 944-3927

After Hours Phone: (760)
944-5545

Provider Gender: Female

NPI: 1023329885

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

PEDIATRIC CARDIOLOGY

NARAYAN, HARI

Provider ID: 239115

Board Certified Specialty: No

HARI K NARAYAN

477 N EL CAMINO REAL
BLDG D STE 302

ENCINITAS, CA 92024

Phone: (760) 944-5545

Fax: (760) 944-3927

After Hours Phone: (760)
944-5545

Provider Gender: Male

NPI: 1376705707

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

PEDIATRIC CARDIOLOGY

SILVASEPULVEDA, JOSE

Provider ID: 206299



Board Certified Specialty: No

JOSE A SILVASEPULVEDA

477 N EL CAMINO REAL
BLDG D STE 302

ENCINITAS, CA 92024

D3. Directorio de proveedores especialistas

 Phone: (760) 944-5545
 Fax: (760) 944-3927

 After Hours Phone: (760) 944-5545

Provider Gender: Male

NPI: 1417222472


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC



GASTROENTEROLOGY

CHU, CHRISTOPHER

Provider ID: 301641

Board Certified Specialty: No
CHRISTOPHER CHU


 477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024


 Phone: (760) 944-5545
 Fax: (760) 944-3927

 After Hours Phone: (760) 944-5545

Provider Gender: Male

NPI: 1912369273

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Yue
Chinese

Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC



GASTROENTEROLOGY

YOUNG, JOCELYN

Provider ID: 294676

Board Certified Specialty: No
JOCELYN A YOUNG

 477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024

 Phone: (760) 944-5545
 Fax: (760) 944-3927

 After Hours Phone: (760) 944-5545

Provider Gender: Female

NPI: 1306227491

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UC DAVIS
MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM



 Website: N/A

PEDIATRIC PULMONOLOGY **CERNELC-KOHAN, MATEJKA**

Provider ID: 243043

Board Certified Specialty: No
MATEJKA CERNELC-KOHAN

 477 N EL CAMINO REAL
STE 302 BLDG D
ENCINITAS, CA 92024

 Phone: (760) 944-5545
 Fax: (760) 944-3927

 After Hours Phone: (760) 944-5545

Provider Gender: Female

NPI: 1871752451


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSF
BENIOFF CHILDREN'S
HOSPITAL OAKLAND, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC PULMONOLOGY **LENHART-PENDERGRASS,**

PATRICIA

Provider ID: 294642

Board Certified Specialty: No
PATRICIA M

LENHART-PENDERGRASS

 477 N EL CAMINO REAL

D3. Directorio de proveedores especialistas

STE D302
ENCINITAS, CA 92024
☎ Phone: (760) 944-5545
☎ Fax: (760) 944-3927
🕒 After Hours Phone: (760) 944-5545
Provider Gender: Female
NPI: 1144615659
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

PEDIATRIC RHEUMATOLOGY

CHANG, JOHANNA

Provider ID: 246395
Board Certified Specialty: No
JOHANNA C CHANG

📍 477 N EL CAMINO REAL STE D302
ENCINITAS, CA 92024
☎ Phone: (760) 944-5545
☎ After Hours Phone: (760) 944-5545

Provider Gender: Female
NPI: 1821242199
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes

Min/Max Age: 0\19
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

PHYSICAL MEDICINE / REHABILITATION

LEE, HAEWON

Provider ID: 256227
Board Certified Specialty: No
HAEWON LEE

📍 477 N EL CAMINO REAL STE C100
ENCINITAS, CA 92024
☎ Phone: (800) 926-8273
☎ After Hours Phone: (800) 926-8273

Provider Gender: Female
NPI: 1447661657
🗣 Provider English Spoken: Y
🗣 Provider Language(s) Spoken: Korean

Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

PHYSICIANS ASSISTANT

HIGGINS, JOSHUA

Provider ID: 287134
Board Certified Specialty: No
JOSHUA B HIGGINS

📍 1505 ENCINITAS BLVD
ENCINITAS, CA 92024
☎ Phone: (800) 926-8273
☎ Fax: (888) 539-8781

🕒 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1861624181
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

PHYSICIANS ASSISTANT

PELIO, DARREN

Provider ID: 293443
Board Certified Specialty: No
DARREN A PELIO

📍 1200 GARDEN VIEW RD
ENCINITAS, CA 92024
☎ Phone: (800) 926-8273
☎ Fax: (888) 539-8781


🕒 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1386791028
🗣 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes

D3. Directorio de proveedores especialistas

Min/Max Age: 0\999

American Sign Language (ASL): BRIAN C SUTTON

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


PHYSICIANS ASSISTANT

RODRIGUES, ANNETTE

Provider ID: 302454

Board Certified Specialty: No
ANNETTE A RODRIGUES

 477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024

 Phone: (760) 944-5545

Fax: (760) 944-5545

 After Hours Phone: (760)
944-5545

Provider Gender: Female

NPI: 1205381845

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL, SHARP MEMORIAL
HOSPITAL


Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT


SUTTON, BRIAN

Provider ID: 272241

Board Certified Specialty: No

BRIAN C SUTTON

 1200 GARDEN VIEW RD
STE 200
ENCINITAS, CA 92024

 Phone: (760) 598-1776

Fax: (760) 598-5744

 After Hours Phone: (760)
598-1776

Provider Gender: Male

NPI: 1629174727

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT


VANETSKY, GARY

Provider ID: 269152

Board Certified Specialty: No

GARY E VANETSKY

 477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024

 Phone: (760) 436-2300

Fax: (760) 436-5482

 After Hours Phone: (760)
436-2300

Provider Gender: Male

NPI: 1417034489

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PODIATRIST


DUSTIN, ADAM

Provider ID: 275800

Board Certified Specialty: No
ADAM F DUSTIN

 326 ENCINITAS BLVD STE
100

ENCINITAS, CA 92024

 Phone: (760) 436-5533

Fax: (760) 436-0611

 After Hours Phone: (760)
436-5533

Provider Gender: Male

NPI: 1043389026

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A

PSYCHOLOGIST

D3. Directorio de proveedores especialistas

GOMEZ, JUANITA

Provider ID: 291423

Board Certified Specialty: No

JUANITA GOMEZ

1505 ENCINITAS BLVD
ENCINITAS, CA 92024

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1790915759

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

SURGERY COLON SURGERY

PARRY, LISA

Provider ID: 278552

Board Certified Specialty: No

LISA A PARRY

1200 GARDEN VIEW RD
STE 200
ENCINITAS, CA 92024

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1235369067

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

SURGERY GENERAL

ARMANI, AVA

Provider ID: 282143

Board Certified Specialty: No

AVA ARMANI

1200 GARDEN VIEW RD
STE 200
ENCINITAS, CA 92024

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1861759383

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSF

MEDICAL CENTER, UCSF

Medical Center At Mission Bay,

UCSF MEDICAL CENTER AT

MOUNT ZION, UCSD LA JOLLA

JOHN SALLY THORNTON,

UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

SURGERY GENERAL

JACOBSEN, GARTH

Provider ID: 201730

Board Certified Specialty: No

GARTH R JACOBSEN

1200 GARDEN VIEW RD
ENCINITAS, CA 92024

Phone: (858) 657-8860

After Hours Phone: (858)
657-8860

Provider Gender: Male

NPI: 1265649966

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

SURGERY PEDIATRIC

FAIRBANKS, TIMOTHY

Provider ID: 205497

Board Certified Specialty: No

TIMOTHY J FAIRBANKS

477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024

Phone: (760) 944-5545


Fax: (760) 944-3927

After Hours Phone: (760)
944-5545

D3. Directorio de proveedores especialistas

Provider Gender: Male

NPI: 1407010556

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
SHARP MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL

HOSPITAL, UCSF BENIOFF
CHILDREN'S HOSPITAL


OAKLAND


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY PEDIATRIC

KLING, KAREN


Provider ID: 206128

Board Certified Specialty: No
KAREN M KLING

 477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024

 Phone: (760) 944-5545

Fax: (760) 944-3927

 After Hours Phone: (760)
944-5545

Provider Gender: Female

NPI: 1982775144

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,

SHARP MARY BIRCH HOSP
FOR WOMEN AND


NEWBORNS, NATIONAL
NAVAL MED CTR, SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY PLASTIC


REID, CHRISTOPHER

Provider ID: 238130

Board Certified Specialty: No
CHRISTOPHER M REID


 1200 GARDEN VIEW RD
ENCINITAS, CA 92024

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1982964276

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

ESCONDIDO

ANESTHESIOLOGY PAIN


MANAGEMENT

BROWNLOW, ROY


Provider ID: 308112

Board Certified Specialty: No
ROY C BROWNLOW

 637 E GRAND AVE
ESCONDIDO, CA 92025

 Phone: (760) 610-0522

Fax: (760) 610-0523

 After Hours Phone: (760)
610-0522

Provider Gender: Male

NPI: 1205949914

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

ANESTHESIOLOGY PAIN

MANAGEMENT

BROWNLOW, ROY

Provider ID: 308401

Board Certified Specialty: No

D3. Directorio de proveedores especialistas

ROY C BROWNLOW

637 E GRAND AVE
ESCONDIDO, CA 92025

Phone: (760) 610-0522

Fax: (760) 610-0523

After Hours Phone: (760)
610-0522

Provider Gender: Male

NPI: 1205949914

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

ANESTHESIOLOGY PAIN MANAGEMENT

DAIRO, BRANDON

Provider ID: 299881

Board Certified Specialty: No
BRANDON DAIRO

1955 CITRACADO PKWY
STE 203
ESCONDIDO, CA 92029

Phone: (760) 738-5533

Fax: (760) 738-3835

After Hours Phone: (760)
738-5533

Provider Gender: Male

NPI: 1689092470

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 18\100

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

ANESTHESIOLOGY PAIN MANAGEMENT

DAIRO, BRANDON

Provider ID: 300090

Board Certified Specialty: No
BRANDON DAIRO

1955 CITRACADO PKWY
STE 203
ESCONDIDO, CA 92029

Phone: (760) 738-5533

Fax: (760) 738-3835

After Hours Phone: (760)
738-5533

Provider Gender: Male

NPI: 1689092470

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

ANESTHESIOLOGY PAIN MANAGEMENT

ROBINSON, COLE

Provider ID: 300171

Board Certified Specialty: No
COLE W ROBINSON

160 N DATE ST
ESCONDIDO, CA 92025

Phone: (888) 873-6220

Fax: (888) 873-6220

After Hours Phone: (888)
873-6220

Provider Gender: Male

NPI: 1871799528

Provider English Spoken: Y

Provider Language(s)
Spoken: German

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 21\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
7:00AM-4:00PM
SA 7:00AM-4:00PM

Website: N/A

CARDIOVASCULAR DISEASE

LERNER, JONATHAN

Provider ID: 309268

Board Certified Specialty: No

D3. Directorio de proveedores especialistas

JONATHAN H LERNER

488 E VALLEY PKWY STE 107

ESCONDIDO, CA 92025

Phone: (760) 294-0480

Fax: (760) 294-0481

After Hours Phone: (760) 294-0480

Provider Gender: Male

NPI: 1962899823

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

HEAD, KRISTIN

Provider ID: 277866

Board Certified Specialty: No KRISTIN N HEAD

2125 CITRACADO PKWY STE 100

ESCONDIDO, CA 92029

Phone: (760) 294-9260

Fax: (760) 294-9274

After Hours Phone: (760) 294-9260

Provider Gender: Female

NPI: 1699078923

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

JANNESARI, ROYA

Provider ID: 302339

Board Certified Specialty: No ROYA JANNESARI

625 CITRACADO PKWY STE 108

ESCONDIDO, CA 92025

Phone: (760) 743-1431

Fax: (760) 743-6455

After Hours Phone: (760) 743-1431

Provider Gender: Female

NPI: 1063585099

Provider English Spoken: Y

Provider Language(s) Spoken: Farsi, Persian

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

KESHAVARZI, SARA

Provider ID: 305938

Board Certified Specialty: No

SARA KESHAVARZI

488 E VALLEY PKWY STE 411

ESCONDIDO, CA 92025

Phone: (760) 466-9800

Fax: (360) 462-2741

After Hours Phone: (760) 466-9800

Provider Gender: Female

NPI: 1457996126

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

KESHAVARZI, SARA

Provider ID: 309748

Board Certified Specialty: No SARA KESHAVARZI

488 E VALLEY PKWY STE 411

ESCONDIDO, CA 92025

Phone: (760) 466-9800

Fax: (360) 462-2741

After Hours Phone: (760) 466-9800

Provider Gender: Female

D3. Directorio de proveedores especialistas

NPI: 1457996126


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): Provider ID: 269203

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE PRACTITIONER

WALDRUP, LARHONDA

Provider ID: 299259

Board Certified Specialty: No
LARHONDA M WALDRUP

 2185 CITRACADO PKWY
ESCONDIDO, CA 92029

 Phone: (442) 281-3193

Fax: (442) 281-3197

 After Hours Phone: (442)
281-3193

Provider Gender: Female

NPI: 1831627181

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: PALOMAR
MEDICAL CENTER, RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED REGISTERED

NURSE ANESTHETIST


SEILNACHT-BERNARD, KAREN

Board Certified Specialty: No

KAREN M

SEILNACHT-BERNARD

 488 E VALLEY PKWY
ESCONDIDO, CA 92025

 Phone: (877) 217-8505

Fax: (760) 735-6296

 After Hours Phone: (877)
217-8505

Provider Gender: Female

NPI: 1861562498


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A

EMERGENCY MEDICINE

PHAM, LILY

Provider ID: 304936


Board Certified Specialty: No

LILY M PHAM

 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

 Phone: (760) 739-1543

Fax: (760) 294-9274

 After Hours Phone: (760)
739-1543

Provider Gender: Female

NPI: 1811423072

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

 Website: N/A

ENDOCRINOLOGY

METABOLISM DIABETES

REDDY, NAVYA


Provider ID: 302350

Board Certified Specialty: No

NAVYA M REDDY

 625 CITRACADO PKWY STE
108

ESCONDIDO, CA 92025

 Phone: (760) 743-1431

Fax: (760) 743-6455

 After Hours Phone: (760)
743-1431

Provider Gender: Female

NPI: 1083069611


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes



Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

D3. Directorio de proveedores especialistas

 Hours: M-F
8:00AM-5:00PM
 Website: N/A


FAMILY PRACTICE

MATSHE, ZENZIWE

Provider ID: 306033

Board Certified Specialty: No
ZENZIWE MATSHE

 460 N ELM ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8100
Fax: (760) 466-1373

 After Hours Phone: (760)
520-8100


Provider Gender: Female
NPI: 1285256073

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


GASTROENTEROLOGY

GARA, NAVEEN

Provider ID: 305691



Board Certified Specialty: No
NAVEEN GARA

 935 E PENNSYLVANIA AVE
ESCONDIDO, CA 92025

 Phone: (760) 690-2800
Fax: (949) 404-6908

 After Hours Phone: (760)
690-2800

Provider Gender: Male
NPI: 1942406533

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Hindi, Telugu
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, PALOMAR

MEDICAL CENTER, PALOMAR
HEALTH

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Website: N/A


GASTROENTEROLOGY

GARA, NAVEEN

Provider ID: 269145



Board Certified Specialty: No
NAVEEN GARA

 661 E PENNSYLVANIA AVE
ESCONDIDO, CA 92025

 Phone: (760) 690-2800
Fax: (760) 690-2801

 After Hours Phone: (760)
690-2800

Provider Gender: Male
NPI: 1942406533

 Provider English Spoken: Y
 Provider Language(s)


Spoken: Hindi, Telugu
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, PALOMAR
MEDICAL CENTER, PALOMAR
HEALTH

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

HEARING AID DEALER / SUPPLIER


ANDERSON, ELAINE


Provider ID: 268690

Board Certified Specialty: No
ELAINE ANDERSON

 330 W FELICITA AVE STE
A4

ESCONDIDO, CA 92025

 Phone: (760) 489-1323
Fax: (760) 489-0975

 After Hours Phone: (760)
489-1323


Provider Gender: Female
NPI: 1063558856

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERNAL MEDICINE

CHEN, ANDREW

Provider ID: 296830

Board Certified Specialty: No
ANDREW K CHEN

 2130 CITRACADO PKWYSTE
220

D3. Directorio de proveedores especialistas

ESCONDIDO, CA 92029
Phone: (760) 743-4789
Fax: (760) 743-8005
After Hours Phone: (760) 743-4789
Provider Gender: Male
NPI: 1134357007
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL, PALOMAR HEALTH, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

INTERNAL MEDICINE

MALEK, MIKHAIL

Provider ID: 296831
Board Certified Specialty: No
MIKHAIL R MALEK
2130 CITRACADO PKWYSTE 220
ESCONDIDO, CA 92029
Phone: (760) 743-0546
Fax: (760) 317-9769
After Hours Phone: (760) 743-0546
Provider Gender: Male
NPI: 1467455212
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER, PALOMAR HEALTH

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

INTERVENTIONAL

CARDIOLOGY

BAYAT, HAMED

Provider ID: 296843
Board Certified Specialty: No
HAMED BAYAT
2130 CITRACADO PKWYSTE 220
ESCONDIDO, CA 92029
Phone: (760) 743-0546
Fax: (760) 743-8837
After Hours Phone: (760) 743-0546

Provider Gender: Male
NPI: 1356344196
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi
Cultural Competency: N
Hospital Affiliation: PALOMAR HEALTH, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

INTERVENTIONAL

CARDIOLOGY

BAYAT, HAMED

Provider ID: 296842
Board Certified Specialty: No
HAMED BAYAT
2130 CITRACADO PKWYSTE 220
ESCONDIDO, CA 92029
Phone: (760) 743-0546
Fax: (760) 743-8837
After Hours Phone: (760) 743-0546
Provider Gender: Male
NPI: 1356344196
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi
Cultural Competency: N
Hospital Affiliation: PALOMAR HEALTH, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A



INTERVENTIONAL

CARDIOLOGY




MOHAMEDALI, BURHAN

Provider ID: 309248
Board Certified Specialty: No
BURHAN MOHAMEDALI
488 E VALLEY PKWY STE 107
ESCONDIDO, CA 92025
Phone: (760) 294-0480
Fax: (760) 294-0481
After Hours Phone: (760) 294-0480
Provider Gender: Male
NPI: 1831393289

D3. Directorio de proveedores especialistas

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Swahili
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
Adventist Health and Rideout
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999




American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
 Hours: M-F
9:00AM-5:00PM
 Website: N/A



INTERVENTIONAL CARDIOLOGY

SAWHNEY, NAVINDER




Provider ID: 304784
Board Certified Specialty: No
NAVINDER S SAWHNEY


 2130 CITRACADO PKWY STE
320
ESCONDIDO, CA 92029
 Phone: (858) 485-0130
Fax: (858) 485-9424
 After Hours Phone: (858)
485-0130
Provider Gender: Male
NPI: 1619174133




 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR
HEALTH, PALOMAR MEDICAL
CENTER, SCRIPPS MEMORIAL
HOSPITAL, SCRIPPS GREEN
HOSPITAL, UCSD MEDICAL
CTR, SHARP MEMORIAL
HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A




INTERVENTIONAL CARDIOLOGY **SUDHAKAR, DEEPTHI**

Provider ID: 309097
Board Certified Specialty: No
DEEPTHI SUDHAKAR
 488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025
 Phone: (760) 294-0480
Fax: (619) 616-2104
 After Hours Phone: (760)
294-0480
Provider Gender: Female
NPI: 1811307051

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp
Grossmont Hospital, SHARP
CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 15\99
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A




INTERVENTIONAL CARDIOLOGY **SUDHAKAR, DEEPTHI**

Provider ID: 295845
Board Certified Specialty: No
DEEPTHI SUDHAKAR
 488 E VALLEY PKWY STE
107
ESCONDIDO, CA 92025
 Phone: (760) 294-0480
Fax: (619) 616-2104
 After Hours Phone: (760)
294-0480
Provider Gender: Female
NPI: 1811307051

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp
Grossmont Hospital, SHARP
CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 15\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A


MATERNAL AND FETAL MEDICINE

MELBER, DORA

Provider ID: 296996
Board Certified Specialty: No
DORA J MELBER
 2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
 Phone: (858) 966-6710
Fax: (858) 966-6711
 After Hours Phone: (858)
966-6710
Provider Gender: Female
NPI: 1124413026

D3. Directorio de proveedores especialistas

 Provider English Spoken: Y American Sign Language (ASL): 8:00AM-5:00PM
 Provider Language(s) Spoken: Hungarian, Spanish N Website: N/A

Cultural Competency: N  Accessibility: CONTACT PROVIDER

Hospital Affiliation: UCSD LA  Hours: M-F 8:00AM-5:00PM

JOLLA JOHN SALLY  Website: N/A
THORNTON, UCSD MEDICAL

CTR, RADY CHILDRENS


HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8:00AM-5:00PM


 Website: N/A


MATERNAL AND FETAL MEDICINE

REIMERS, REBECCA

Provider ID: 294655

Board Certified Specialty: No
REBECCA M REIMERS

 2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029

 Phone: (858) 966-6710

Fax: (858) 966-6711

 After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1801207634

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19


NEONATAL / PERINATAL MEDICINE

LE, CRYSTAL

Provider ID: 283707

Board Certified Specialty: No
CRYSTAL N LE

 2185 CITRACADO PKWY
ESCONDIDO, CA 92029

 Phone: (442) 281-3193

Fax: (442) 281-3197

 After Hours Phone: (442)
281-3193

Provider Gender: Female

NPI: 1003028416

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SOUTHWEST
HEALTHCARE INLAND VALLEY

HOSPITAL, SOUTHWEST
HEALTHCARE RANCHO

SPRINGS HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL ENCINITAS

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F


NEONATAL / PERINATAL MEDICINE

SAUER, CHARLES

Provider ID: 206163

Board Certified Specialty: No
CHARLES W SAUER

 2185 CITRACADO PKWY
ESCONDIDO, CA 92029

 Phone: (442) 281-2850

Fax: (442) 281-2999

 After Hours Phone: (442)
281-2850

Provider Gender: Male

NPI: 1538388988

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,
PALOMAR MEDICAL CENTER,
SCRIPPS MERCY HOSPITAL


CHULA VISTA, PALOMAR
HEALTH, SCRIPPS MEMORIAL

HOSPITAL, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL,

SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE

INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER



D3. Directorio de proveedores especialistas

 Hours: M-F
8:00AM-5:00PM
 Website: N/A

NEONATAL / PERINATAL MEDICINE








SUTTNER, DENISE

Provider ID: 206137
Board Certified Specialty: No
DENISE M SUTTNER
 2185 CITRACADO PKWY
ESCONDIDO, CA 92029
 Phone: (442) 281-2850
Fax: (442) 281-2999
 After Hours Phone: (442)
281-2850
Provider Gender: Female
NPI: 1457433799
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, SOUTHWEST
HEALTHCARE INLAND VALLEY
HOSPITAL, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL, SCRIPPS MERCY
HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT

PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

NEONATAL / PERINATAL MEDICINE









SWEENEY, NATHALY

Provider ID: 283801
Board Certified Specialty: No
NATHALY M SWEENEY
 2185 CITRACADO PKWY
ESCONDIDO, CA 92029
 Phone: (442) 281-3193
Fax: (442) 281-3197
 After Hours Phone: (442)
281-3193
Provider Gender: Female
NPI: 1164572632
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO, PALOMAR MEDICAL
CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

NEPHROLOGY





AL-DAHAN, ZAID

Provider ID: 297898
Board Certified Specialty: No
ZAID G AL-DAHAN

 631 E GRAND AVE
ESCONDIDO, CA 92025
 Phone: (760) 294-1660
Fax: (760) 745-5016
 After Hours Phone: (760)
294-1660
Provider Gender: Male
NPI: 1740716828
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic
Cultural Competency: N
Hospital Affiliation: PALOMAR
MEDICAL CENTER, PALOMAR
HEALTH
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
9:00AM-5:00PM
 Website: N/A

NEUROLOGY

GOLD, JEFFREY

Provider ID: 277870
Board Certified Specialty: No
JEFFREY J GOLD
 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
 Phone: (760) 294-9260
Fax: (760) 294-9274
 After Hours Phone: (760)
294-9260
Provider Gender: Male
NPI: 1568773984
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY

D3. Directorio de proveedores especialistas


CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND, SHARP MEMORIAL
HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


NEUROLOGY

JINDAL, ANUJA

Provider ID: 277838

Board Certified Specialty: No
ANUJA V JINDAL

 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

 Phone: (760) 294-9260
Fax: (760) 294-9274

 After Hours Phone: (760)
294-9260

Provider Gender: Female

NPI: 1194046581

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A


NEUROLOGY


KIMMCMANUS, OLIVIA

Provider ID: 277873

Board Certified Specialty: No

OLIVIA S KIMMCMANUS

 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

 Phone: (858) 966-5819
Fax: (760) 294-9274

 After Hours Phone: (858)
966-5819

Provider Gender: Female

NPI: 1174870067

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:
UNIVERSITY OF CALIFORNIA
IRVINE MED CTR, CHILDRENS
HOSPITAL OF ORANGE
COUNTY, RADY CHILDRENS
HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

NEUROLOGY

ZIMBRIC, MICHAEL

Provider ID: 277891


Board Certified Specialty: No

MICHAEL R ZIMBRIC

 2125 CITRACADO PKWY

STE 100

ESCONDIDO, CA 92029

 Phone: (760) 294-9260
Fax: (760) 294-9274

 After Hours Phone: (760)
294-9260

Provider Gender: Male

NPI: 1487819546

 Provider English Spoken: Y

 Provider Language(s)
Spoken: French


Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


NEUROLOGY CHILD

SAHAGIAN, MICHELLE

Provider ID: 206076

Board Certified Specialty: No
MICHELLE L SAHAGIAN

 625 CITRACADO PKWY STE
100
ESCONDIDO, CA 92025

 Phone: (760) 294-9260
Fax: (760) 294-9274

 After Hours Phone: (760)
294-9260

Provider Gender: Female

NPI: 1275604035

 Provider English Spoken: Y


D3. Directorio de proveedores especialistas

Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*
9:00AM-5:00PM

 *Website: N/A*

OBSTETRICS / GYNECOLOGY


HINSHAW, PAUL

Provider ID: 277041


Board Certified Specialty: No
PAUL W HINSHAW

 488 E VALLEY PKWY STE 400

ESCONDIDO, CA 92025

 *Phone: (760) 658-6101*

Fax: (760) 658-6106

 *After Hours Phone: (760) 658-6101*

Provider Gender: Male

NPI: 1215170717


 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: PALOMAR MEDICAL CENTER

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-TH*
9:00AM-4:30PM
F 9:00AM-2:00PM

 *Website: N/A*

OBSTETRICS / GYNECOLOGY


HINSHAW, PAUL

Provider ID: 285629


Board Certified Specialty: No
PAUL W HINSHAW

 488 E VALLEY PKWY STE 400

ESCONDIDO, CA 92025

 *Phone: (760) 658-6101*

Fax: (760) 658-6106

 *After Hours Phone: (760) 658-6101*

Provider Gender: Male

NPI: 1215170717


 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: PALOMAR MEDICAL CENTER

Medi-Cal Open Panel: Yes
Min/Max Age: 16\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-TH*
9:00AM-4:30PM
F 9:00AM-2:00PM


 *Website: N/A*

OBSTETRICS / GYNECOLOGY


HINSHAW, PAUL

Provider ID: 277040

Board Certified Specialty: No
PAUL W HINSHAW

 1955 CITRACADO PKWY STE 302

ESCONDIDO, CA 92029

 *Phone: (760) 233-1896*

Fax: (760) 233-1899

 *After Hours Phone: (760) 233-1896*

Provider Gender: Male

NPI: 1215170717


 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: PALOMAR MEDICAL CENTER

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-TH*
9:00AM-4:30PM
F 9:00AM-2:00PM

 *Website: N/A*

OBSTETRICS / GYNECOLOGY


HINSHAW, PAUL

Provider ID: 285628

Board Certified Specialty: No
PAUL W HINSHAW

 1955 CITRACADO PKWY STE 302

ESCONDIDO, CA 92029

 *Phone: (760) 233-1896*

Fax: (760) 233-1899

 *After Hours Phone: (760) 233-1896*

Provider Gender: Male

NPI: 1215170717

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: PALOMAR MEDICAL CENTER

Medi-Cal Open Panel: Yes
Min/Max Age: 16\999

American Sign Language (ASL): N







 *Accessibility: CONTACT PROVIDER*



D3. Directorio de proveedores especialistas

 Hours: M-TH
9:00AM-4:30PM
F 9:00AM-2:00PM
 Website: N/A

OBSTETRICS / GYNECOLOGY

LAMALE-SMITH, LEAH









Provider ID: 285518
Board Certified Specialty: No
LEAH M LAMALE-SMITH
 2125 CITRACADO PKWY
STE 210
ESCONDIDO, CA 92029
 Phone: (760) 739-2921
Fax: (760) 739-3162
 After Hours Phone: (760)
739-2921
Provider Gender: Female
NPI: 1396904876
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, EISENHOWER MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM
 Website: N/A

OPHTHALMOLOGY

BANSAL, PREETI



Provider ID: 277883
Board Certified Specialty: No

PREETI BANSAL
 2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
 Phone: (760) 755-7600
Fax: (760) 755-7699
 After Hours Phone: (760)
755-7600
Provider Gender: Female
NPI: 1871664631
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Hindi
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT
HOSPITAL, SHARP MARY
BIRCH HOSP FOR WOMEN
AND NEWBORNS, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MEMORIAL
HOSPITAL, TRI CITY MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

OPHTHALMOLOGY





BHATIA, SHAGUN

Provider ID: 277877
Board Certified Specialty: No
SHAGUN K BHATIA
 2125 CITRACADO PKWY
STE 200

ESCONDIDO, CA 92029
 Phone: (760) 755-7600
Fax: (760) 755-7699
 After Hours Phone: (760)
755-7600
Provider Gender: Female
NPI: 1104237353
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

OPHTHALMOLOGY

HENNEIN, LAUREN

Provider ID: 297014
Board Certified Specialty: No
LAUREN M HENNEIN
 2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
 Phone: (760) 755-7600
Fax: (760) 755-7699
 After Hours Phone: (760)
755-7600
Provider Gender: Female
NPI: 1699216010
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

D3. Directorio de proveedores especialistas

DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OPHTHALMOLOGY


MOLL, ANGELA


Provider ID: 205895

Board Certified Specialty: No
ANGELA M MOLL

 625 CITRACADO PKWY STE
206

ESCONDIDO, CA 92025

 Phone: (760) 755-7600

 After Hours Phone: (760)
755-7600

Provider Gender: Female

NPI: 1861648602

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT
HOSPITAL, SHARP MEMORIAL
HOSPITAL, UCSF BENIOFF
CHILDREN'S HOSPITAL


OAKLAND, SCRIPPS MERCY
HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OPHTHALMOLOGY


MOLL, ANGELA

Provider ID: 277824

Board Certified Specialty: No
ANGELA M MOLL

 2125 CITRACADO PKWY
STE 200

ESCONDIDO, CA 92029

 Phone: (760) 755-7600

Fax: (760) 755-7699

 After Hours Phone: (760)
755-7600

Provider Gender: Female

NPI: 1861648602

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT
HOSPITAL, SHARP MEMORIAL
HOSPITAL, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND, SCRIPPS MERCY
HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OPHTHALMOLOGY


MOVAGHAR, MANSOOR

Provider ID: 277833

Board Certified Specialty: No
MANSOOR MOVAGHAR

 2125 CITRACADO PKWY
STE 200

ESCONDIDO, CA 92029

 Phone: (760) 755-7600

Fax: (760) 755-7699

 After Hours Phone: (760)
755-7600

Provider Gender: Male

NPI: 1497792220

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OPHTHALMOLOGY


OHALLORAN, HENRY

Provider ID: 277869

Board Certified Specialty: No
HENRY S OHALLORAN

 2125 CITRACADO PKWY
STE 200

ESCONDIDO, CA 92029

 Phone: (760) 755-7600

Fax: (760) 755-7699

 After Hours Phone: (760)
755-7600

Provider Gender: Male

D3. Directorio de proveedores especialistas

NPI: 1235287947

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation:


GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OPHTHALMOLOGY

SHEILS, CATHERINE

Provider ID: 305307

Board Certified Specialty: No
CATHERINE R SHEILS

 700 W EL NORTE PKWY
ESCONDIDO, CA 92026

 Phone: (800) 765-2737
Fax: (619) 291-6577

 After Hours Phone: (800)
765-2737

Provider Gender: Female

NPI: 1932605649

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes


Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

 Hours: M-TU
8:30AM-4:00PM
W-F 8:30AM-1:00PM

 Website: N/A

OPTOMETRIST


AOTO, KIM


Provider ID: 268719

Board Certified Specialty: No
KIM N AOTO

 830 W VALLEY PKWY STE
300



ESCONDIDO, CA 92025

 Phone: (800) 898-2020
Fax: (844) 897-3788

 After Hours Phone: (800)
898-2020

Provider Gender: Female

NPI: 1780935650

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Vietnamese


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OPTOMETRIST


AOTO, KIM

Provider ID: 296796

Board Certified Specialty: No
KIM N AOTO

 700 W EL NORTE PKWY
STE 200



ESCONDIDO, CA 92026

 Phone: (760) 743-5872
Fax: (760) 743-5879

 After Hours Phone: (760)
743-5872

Provider Gender: Female

NPI: 1780935650


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Vietnamese


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M 9:00AM-5:00PM
TU 8:30AM-4:30PM

W 7:30AM-4:30PM

TH 9:30AM-5:00PM

F 8:30AM-4:00PM

 Website: N/A


OPTOMETRIST

KOO, ANITA

Provider ID: 307411

Board Certified Specialty: No
ANITA K KOO

 1118 W VALLEY PKWY
ESCONDIDO, CA 92025

 Phone: (619) 425-7755
Fax: (619) 425-2138

 After Hours Phone: (619)
425-7755

Provider Gender: Female

NPI: 1669825667



 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999



American Sign Language (ASL):
N

D3. Directorio de proveedores especialistas

 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*

OPTOMETRIST

KOO, ANITA




Provider ID: 307410
Board Certified Specialty: No
ANITA K KOO
 1118 W VALLEY PKWY
ESCONDIDO, CA 92025
 *Phone: (619) 425-7755*
Fax: (619) 425-2138
 *After Hours Phone: (619) 425-7755*

Provider Gender: Female
NPI: 1669825667
 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*

OTOLARYNGOLOGY




BLISS, MORGAN





Provider ID: 277537
Board Certified Specialty: No
MORGAN R BLISS
 2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
 *Phone: (760) 755-7600*
Fax: (760) 755-7699
 *After Hours Phone: (760) 755-7600*
Provider Gender: Female
NPI: 1760707657
 *Provider English Spoken: Y*

Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

OTOLARYNGOLOGY









FRIESEN, TZYYNONG

Provider ID: 277853
Board Certified Specialty: No
TZYYNONG L FRIESEN
 2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
 *Phone: (760) 755-7600*
Fax: (760) 755-7699
 *After Hours Phone: (760) 755-7600*
Provider Gender: Female
NPI: 1952740177

 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*



OTOLARYNGOLOGY

JIANG, WEN

Provider ID: 277860
Board Certified Specialty: No
WEN A JIANG
 2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
 *Phone: (760) 755-7600*
Fax: (760) 755-7699
 *After Hours Phone: (760) 755-7600*
Provider Gender: Female
NPI: 1659305753
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Mandarin*
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*


OTOLARYNGOLOGY

LEUIN, SHELBY

Provider ID: 206110
Board Certified Specialty: No
SHELBY C LEUIN
 625 CITRACADO PKWY STE
206
ESCONDIDO, CA 92025
 *Phone: (760) 755-7600*
Fax: (760) 755-7699
 *After Hours Phone: (760) 755-7600*
Provider Gender: Female

D3. Directorio de proveedores especialistas


NPI: 1124230909


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


OTOLARYNGOLOGY

PATEL, VIJAY

Provider ID: 297038

Board Certified Specialty: No
VIJAY PATEL


 2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029

 Phone: (760) 755-7600
Fax: (760) 755-7699

 After Hours Phone: (760)
755-7600

Provider Gender: Male

NPI: 1508250747

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, VALLEY CHILDRENS
HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


PEDIATRIC CARDIOLOGY

DAVIS, CHRISTOPHER

Provider ID: 277811

Board Certified Specialty: No
CHRISTOPHER K DAVIS


 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

 Phone: (760) 294-9260
Fax: (760) 294-9274

 After Hours Phone: (760)
294-9260

Provider Gender: Male

NPI: 1760691950

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT

HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


PEDIATRIC CARDIOLOGY

HALEY, JESSICA

Provider ID: 277867

Board Certified Specialty: No
JESSICA E HALEY


 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

 Phone: (760) 294-9260
Fax: (760) 294-9274

 After Hours Phone: (760)
294-9260

Provider Gender: Female

NPI: 1023329885


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


PEDIATRIC CARDIOLOGY

HALEY, JESSICA

Provider ID: 205689

Board Certified Specialty: No
JESSICA E HALEY


 625 CITRACADO PKWY STE
100
ESCONDIDO, CA 92025

 Phone: (760) 294-9260
Fax: (760) 294-9274

 After Hours Phone: (760)
294-9260

Provider Gender: Female

NPI: 1023329885

 Provider English Spoken: Y
Cultural Competency: N


D3. Directorio de proveedores especialistas

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


PEDIATRIC CARDIOLOGY

NARAYAN, HARI

Provider ID: 277846

Board Certified Specialty: No
HARI K NARAYAN

 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

 Phone: (760) 294-9260
Fax: (760) 294-9274

 After Hours Phone: (760)
294-9260

Provider Gender: Male


NPI: 1376705707


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


PEDIATRIC CARDIOLOGY

SILVASEPULVEDA, JOSE

Provider ID: 206298

Board Certified Specialty: No
JOSE A SILVASEPULVEDA

 625 CITRACADO PKWY STE
100
ESCONDIDO, CA 92025

 Phone: (760) 294-9260
Fax: (760) 294-9274

 After Hours Phone: (760)
294-9260

Provider Gender: Male

NPI: 1417222472

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC EMERGENCY


MEDICINE


AGHILI, ROXANA

Provider ID: 303783

Board Certified Specialty: No
ROXANA AGHILI

 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

 Phone: (760) 739-1543
Fax: (760) 294-9274

 After Hours Phone: (760)
739-1543

Provider Gender: Female
NPI: 1851927883

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi

Cultural Competency: N


Hospital Affiliation: KAISER
FOUNDATION HOSPITAL SAN
DIEGO, RADY CHILDRENS
HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM


 Website: N/A


PEDIATRIC EMERGENCY **MEDICINE**

GORHAM, LAURA

Provider ID: 277851

Board Certified Specialty: No
LAURA M GORHAM

 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

 Phone: (760) 739-1543
Fax: (760) 294-9274

 After Hours Phone: (760)
739-1543

Provider Gender: Female

NPI: 1316162324

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

D3. Directorio de proveedores especialistas


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM


 Website: N/A


PEDIATRIC EMERGENCY MEDICINE


GROSS, MATTHEW

Provider ID: 297178

Board Certified Specialty: No
MATTHEW F GROSS

 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

 Phone: (760) 739-1543
Fax: (760) 294-9274

 After Hours Phone: (760)
739-1543

Provider Gender: Male

NPI: 1942223664

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM


 Website: N/A


PEDIATRIC EMERGENCY MEDICINE


MENDES, CHANTAL

Provider ID: 295670

Board Certified Specialty: No
CHANTAL M MENDES

 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

 Phone: (760) 739-1543
Fax: (760) 294-9274

 After Hours Phone: (760)
739-1543

Provider Gender: Female

NPI: 1134681265

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM


 Website: N/A


PEDIATRIC EMERGENCY MEDICINE


PARKER, SHERINE

Provider ID: 277872

Board Certified Specialty: No
SHERINE B PARKER

 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

 Phone: (760) 739-1543
Fax: (760) 294-9274

 After Hours Phone: (760)
739-1543

Provider Gender: Female

NPI: 1477626513

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, Spanish

Cultural Competency: N

Hospital Affiliation: GLENDALE
ADVENTIST MED CTR,

GLENDALE MEMORIAL HOSP

AND HEALTH CTR, TRI CITY

MEDICAL CTR, RADY

CHILDRENS HOSPITAL SAN

DIEGO, VALLEY CHILDRENS


HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE


QUINONES-PEREZ, BIANCA


Provider ID: 277810

Board Certified Specialty: No

BIANCA N QUINONES-PEREZ

 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029



 Phone: (760) 739-1543
Fax: (760) 294-9274


 After Hours Phone: (760)
739-1543

Provider Gender: Female

NPI: 1124360565

D3. Directorio de proveedores especialistas

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):



N
 *Accessibility: CONTACT PROVIDER*
 *Hours: SU 1:00PM-10:00PM M-F 4:00PM-10:00PM SA 1:00PM-10:00PM*
 *Website: N/A*

PEDIATRIC EMERGENCY

MEDICINE


TODD, SARAH




Provider ID: 302802
Board Certified Specialty: No
SARAH C TODD

 2125 CITRACADO PKWY STE 100 ESCONDIDO, CA 92029
 *Phone: (760) 739-1543*
Fax: (760) 294-9274

 *After Hours Phone: (760) 739-1543*

Provider Gender: Female
NPI: 1407299787

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RONALD REAGAN UCLA MED CTR, SANTA MONICA UCLA MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR



Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
 *Hours: SU 1:00PM-10:00PM M-F 4:00PM-10:00PM SA 1:00PM-10:00PM*
 *Website: N/A*

PEDIATRIC EMERGENCY

MEDICINE


VAIDYA, KAMALA

Provider ID: 205812
Board Certified Specialty: No
KAMALA VAIDYA

 625 CITRACADO PKWY STE 100 ESCONDIDO, CA 92025
 *Phone: (760) 739-1543*
Fax: (760) 294-9274

 *After Hours Phone: (760) 739-1543*


Provider Gender: Female
NPI: 1083840920


 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8:00AM-5:00PM*



 *Website: N/A*

PEDIATRIC EMERGENCY

MEDICINE


VAIDYA, KAMALA

Provider ID: 289412
Board Certified Specialty: No
KAMALA VAIDYA

 2125 CITRACADO PKWY STE 100 ESCONDIDO, CA 92029
 *Phone: (760) 739-1543*
Fax: (760) 294-9274


 *After Hours Phone: (760) 739-1543*


Provider Gender: Female
NPI: 1083840920

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

 *Hours: SU 1:00PM-10:00PM M-F 4:00PM-10:00PM SA 1:00PM-10:00PM*



 *Website: N/A*

PEDIATRIC

GASTROENTEROLOGY






CHU, CHRISTOPHER

Provider ID: 301643
Board Certified Specialty: No
CHRISTOPHER CHU

 2125 CITRACADO PKWY STE 100 ESCONDIDO, CA 92029
 *Phone: (760) 294-9260*
Fax: (760) 294-9274





 *After Hours Phone: (760)*




D3. Directorio de proveedores especialistas

294-9260
Provider Gender: Male
NPI: 1912369273
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Yue
Chinese
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PEDIATRICS

CAMERON, MELISSA



Provider ID: 205966
Board Certified Specialty: No
MELISSA A CAMERON
 2185 CITRACADO PKWY
ESCONDIDO, CA 92029
 Phone: (442) 281-2850
Fax: (442) 281-2999
 After Hours Phone: (442)
281-2850
Provider Gender: Female
NPI: 1902983752
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, PALOMAR MEDICAL
CENTER
Medi-Cal Open Panel: Yes


Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PEDIATRICS

FIGUEROA RODRIGUEZ, BRENDA





Provider ID: 306823
Board Certified Specialty: No
BRENDA L FIGUEROA
RODRIGUEZ
 425 N DATE ST
ESCONDIDO, CA 92025
 Phone: (833) 867-4642
Fax: (858) 633-4693
 After Hours Phone: (833)
867-4642
Provider Gender: Female
NPI: 1134205214




 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: Sharp
Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18

American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PHYSICAL MEDICINE / REHABILITATION



RICHARDSON, HENRY

Provider ID: 295277
Board Certified Specialty: No
HENRY A RICHARDSON
 1955 CITRACADO PKWY
STE 203
ESCONDIDO, CA 92029
 Phone: (760) 738-5533
Fax: (909) 204-7863
 After Hours Phone: (760)
738-5533
Provider Gender: Male
NPI: 1407052459
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, PALOMAR MEDICAL
CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PHYSICAL MEDICINE / REHABILITATION

RYAN, KYLE

Provider ID: 275660
Board Certified Specialty: No
KYLE J RYAN
 625 CITRACADO PKWY
ESCONDIDO, CA 92025
 Phone: (760) 294-9260
Fax: (760) 294-9274
 After Hours Phone: (760)

D3. Directorio de proveedores especialistas

294-9260
Provider Gender: Male
NPI: 1447645742
☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

PHYSICIANS ASSISTANT **CHATFIELD, ALEXANDRA**

Provider ID: 276716
Board Certified Specialty: No
ALEXANDRA J CHATFIELD
📍 1955 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
☎ Phone: (760) 743-4789
Fax: (858) 673-5187
📞 After Hours Phone: (760)
743-4789
Provider Gender: Female
NPI: 1215584628
☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

PHYSICIANS ASSISTANT

CORVINI, NICOLAS
Provider ID: 296999
Board Certified Specialty: No
NICOLAS A CORVINI
📍 425 N DATE ST
ESCONDIDO, CA 92025
☎ Phone: (760) 520-8300
Fax: (858) 633-4698
📞 After Hours Phone: (760)
520-8300
Provider Gender: Male
NPI: 1194242461
☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

PHYSICIANS ASSISTANT

FUNARI, CHRISTOPHER
Provider ID: 301993
Board Certified Specialty: No
CHRISTOPHER P FUNARI
📍 625 CITRACADO PKWY STE
108
ESCONDIDO, CA 92025
☎ Phone: (760) 743-1431
Fax: (760) 743-6455
📞 After Hours Phone: (760)
743-1431
Provider Gender: Male
NPI: 1982365490
☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A



PHYSICIANS ASSISTANT

GANGJI, SHAZMIN
Provider ID: 298110
Board Certified Specialty: No
SHAZMIN GANGJI
📍 460 N ELM ST
ESCONDIDO, CA 92025
☎ Phone: (760) 520-8100
Fax: (360) 462-2745
📞 After Hours Phone: (760)
520-8100
Provider Gender: Female
NPI: 1346763638
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 14\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

PHYSICIANS ASSISTANT

NIAKAMAL, EVAN
Provider ID: 291250
Board Certified Specialty: No
EVAN J NIAKAMAL
📍 425 N DATE ST
ESCONDIDO, CA 92025



D3. Directorio de proveedores especialistas

 Phone: (760) 520-8340
 Fax: (858) 633-4698
 After Hours Phone: (760) 520-8340
 Provider Gender: Male
 NPI: 1639796873
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PHYSICIANS ASSISTANT





RODRIGUES, ANNETTE




Provider ID: 302456
 Board Certified Specialty: No
 ANNETTE A RODRIGUES
 2125 CITRACADO PKWY STE 100
 ESCONDIDO, CA 92029
 Phone: (760) 294-9260
 Fax: (760) 294-9274
 After Hours Phone: (760) 294-9260
 Provider Gender: Female
 NPI: 1205381845
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL
 Medi-Cal Open Panel: No
 Min/Max Age: 0\19

American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PHYSICIANS ASSISTANT

WALSH, JOHN





Provider ID: 301971
 Board Certified Specialty: No
 JOHN T WALSH
 625 CITRACADO PKWY STE 108
 ESCONDIDO, CA 92025
 Phone: (760) 743-1431
 Fax: (760) 743-6455
 After Hours Phone: (760) 743-1431
 Provider Gender: Male
 NPI: 1386893089
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\999
 American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PHYSICIANS ASSISTANT



WRIGHT, DEREK

Provider ID: 302390
 Board Certified Specialty: No
 DEREK J WRIGHT
 1955 CITRACADO PKWY
 ESCONDIDO, CA 92029
 Phone: (760) 738-5533

Fax: (909) 204-7863
 After Hours Phone: (760) 738-5533
 Provider Gender: Male
 NPI: 1629674858
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

PODIATRIST

ALGHURAIBI, OHOUD

Provider ID: 295998
 Board Certified Specialty: No
 OHOUD E ALGHURAIBI
 460 N ELM ST
 ESCONDIDO, CA 92025
 Phone: (760) 520-8100
 Fax: (360) 462-2745
 After Hours Phone: (760) 520-8100
 Provider Gender: Female
 NPI: 1669842357
 Provider English Spoken: Y
 Provider Language(s) Spoken: Arabic
 Cultural Competency: N
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

D3. Directorio de proveedores especialistas


PODIATRIST

READ, TRENTON

Provider ID: 296654

Board Certified Specialty: No
TRENTON READ

 215 S HICKORY ST STE 118
ESCONDIDO, CA 92025


 Phone: (760) 480-1189

Fax: (858) 485-1515

 After Hours Phone: (760)
480-1189

Provider Gender: Male

NPI: 1952963431

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PODIATRIST

READ, TRENTON

Provider ID: 300882

Board Certified Specialty: No
TRENTON READ

 215 S HICKORY ST STE 118
ESCONDIDO, CA 92025


 Phone: (760) 480-1189

Fax: (858) 485-1515

 After Hours Phone: (760)
480-1189

Provider Gender: Male

NPI: 1952963431

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PSYCHOLOGIST

CARLTON-PENN, CORNELIA

Provider ID: 290406

Board Certified Specialty: No
CORNELIA J CARLTON-PENN

 425 N DATE ST
ESCONDIDO, CA 92025


 Phone: (760) 520-8340


Fax: (858) 633-4698

 After Hours Phone: (760)
520-8340

Provider Gender: Female

NPI: 1891720611

 Provider English Spoken: Y

 Provider Language(s)
Spoken: German


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PSYCHOLOGIST

ESTRADA PATINO, ANGELA

Provider ID: 296605

Board Certified Specialty: No
ANGELA J ESTRADA PATINO

 460 N ELM ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8100

Fax: (360) 462-2745

 After Hours Phone: (760)
520-8100

Provider Gender: Female

NPI: 1629339015

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 14\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

SA 8:00AM-0:00PM

 Website: N/A

PSYCHOLOGIST

SUOZZO, JOSEPH

Provider ID: 290758

Board Certified Specialty: No
JOSEPH M SUOZZO

 425 N DATE ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8340

Fax: (858) 633-4698

 After Hours Phone: (760)
520-8340

Provider Gender: Male

NPI: 1821013228

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

D3. Directorio de proveedores especialistas

American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

PSYCHOLOGIST **TEETER-WITT, ALYSSA**

Provider ID: 290779
Board Certified Specialty: No
ALYSSA TEETER-WITT

426 N DATE ST
ESCONDIDO, CA 92025
 Phone: (760) 690-5900
Fax: (858) 633-4693

After Hours Phone: (760) 690-5900
Provider Gender: Female
NPI: 1932308442

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

PSYCHOLOGIST **TEETER-WITT, ALYSSA**

Provider ID: 290891
Board Certified Specialty: No
ALYSSA TEETER-WITT

425 N DATE ST
ESCONDIDO, CA 92025
 Phone: (760) 520-8300
Fax: (858) 633-4698

After Hours Phone: (760) 520-8300
Provider Gender: Female
NPI: 1932308442

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

PSYCHOLOGIST **VALLEZ-BARLAM, ANDREA**

Provider ID: 290631
Board Certified Specialty: No
ANDREA VALLEZ-BARLAM

488 E VALLEY PKWY STE 404
ESCONDIDO, CA 92025
 Phone: (760) 466-9800
Fax: (858) 633-4693

After Hours Phone: (760) 466-9800
Provider Gender: Female
NPI: 1710902143

Provider English Spoken: Y
 Provider Language(s) Spoken: German, Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PSYCHOLOGIST
VALLEZ-BARLAM, ANDREA
Provider ID: 290630
Board Certified Specialty: No

ANDREA VALLEZ-BARLAM
 426 N DATE ST
ESCONDIDO, CA 92025
 Phone: (760) 690-5900
Fax: (858) 633-4693
 After Hours Phone: (760) 690-5900
Provider Gender: Female
NPI: 1710902143

Provider English Spoken: Y
 Provider Language(s) Spoken: German, Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Website: N/A



PSYCHOLOGIST
VAQUERO, JUANA
Provider ID: 290762
Board Certified Specialty: No
JUANA VAQUERO

425 N DATE ST
ESCONDIDO, CA 92025
 Phone: (760) 520-8300
Fax: (858) 633-4698

After Hours Phone: (760) 520-8300
Provider Gender: Female
NPI: 1023459708

Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

D3. Directorio de proveedores especialistas

 Accessibility: CONTACT PROVIDER
 Website: N/A


PSYCHOLOGIST

WOODWORTH, JENNIFER

Provider ID: 290634

Board Certified Specialty: No
JENNIFER WOODWORTH

 425 N DATE ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8340
Fax: (858) 633-4698

 After Hours Phone: (760) 520-8340

Provider Gender: Female


NPI: 1639362494


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


 Website: N/A


PULMONARY DISEASES

QUAN, MICHELE GRACE

Provider ID: 287097

Board Certified Specialty: No
MICHELE GRACE G QUAN


 2125 CITRACADO PKWY
STE 230
ESCONDIDO, CA 92029

 Phone: (760) 489-1458
Fax: (760) 489-1246

 After Hours Phone: (760) 489-1458

Provider Gender: Female

NPI: 1629462882

 Provider English Spoken: Y


Cultural Competency: N
Hospital Affiliation: REDLANDS
COMMUNITY HOSP

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


RADIATION ONCOLOGY

COLEMAN, LORI

Provider ID: 221090

Board Certified Specialty: No
LORI A COLEMAN



 2125 CITRACADO PKWY
STE 110
ESCONDIDO, CA 92029

 Phone: (760) 739-3371
Fax: (760) 739-3779

 After Hours Phone: (760) 739-3371

Provider Gender: Female

NPI: 1053348920

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP
CHULA VISTA MED CTR,

SHARP MEMORIAL HOSPITAL,
GROSSMONT HOSPITAL,


PALOMAR MEDICAL CENTER,
Sharp Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 19\100

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


RADIATION ONCOLOGY

VOLPP, PAUL

Provider ID: 221103

Board Certified Specialty: No
PAUL B VOLPP


 2125 CITRACADO PKWY
STE 110
ESCONDIDO, CA 92029

 Phone: (760) 739-3371
Fax: (760) 739-3779

 After Hours Phone: (760) 739-3371

Provider Gender: Male

NPI: 1225186232

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP

CHULA VISTA MED CTR,
GROSSMONT HOSPITAL,


PALOMAR MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 19\100

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-4:00PM

 Website: N/A


RADIOLOGY DIAGNOSTIC


VAKILIAN, SIAVOSH

Provider ID: 283206

D3. Directorio de proveedores especialistas

Board Certified Specialty: No
SIAVOSH VAKILIAN

 701 E GRAND AVE STE 200
ESCONDIDO, CA 92025

 Phone: (619) 230-0400

Fax: (858) 429-7936

 After Hours Phone: (619)
230-0400

Provider Gender: Male

NPI: 1427456151


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: PIONEERS
MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


REGISTERED PHYSICAL THERAPIST

MCGEE, JACQUELINE

Provider ID: 252473

Board Certified Specialty: No
JACQUELINE M MCGEE

 1815 E VALLEY PKWY STE 5
ESCONDIDO, CA 92027

 Phone: (760) 233-9655

Fax: (760) 233-9648

 After Hours Phone: (760)
233-9655



Provider Gender: Female

NPI: 1194217133

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 8\999

American Sign Language (ASL):  N
 After Hours Phone: (877)
757-8353

Provider Gender: Female

NPI: 1760546428

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, Armenian,
Farsi, Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 7:00AM-7:00PM
M-F 7:00AM-7:00PM


 Website: N/A

SPEECH PATHOLOGIST


DURNAN, CASSANDRA

Provider ID: 307881

Board Certified Specialty: No
CASSANDRA L DURNAN

 500 LA TERRAZA BLVD STE
150

ESCONDIDO, CA 92025


 Phone: (877) 757-8353

Fax: (818) 357-2505

 After Hours Phone: (877)
757-8353

Provider Gender: Female

NPI: 1073873501

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
7:00AM-6:00PM


 Website: N/A

SPEECH PATHOLOGIST


AROCHO-SALGADO, MIRELIS

Provider ID: 296931

Board Certified Specialty: No
MIRELIS AROCHO-SALGADO

 500 LA TERRAZA BLVD STE
150

ESCONDIDO, CA 92025

 Phone: (877) 757-8353

Fax: (818) 357-2505

 After Hours Phone: (877)
757-8353

Provider Gender: Female

NPI: 1063660165


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Website: N/A

SPEECH PATHOLOGIST


CLARK, MELISSA

Provider ID: 296924

Board Certified Specialty: No
MELISSA A CLARK



 500 LA TERRAZA BLVD STE
150

ESCONDIDO, CA 92025

 Phone: (877) 757-8353

Fax: (818) 357-2505



D3. Directorio de proveedores especialistas

PROVIDER
 *Hours: M-F 7:00AM-7:00PM*
 *Website: N/A*

SURGERY GENERAL

CASILLAS BERUMEN, SERGIO



Provider ID: 304606
Board Certified Specialty: No
**SERGIO G CASILLAS
 BERUMEN**

 1045 E PENNSYLVANIA
 AVE
 ESCONDIDO, CA 92025
 *Phone: (760) 884-4500*
Fax: (619) 483-3997

 *After Hours Phone: (760)
 884-4500*

Provider Gender: Male

NPI: 1437470762


 *Provider English Spoken: Y*
 *Provider Language(s)
 Spoken: Spanish*

Cultural Competency: N
*Hospital Affiliation: PALOMAR
 HEALTH, PARADISE VALLEY
 HOSPITAL, SCRIPPS MERCY
 HOSPITAL CHULA VISTA,
 SCRIPPS MERCY HOSPITAL,
 PALOMAR MEDICAL CENTER*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT
 PROVIDER*

 *Hours: M-F
 8:00AM-5:00PM*

 *Website: N/A*


SURGERY GENERAL

GROVE, JAY

Provider ID: 245226

Board Certified Specialty: No
JAY R GROVE

 2185 CITRACADO PKWY
 ESCONDIDO, CA 92029



 *Phone: (760) 300-3647*

Fax: (760) 482-1316

 *After Hours Phone: (760)
 300-3647*

Provider Gender: Male

NPI: 1912971334

 *Provider English Spoken: Y*
 *Provider Language(s)
 Spoken: Spanish*


Cultural Competency: N
*Hospital Affiliation: PALOMAR
 HEALTH, PALOMAR MEDICAL
 CENTER, TRI CITY MEDICAL
 CTR, SCRIPPS MEMORIAL
 HOSPITAL ENCINITAS,
 SCRIPPS MERCY HOSPITAL
 CHULA VISTA, SCRIPPS MERCY
 HOSPITAL*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

 *Accessibility: CONTACT
 PROVIDER*

 *Hours: M-F
 9:00AM-5:00PM*

 *Website: N/A*


SURGERY NEUROLOGICAL

HATEFI, DUSTIN

Provider ID: 310032

Board Certified Specialty: No
DUSTIN HATEFI

 2185 CITRACADO PKWY
 ESCONDIDO, CA 92029

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800)
 926-8273*

Provider Gender: Male

NPI: 1790072106


 *Provider English Spoken: Y*
Cultural Competency: N

*Hospital Affiliation:
 UNIVERSITY OF CALIFORNIA
 IRVINE MED CTR*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

 *Accessibility: CONTACT
 PROVIDER*

 *Website: N/A*

SURGERY ORTHOPEDIC


EDMONDS, ERIC

Provider ID: 277831

Board Certified Specialty: No
ERIC W EDMONDS

 2125 CITRACADO PKWY
 STE 100

ESCONDIDO, CA 92029

 *Phone: (760) 480-8770*

Fax: (760) 480-8811

 *After Hours Phone: (760)
 480-8770*

Provider Gender: Male

NPI: 1013048412

 *Provider English Spoken: Y*
Cultural Competency: N

*Hospital Affiliation: RADY
 CHILDRENS HOSPITAL SAN*

DIEGO, UCSF BENIOFF

CHILDREN'S HOSPITAL

OAKLAND

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):




D3. Directorio de proveedores especialistas

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A


SURGERY ORTHOPEDIC

KNUTSON, THOMAS



Provider ID: 296851
Board Certified Specialty: No
THOMAS R KNUTSON

 2130 CITRACADO PKWY STE 200
ESCONDIDO, CA 92029
 Phone: (760) 743-4789
Fax: (760) 743-4779
 After Hours Phone: (760) 743-4789

Provider Gender: Male
NPI: 1962409938

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999



American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER
 Website: N/A



SURGERY ORTHOPEDIC

SHARP, LORRA



Provider ID: 296808
Board Certified Specialty: No
LORRA M SHARP

 2130 CITRACADO PKWY STE 200
ESCONDIDO, CA 92029
 Phone: (760) 743-4789

Fax: (858) 385-1690
 After Hours Phone: (760) 743-4789
Provider Gender: Female
NPI: 1689689176

 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: POMONA VALLEY HOSP MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999



American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Website: N/A



SURGERY ORTHOPEDIC

SHARP, LORRA



Provider ID: 304761
Board Certified Specialty: No
LORRA M SHARP

 2130 CITRACADO PKWY STE 220
ESCONDIDO, CA 92029
 Phone: (760) 743-0546
Fax: (760) 317-9769

 After Hours Phone: (760) 743-0546
Provider Gender: Female
NPI: 1689689176

 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: POMONA VALLEY HOSP MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999



American Sign Language (ASL):


N
 Accessibility: CONTACT PROVIDER
 Website: N/A


SURGERY PEDIATRIC

KLING, KAREN

Provider ID: 206130
Board Certified Specialty: No
KAREN M KLING

 625 CITRACADO PKWY STE 206
ESCONDIDO, CA 92025
 Phone: (760) 755-7600
Fax: (760) 755-7699

 After Hours Phone: (760) 755-7600
Provider Gender: Female
NPI: 1982775144

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, NATIONAL NAVAL MED CTR, SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

FALLBROOK

CERTIFIED ACUPUNCTURIST

D3. Directorio de proveedores especialistas

CRAFT, KEVIN

Provider ID: 290943

Board Certified Specialty: No
KEVIN E CRAFT

📍 1309 S MISSION RD
FALLBROOK, CA 92028

☎ Phone: (760) 690-5900
Fax: (760) 731-1063

🕒 After Hours Phone: (760)
690-5900

Provider Gender: Male

NPI: 1659745610

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: TU-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

GUIDI, CASEY

Provider ID: 296010

Board Certified Specialty: No
CASEY L GUIDI

📍 1328 S MISSION RD
FALLBROOK, CA 92028

☎ Phone: (760) 451-4730
Fax: (760) 457-4700

🕒 After Hours Phone: (760)
451-4730

Provider Gender: Female

NPI: 1013349919

☐ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

KELLEHER, BRIDGET

Provider ID: 298086

Board Certified Specialty: No
BRIDGET M KELLEHER

📍 321 E ALVARADO ST
FALLBROOK, CA 92028

☎ Phone: (760) 723-6200
Fax: (760) 414-3892

🕒 After Hours Phone: (760)
723-6200

Provider Gender: Female

NPI: 1245695006

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-TH
8:00AM-8:00PM

F 8:00AM-5:00PM
SA 9:00AM-4:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

KELLEHER, BRIDGET

Provider ID: 299775

Board Certified Specialty: No
BRIDGET M KELLEHER

📍 321 E ALVARADO ST
FALLBROOK, CA 92028

☎ Phone: (760) 723-6200
Fax: (760) 414-3892

🕒 After Hours Phone: (760)
723-6200

Provider Gender: Female

NPI: 1245695006

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-TH
8:00AM-8:00PM

F 8:00AM-5:00PM
SA 9:00AM-4:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

STOJANOVSKA, JOVANA

Provider ID: 301367

Board Certified Specialty: No
JOVANA STOJANOVSKA

📍 1328 S MISSION RD
FALLBROOK, CA 92028

☎ Phone: (760) 451-4720
Fax: (760) 457-4700

🕒 After Hours Phone: (760)
451-4720

D3. Directorio de proveedores especialistas

Provider Gender: Female

NPI: 1215638499


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE PRACTITIONER

TAYLOR, CHRISTOPHER

Provider ID: 302118

Board Certified Specialty: No
CHRISTOPHER TAYLOR

 321 E ALVARADO ST
FALLBROOK, CA 92028

 Phone: (760) 723-6200
Fax: (760) 414-3892

 After Hours Phone: (760)
723-6200

Provider Gender: Male

NPI: 1851747166


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH
8:00AM-4:00PM

 Website: N/A


CERTIFIED NURSE PRACTITIONER

TAYLOR, CHRISTOPHER

Provider ID: 299407

Board Certified Specialty: No
CHRISTOPHER TAYLOR

 321 E ALVARADO ST
FALLBROOK, CA 92028

 Phone: (760) 723-6200
Fax: (760) 414-3892

 After Hours Phone: (760)
723-6200

Provider Gender: Male

NPI: 1851747166


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 5\100

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH
8:00AM-4:00PM

 Website: N/A


CHIROPRACTOR

FARSHLER, ANTHONY

Provider ID: 290306

Board Certified Specialty: No
ANTHONY J FARSHLER

 1309 S MISSION RD
FALLBROOK, CA 92028

 Phone: (760) 690-5900
Fax: (760) 731-1063

 After Hours Phone: (760)
690-5900

Provider Gender: Male

NPI: 1841627759

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


CHIROPRACTOR

HALVORSON, PAULA

Provider ID: 298338

Board Certified Specialty: No
PAULA HALVORSON


 1309 S MISSION RD
FALLBROOK, CA 92028

 Phone: (760) 690-5900
Fax: (760) 731-1063

 After Hours Phone: (760)
690-5900

Provider Gender: Female


NPI: 1275542193


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: TU 8:00AM-5:00PM
TH-F 8:00AM-5:00PM

 Website: N/A


FAMILY PRACTICE


CHRISTIE, PATRICIA

Provider ID: 299526

Board Certified Specialty: No
PATRICIA L CHRISTIE

 1328 S MISSION RD
FALLBROOK, CA 92028

 Phone: (760) 451-4720
Fax: (760) 457-4700

 After Hours Phone: (760)
451-4720

Provider Gender: Female

D3. Directorio de proveedores especialistas


NPI: 1881625531


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:30PM

 Website: N/A


OPTOMETRIST

BULLUM, ANTHONY


Provider ID: 290329

Board Certified Specialty: No
ANTHONY J BULLUM

 1328 S MISSION RD
FALLBROOK, CA 92028

 Phone: (760) 451-4720

Fax: (760) 457-4700

 After Hours Phone: (760)
451-4720

Provider Gender: Male


NPI: 1992773956


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PEDIATRICS

ROBINSON, DAISY

Provider ID: 298311

Board Certified Specialty: No
DAISY A ROBINSON

 321 E ALVARADO ST
FALLBROOK, CA 92028


 Phone: (760) 723-6200

Fax: (760) 414-3892

 After Hours Phone: (760)
723-6200

Provider Gender: Female

NPI: 1659389740

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH
8:00AM-4:00PM

 Website: N/A


PEDIATRICS

SMITH, LINDA

Provider ID: 308731

Board Certified Specialty: No
LINDA B SMITH

 1328 S MISSION RD
FALLBROOK, CA 92028

 Phone: (760) 451-4720


Fax: (760) 451-4700

 After Hours Phone: (760)
451-4720

Provider Gender: Female

NPI: 1881665800

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SHARP MEMORIAL
HOSPITAL, SHARP MARY
BIRCH HOSP FOR WOMEN
AND NEWBORNS


Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:30PM

 Website: N/A

HEMET

PHYSICIANS ASSISTANT


SMITH, KELLI


Provider ID: 272953

Board Certified Specialty: No
KELLI A SMITH

 3853 W STETSON AVE STE
200

HEMET, CA 92545

 Phone: (951) 225-6802

 After Hours Phone: (951)
225-6802

Provider Gender: Female

NPI: 1841771664


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

D3. Directorio de proveedores especialistas

IMPERIAL BEACH

CERTIFIED NURSE PRACTITIONER

BORRAJERO, OBEL

Provider ID: 303242

Board Certified Specialty: No

OBEL M BORRAJERO

949 PALM AVE
IMPERIAL BEACH, CA 91932

Phone: (619) 429-3733

Fax: (619) 628-5550

After Hours Phone: (619)
429-3733

Provider Gender: Male

NPI: 1093280588

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE PRACTITIONER

CUNNINGHAM, STEPHANIE

Provider ID: 301310

Board Certified Specialty: No

STEPHANIE L CUNNINGHAM

949 PALM AVE
IMPERIAL BEACH, CA 91932

Phone: (619) 429-3733

Fax: (619) 628-5550

After Hours Phone: (619)

429-3733

Provider Gender: Female

NPI: 1174223655

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-5:00PM

Website: N/A

CERTIFIED NURSE PRACTITIONER

O'CONNELL, STEFANY

Provider ID: 296845

Board Certified Specialty: No

STEFANY I O'CONNELL

949 PALM AVE
IMPERIAL BEACH, CA 91932

Phone: (619) 429-3733

Fax: (619) 628-5550

After Hours Phone: (619)
429-3733

Provider Gender: Female

NPI: 1386378479

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE PRACTITIONER

THYGERSEN, ALAYSA

Provider ID: 297909

Board Certified Specialty: No

ALAYSA L THYGERSEN

949 PALM AVE
IMPERIAL BEACH, CA 91932

Phone: (619) 429-3733

Fax: (619) 628-5550

After Hours Phone: (619)
429-3733

Provider Gender: Female

NPI: 1760107767

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

FAMILY PRACTICE

SUMMERS-DAY, COURTNEY

Provider ID: 290977

Board Certified Specialty: No

COURTNEY A SUMMERS-DAY

949 PALM AVE
IMPERIAL BEACH, CA 91932

Phone: (619) 429-3733

Fax: (619) 628-5550

After Hours Phone: (619)
429-3733

Provider Gender: Female

NPI: 1124288873

Provider English Spoken: Y







Provider Language(s)

D3. Directorio de proveedores especialistas

Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*

INTERNAL MEDICINE

RYAN, DANA


Provider ID: 298099
Board Certified Specialty: No
DANA A RYAN
 949 PALM AVE
IMPERIAL BEACH, CA 91932
 *Phone: (619) 429-3733*
Fax: (619) 628-5550
 *After Hours Phone: (619) 429-3733*
Provider Gender: Female
NPI: 1780609990
 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M 8:30AM-8:00PM*
TU-W 8:30AM-5:00PM
TH 8:30AM-8:00PM
F 8:30AM-5:00PM
 *Website: N/A*

REGISTERED PHYSICAL

THERAPIST

CHENG, BRANDON

Provider ID: 304530
Board Certified Specialty: No
BRANDON G CHENG
 600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
 *Phone: (619) 332-4200*
Fax: (613) 332-4220
 *After Hours Phone: (619) 332-4200*
Provider Gender: Male
NPI: 1336894724





 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N





 *Accessibility: CONTACT PROVIDER*
 *Hours: M-TH*
7:00AM-7:00PM
F 7:00AM-5:00PM
SA 8:00AM-1:00PM
 *Website: N/A*

REGISTERED PHYSICAL

THERAPIST









JIMENEZ, ANDREA

Provider ID: 301973
Board Certified Specialty: No
ANDREA L JIMENEZ
 600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
 *Phone: (619) 482-3000*
Fax: (619) 332-4220
 *After Hours Phone: (619) 482-3000*
Provider Gender: Female
NPI: 1407440670
 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

REGISTERED PHYSICAL THERAPIST

JIMENEZ, ANDREA

Provider ID: 299890
Board Certified Specialty: No
ANDREA L JIMENEZ
 600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
 *Phone: (619) 482-3000*
Fax: (619) 332-4220
 *After Hours Phone: (619) 482-3000*
Provider Gender: Female
NPI: 1407440670
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

REGISTERED PHYSICAL

D3. Directorio de proveedores especialistas

THERAPIST

KARANDE, PRACHI

Provider ID: 287101

Board Certified Specialty: No
PRACHI KARANDE

600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932

Phone: (619) 482-3000

Fax: (619) 482-3001

After Hours Phone: (619)
482-3000

Provider Gender: Female

NPI: 1699357525

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
7:00AM-6:00PM

Website: N/A

REGISTERED PHYSICAL

THERAPIST

NGUYEN, TIA

Provider ID: 305016

Board Certified Specialty: No
TIA NGUYEN

600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932

Phone: (619) 482-3000

Fax: (619) 332-4220

After Hours Phone: (619)
482-3000

Provider Gender: Female

NPI: 1457136269

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
7:00AM-7:00PM
F 7:00AM-4:00PM

Website: N/A

REGISTERED PHYSICAL

THERAPIST

NGUYEN, TIA

Provider ID: 305015

Board Certified Specialty: No
TIA NGUYEN

600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932

Phone: (619) 482-3000

Fax: (619) 332-4220

After Hours Phone: (619)
482-3000

Provider Gender: Female

NPI: 1457136269

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
7:00AM-7:00PM
F 7:00AM-4:00PM

Website: N/A

REGISTERED PHYSICAL

THERAPIST

NOVENCIDO, ANDREW

Provider ID: 301995

Board Certified Specialty: No

ANDREW NOVENCIDO

600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932

Phone: (619) 482-3000

Fax: (619) 332-4220

After Hours Phone: (619)
482-3000

Provider Gender: Male

NPI: 1447723937

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

REGISTERED PHYSICAL

THERAPIST

NOVENCIDO, ANDREW

Provider ID: 286783

Board Certified Specialty: No
ANDREW NOVENCIDO

600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932

Phone: (619) 482-3000

Fax: (619) 332-4220

After Hours Phone: (619)
482-3000

Provider Gender: Male

NPI: 1447723937

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT

D3. Directorio de proveedores especialistas

PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

REGISTERED PHYSICAL THERAPIST

SPARKS, TODD

Provider ID: 301109
Board Certified Specialty: No
TODD M SPARKS

600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
Phone: (619) 482-3000
Fax: (619) 332-4220
After Hours Phone: (619)
482-3000

Provider Gender: Male

NPI: 1265481139

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M 7:00AM-7:00PM
TU 7:00AM-0:00PM
W-TH 7:00AM-7:00PM
F 7:00AM-0:00PM

Website: N/A

REGISTERED PHYSICAL THERAPIST

SUGGS, SARAH

Provider ID: 298365
Board Certified Specialty: No
SARAH SUGGS

600 PALM AVE STE 126

IMPERIAL BEACH, CA 91932
Phone: (619) 482-3000
Fax: (619) 332-4220

After Hours Phone: (619)
482-3000

Provider Gender: Female

NPI: 1083353650

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 7:00AM-7:00PM

Website: N/A

REGISTERED PHYSICAL THERAPIST

SUGGS, SARAH

Provider ID: 301429
Board Certified Specialty: No
SARAH SUGGS

600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
Phone: (619) 482-3000
Fax: (619) 332-4220

After Hours Phone: (619)
482-3000

Provider Gender: Female

NPI: 1083353650

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F 7:00AM-7:00PM

Website: N/A

REGISTERED PHYSICAL THERAPIST

VILLANUEVA, GIOVANNI

Provider ID: 301531
Board Certified Specialty: No
GIOVANNI X VILLANUEVA

600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
Phone: (619) 482-3000
Fax: (619) 332-4220

After Hours Phone: (619)
482-3000

Provider Gender: Male

NPI: 1063046878

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
7:00AM-7:00PM
F 7:00AM-5:00PM

Website: N/A

LA JOLLA

ANESTHESIOLOGY

ALEXANDER, BRENTON

Provider ID: 242302
Board Certified Specialty: No
BRENTON S ALEXANDER

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800)
926-8273

D3. Directorio de proveedores especialistas

Provider Gender: Male

NPI: 1811366644


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


ANESTHESIOLOGY

BECERRA SONGOLO, TOSHA

Provider ID: 300067

Board Certified Specialty: No
TOSHA D BECERRA SONGOLO

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female


NPI: 1265938724

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


ANESTHESIOLOGY


BRUNO, KELLY

Provider ID: 238904

Board Certified Specialty: No
KELLY A BRUNO

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1891130993

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


ANESTHESIOLOGY

CHAN, CHI-BEW

Provider ID: 310045

Board Certified Specialty: No
CHI-BEW CHAN

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1205966264

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
GROSSMONT HOSPITAL,
SHARP MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
TRI CITY MEDICAL CTR, SHARP
MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,
DAMERON HOSPITAL ASSOC,
DAMERON HOSPITAL ASSOC,
SHARP CHULA VISTA MED
CTR, SHARP CORONADO
HOSP AND HEALTHCARE CTR,
SCRIPPS MEMORIAL
HOSPITAL ENCINITAS
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):

 Accessibility: CONTACT
PROVIDER

 Website: N/A


ANESTHESIOLOGY


CURRAN, BRIAN

Provider ID: 239003

Board Certified Specialty: No
BRIAN P CURRAN


 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1710373642

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

D3. Directorio de proveedores especialistas


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


ANESTHESIOLOGY

FEJLEH, ASHLEY

Provider ID: 269503

Board Certified Specialty: No
ASHLEY N FEJLEH

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1609353465

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


ANESTHESIOLOGY

FUNDINGSLAND, BRENT


Provider ID: 280469

Board Certified Specialty: No
BRENT W FUNDINGSLAND

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1831166560

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

ENCINITAS, SADDLEBACK

MEMORIAL MED CTR, UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


ANESTHESIOLOGY


HOSALKAR, HETAL

Provider ID: 243370

Board Certified Specialty: No
HETAL H HOSALKAR



 9415 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1861556821

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Farsi, Gujarati,
Hindi

Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A



ANESTHESIOLOGY

HYLTON, DIANA

Provider ID: 241736


Board Certified Specialty: No
DIANA J HYLTON

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1932527751

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, SOUTHWEST
HEALTHCARE INLAND VALLEY

HOSPITAL, SOUTHWEST
HEALTHCARE RANCHO

SPRINGS HOSPITAL

Medi-Cal Open Panel: Yes



Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

D3. Directorio de proveedores especialistas

 Hours: M-F
8:00AM-5:00PM
 Website: N/A

ANESTHESIOLOGY


MEYER, MEGAN

Provider ID: 239608
Board Certified Specialty: No
MEGAN S MEYER

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1720473044


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Hours: M-F
8:00AM-5:00PM

 Website: N/A

ANESTHESIOLOGY


NGUYEN, QUOC SY

Provider ID: 242189
Board Certified Specialty: No
QUOC-SY NGUYEN

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1871911644

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


ANESTHESIOLOGY

OKAMOTO, VINCENT

Provider ID: 245952
Board Certified Specialty: No
VINCENT R OKAMOTO

 9415 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1952338709

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, ALVARADO
HOSPITAL LLC, SOUTHWEST


HEALTHCARE INLAND VALLEY
HOSPITAL, UCSD LA JOLLA
JOHN SALLY THORNTON,
UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


ANESTHESIOLOGY

OSWALD, JESSICA

Provider ID: 239601
Board Certified Specialty: No
JESSICA C OSWALD

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1427315118

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

ANESTHESIOLOGY

SHAW, SUSANNA

Provider ID: 255317
Board Certified Specialty: No

D3. Directorio de proveedores especialistas

SUSANNA J SHAW

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1063685477

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

ANESTHESIOLOGY

SORIA, CLAIRE

Provider ID: 243295

Board Certified Specialty: No
CLAIRE S SORIA

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1447516414

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

ANESTHESIOLOGY

SUYDAM, STEVEN

Provider ID: 286570

Board Certified Specialty: No
STEPHEN M SUYDAM

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1386856821

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,

GROSSMONT HOSPITAL,
SHARP MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,
TRI CITY MEDICAL CTR, SHARP

MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,

SHARP CHULA VISTA MED
CTR, SHARP CHULA VISTA

MED CTR, SHARP CORONADO
HOSP AND HEALTHCARE CTR,

RADY CHILDRENS HOSPITAL
SAN DIEGO, SCRIPPS GREEN

HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

ANESTHESIOLOGY

TRIVEDI, SURAJ

Provider ID: 246750

Board Certified Specialty: No
SURAJ S TRIVEDI

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1699057885

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

ANESTHESIOLOGY

TSUDA, PAIGE

D3. Directorio de proveedores especialistas

Provider ID: 271683

Board Certified Specialty: No
PAIGE S TSUDA

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1003261595

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

ANESTHESIOLOGY

TULLY, JEFFREY

Provider ID: 283690

Board Certified Specialty: No
JEFFREY L TULLY

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1871912493

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UC DAVIS

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,

UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

ANESTHESIOLOGY

TZENG, ERIC

Provider ID: 284578

Board Certified Specialty: No
ERIC TZENG

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1801258264

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

ANESTHESIOLOGY

WANG, MICHELLE

Provider ID: 286139

Board Certified Specialty: No
MICHELLE Y WANG

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1659802965

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

ANESTHESIOLOGY

YODER, ANDREA

Provider ID: 272805

Board Certified Specialty: No
ANDREA R YODER

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

D3. Directorio de proveedores especialistas

Provider Gender: Female
NPI: 1629463104

☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

ANESTHESIOLOGY **YOUNAN, LAWRENCE**

Provider ID: 240871
Board Certified Specialty: No
LAWRENCE J YOUNAN
📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
🕒 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1922432475
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F

8:00AM-5:00PM
🌐 Website: N/A

ANESTHESIOLOGY PAIN **MANAGEMENT**

CASTELLANOS, JOEL
Provider ID: 243554
Board Certified Specialty: No
JOEL P CASTELLANOS
📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
🕒 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1700296514
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

CARDIOVASCULAR DISEASE **KEEN, WILLIAM**

Provider ID: 291303
Board Certified Specialty: No
WILLIAM D KEEN
📍 9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
☎ Phone: (800) 926-8372
📠 Fax: (888) 539-8781
🕒 After Hours Phone: (800)
926-8372

Provider Gender: Male
NPI: 1962561571

☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A

CARDIOVASCULAR DISEASE **MIZZELL, ANNA**

Provider ID: 214021
Board Certified Specialty: No
ANNA M MIZZELL
📍 9434 MEDICAL CENTER DR
FL 1
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
🕒 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1851561021
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

CARDIOVASCULAR DISEASE **PHREANER, NICHOLAS**

D3. Directorio de proveedores especialistas

Provider ID: 224864

Board Certified Specialty: No

NICHOLAS J PHREANER

9434 MEDICAL CENTER DR
FL 1
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1023373040

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CARDIOVASCULAR DISEASE

SHAPIRO, HILARY

Provider ID: 300000

Board Certified Specialty: No

HILARY A SHAPIRO

9434 MEDICAL CENTER DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1811382815

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED ACUPUNCTURIST

ARELLANO, JACQUELINE

Provider ID: 304140

Board Certified Specialty: No

JACQUELINE ARELLANO

8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1104129485

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED ACUPUNCTURIST

ARELLANO, JACQUELINE

Provider ID: 304141

Board Certified Specialty: No

JACQUELINE ARELLANO

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1104129485

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED ACUPUNCTURIST

ARELLANO, JACQUELINE

Provider ID: 304136

Board Certified Specialty: No

JACQUELINE ARELLANO

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1104129485

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED ACUPUNCTURIST

D3. Directorio de proveedores especialistas

JULIAN, FIDES

Provider ID: 304135

Board Certified Specialty: No
FIDES Q JULIAN

📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1407401128

🗨 Provider English Spoken: Y

🗨 Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

CERTIFIED ACUPUNCTURIST

JULIAN, FIDES

Provider ID: 304130

Board Certified Specialty: No
FIDES Q JULIAN

📍 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1407401128

🗨 Provider English Spoken: Y

🗨 Provider Language(s)

Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

CERTIFIED ACUPUNCTURIST

JULIAN, FIDES

Provider ID: 304134

Board Certified Specialty: No
FIDES Q JULIAN

📍 8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1407401128

🗨 Provider English Spoken: Y

🗨 Provider Language(s)

Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

AGYEMANG, ALBERTA

Provider ID: 265131

Board Certified Specialty: No
AGYEMANG A AGYEMANG

📍 8939 VILLA LA JOLLA DR
LA JOLLA, CA 92037

☎ Phone: (858) 657-8000

Fax: (858) 657-8387

🕒 After Hours Phone: (858)
657-8000

Provider Gender: Female

NPI: 1023400082

🗨 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

AGYEMANG, ALBERTA

Provider ID: 265130

Board Certified Specialty: No
AGYEMANG A AGYEMANG

📍 9350 CAMPUS POINT DR
STE 2B

LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

D3. Directorio de proveedores especialistas

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1023400082

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


BOUELLE, AMY


Provider ID: 243485

Board Certified Specialty: No
AMY L BOUELLE

 8910 VILLA LA JOLLA DR
STE 200

LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1609117704

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER


BRADY, KATELYN

Provider ID: 209017

Board Certified Specialty: No
KATELYN A BRADY

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1952797540


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


BUENROSTRO, CHRISTINA


Provider ID: 243717

Board Certified Specialty: No
CHRISTINA BUENROSTRO

 8910 VILLA LA JOLLA DR
STE 200

LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1851749253

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER


CAPOZZI, JENNIFER

Provider ID: 241030

Board Certified Specialty: No
JENNIFER E CAPOZZI

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1336258276

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

D3. Directorio de proveedores especialistas

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

CONNER, PAMELA

Provider ID: 299931

Board Certified Specialty: No
PAMELA M CONNER

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1770558967


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


CONNER, PAMELA

Provider ID: 299932

Board Certified Specialty: No
PAMELA M CONNER

 9350 CAMPUS POINT DR

LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1770558967

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


CONNOR, CAROLINE

Provider ID: 279834

Board Certified Specialty: No
CAROLINE L CONNOR

 8910 VILLA LA JOLLA DR
STE 200

LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1609081710

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


CZYPULL, MONICA

Provider ID: 284662


Board Certified Specialty: No
MONICA CZYPULL

 9850 GENESEE AVE STE
320

LA JOLLA, CA 92037

 Phone: (858) 554-1212

Fax: (858) 795-1195

 After Hours Phone: (858)
554-1212

Provider Gender: Female

NPI: 1831784842


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

DAVIES, SUMMER


Provider ID: 253691


Board Certified Specialty: No
SUMMER R DAVIES

D3. Directorio de proveedores especialistas

 8910 VILLA LA JOLLA DR
STE 100

LA JOLLA, CA 92037

 Phone: (858) 249-6800

 Fax: (858) 657-6420

 After Hours Phone: (858)
249-6800

Provider Gender: Female

NPI: 1679850671

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL


CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


DAVIES, SUMMER


Provider ID: 238922

Board Certified Specialty: No

SUMMER R DAVIES

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (858) 657-7600

 After Hours Phone: (858)
657-7600

Provider Gender: Female

NPI: 1679850671

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


DE DIOS, SARAH JANE


Provider ID: 300052

Board Certified Specialty: No

SARAH JANE J DE DIOS

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1528632742

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP


CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

DIMAIRA, FRANCESCA


Provider ID: 245580


Board Certified Specialty: No

FRANCESCA DIMAIRA

 3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1346670718

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL


CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


DIMAIRA, FRANCESCA


Provider ID: 245579

Board Certified Specialty: No

FRANCESCA DIMAIRA

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1346670718

 Provider English Spoken: Y
Cultural Competency: N


D3. Directorio de proveedores especialistas

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE


PRACTITIONER

DRISCOLL, KARRIE

Provider ID: 286376

Board Certified Specialty: No
KARRIE A DRISCOLL

 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

 Phone: (858) 822-6277
Fax: (858) 228-1731

 After Hours Phone: (858)
822-6277


Provider Gender: Female
NPI: 1396085098

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

GARTH, MELISSA

Provider ID: 268991

Board Certified Specialty: No
MELISSA A GARTH

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1689232977

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

GARTH, MELISSA

Provider ID: 268992


Board Certified Specialty: No
MELISSA A GARTH

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1689232977

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

GIOVANNETTI, ERIN

Provider ID: 276002

Board Certified Specialty: No
ERIN R GIOVANNETTI

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1013317767

 Provider English Spoken: Y
Cultural Competency: N




Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N



D3. Directorio de proveedores especialistas

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*



CERTIFIED NURSE PRACTITIONER



GOMEZ, LESLIE

Provider ID: 299469
Board Certified Specialty: No
LESLIE N GOMEZ

 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*
Provider Gender: Female
NPI: 1528578713


 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Spanish*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*
 *Website: N/A*

CERTIFIED NURSE PRACTITIONER

GOMEZ, LESLIE



Provider ID: 299470
Board Certified Specialty: No
LESLIE N GOMEZ

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Female
NPI: 1528578713


 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N
Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Website: N/A*

CERTIFIED NURSE PRACTITIONER



GOMEZ, LESLIE

Provider ID: 299465
Board Certified Specialty: No
LESLIE N GOMEZ

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Female
NPI: 1528578713

 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N
Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Website: N/A*

CERTIFIED NURSE PRACTITIONER



GOMEZ, LESLIE

Provider ID: 299464
Board Certified Specialty: No
LESLIE N GOMEZ

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Female
NPI: 1528578713

 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N
Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Website: N/A*

CERTIFIED NURSE PRACTITIONER

HANNA, LINDSAY





Provider ID: 284967
Board Certified Specialty: No
LINDSAY D HANNA

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Female
NPI: 1699257907

D3. Directorio de proveedores especialistas

 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

CERTIFIED NURSE



PRACTITIONER

HARKNESS, RUMIKO




Provider ID: 208840
Board Certified Specialty: No
RUMIKO HARKNESS

 8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
 *After Hours Phone: (800) 926-8273*

Provider Gender: Female
NPI: 1487785093

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Japanese*

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*


CERTIFIED NURSE

PRACTITIONER

IYER, VICTORIA



Provider ID: 265624
Board Certified Specialty: No
VICTORIA G IYER

 9350 CAMPUS POINT DR
STE 2B
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800) 926-8273*


Provider Gender: Female
NPI: 1871738864

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Tagalog*

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*
8:00AM-5:00PM

 *Website: N/A*


CERTIFIED NURSE

PRACTITIONER

JONES, CHRISTA


Provider ID: 275564
Board Certified Specialty: No
CHRISTA E JONES

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*
Fax: (800) 539-8781

 *After Hours Phone: (800) 926-8273*


Provider Gender: Female
NPI: 1396371431

 *Provider English Spoken: Y*

Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*
8:00AM-5:00PM


 *Website: N/A*


CERTIFIED NURSE

PRACTITIONER

KORMANIK, PATRICIA


Provider ID: 282070
Board Certified Specialty: No
PATRICIA A KORMANIK

 3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093

 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800) 926-8273*



Provider Gender: Female
NPI: 1093895047

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


D3. Directorio de proveedores especialistas


 Hours: M-F
8:00AM-5:00PM
 Website: N/A

**CERTIFIED NURSE
PRACTITIONER**

LANE, KIMBERLY


Provider ID: 301604
Board Certified Specialty: No
KIMBERLY A LANE


 9850 GENESEE AVE STE
440
LA JOLLA, CA 92037


 Phone: (858) 453-5944
Fax: (858) 429-7925

 After Hours Phone: (858)
453-5944

Provider Gender: Female
NPI: 1457670119

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

**CERTIFIED NURSE
PRACTITIONER**


MATTHESS, JANETTE

Provider ID: 287645
Board Certified Specialty: No
JANETTE E MATTHESS

 9415 CAMPUS POINT DR
LA JOLLA, CA 92093


 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)

926-8273
Provider Gender: Female
NPI: 1457694549
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Hours: M-F
8:00AM-5:00PM


 Website: N/A


**CERTIFIED NURSE
PRACTITIONER**

MATTHESS, JANETTE


Provider ID: 287644
Board Certified Specialty: No
JANETTE E MATTHESS

 8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781


 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1457694549

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER


 Hours: M-F
8:00AM-5:00PM


 Website: N/A

**CERTIFIED NURSE
PRACTITIONER**

MICK, SHARON


Provider ID: 299650
Board Certified Specialty: No
SHARON L MICK

 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273


Provider Gender: Female
NPI: 1891061966

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

**CERTIFIED NURSE
PRACTITIONER**

MICK, SHARON

Provider ID: 299645
Board Certified Specialty: No

D3. Directorio de proveedores especialistas

SHARON L MICK

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1891061966

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED NURSE

PRACTITIONER

MICK, SHARON

Provider ID: 299651

Board Certified Specialty: No
SHARON L MICK

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1891061966

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED NURSE

PRACTITIONER

MICK, SHARON

Provider ID: 299646

Board Certified Specialty: No
SHARON L MICK

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1891061966

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED NURSE

PRACTITIONER

MOHEBBI, ATHENA

Provider ID: 282231

Board Certified Specialty: No
ATHENA MOHEBBI

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1952627176

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

MULVEY, CAOILFHIONN

Provider ID: 291420

Board Certified Specialty: No
CAOILFHIONN M MULVEY

3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

Phone: (800) 926-8372


Fax: (888) 539-8781

After Hours Phone: (800)
926-8372

Provider Gender: Female

NPI: 1184386864




D3. Directorio de proveedores especialistas

 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Website: N/A*





CERTIFIED NURSE **PRACTITIONER**

NACOSTE, LAKEISHA

Provider ID: 272935
Board Certified Specialty: No
LAKEISHA NACOSTE

 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
 *Phone: (858) 822-5210*
 *After Hours Phone: (858)*
822-5210





Provider Gender: Female
NPI: 1194139634

 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*




CERTIFIED NURSE **PRACTITIONER**

PAULSON, KERRY

Provider ID: 201269
Board Certified Specialty: No

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
 *Phone: (619) 543-3000*
 *After Hours Phone: (619)*
543-3000
Provider Gender: Female
NPI: 1518363407
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA




JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
9:00AM-5:00PM
 *Website: N/A*


CERTIFIED NURSE **PRACTITIONER**

RALEIGH, DEBORAH




Provider ID: 215016
Board Certified Specialty: No
DEBORAH J RALEIGH

 9434 MEDICAL CENTER DR
FL 1
LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
 *After Hours Phone: (800)*
926-8273

Provider Gender: Female
NPI: 1689006876

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation:
UNIVERSITY OF CALIFORNIA
IRVINE MED CTR, UCSD

MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

CERTIFIED NURSE **PRACTITIONER**


ROCHE, CHELSEA




Provider ID: 270706
Board Certified Specialty: No
CHELSEA E ROCHE

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800)*
926-8273

Provider Gender: Female
NPI: 1063040384

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

D3. Directorio de proveedores especialistas

CERTIFIED NURSE

PRACTITIONER

ROSSI, CATHERINE

Provider ID: 291446

Board Certified Specialty: No

CATHERINE R ROSSI

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8372

Fax: (888) 539-8781

After Hours Phone: (800)
926-8372

Provider Gender: Female

NPI: 1649934126

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED NURSE

PRACTITIONER

SRILASAK, MICHELE

Provider ID: 281855

Board Certified Specialty: No

MICHELE SRILASAK

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1265487326

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

STEVENSON, REHEIA

Provider ID: 210795

Board Certified Specialty: No

REHEIA A STEVENSON

9434 MEDICAL CENTER DR
FL 1
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1346696044

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

TOPPEN, LAURA

Provider ID: 215475

Board Certified Specialty: No

LAURA TOPPEN

9434 MEDICAL CENTER DR
FL 1
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1326563495

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

TOPPEN, LAURA

Provider ID: 215476

Board Certified Specialty: No

LAURA TOPPEN

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

D3. Directorio de proveedores especialistas

NPI: 1326563495


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER


TREJO, ANA

Provider ID: 307670

Board Certified Specialty: No
ANA C TREJO

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1033717194


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

TREJO, ANA


Provider ID: 307671


Board Certified Specialty: No

ANA C TREJO

 3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1033717194


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED NURSE


PRACTITIONER


TREJO, ANA

Provider ID: 307673

Board Certified Specialty: No
ANA C TREJO

 9434 MEDICAL CENTER DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1033717194


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


TRUJILLO, DALE

Provider ID: 278428

Board Certified Specialty: No
DALE M TRUJILLO

 9350 CAMPUS POINT DR
STE 2B

LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1003104423

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

TUCKER, LANIKA

Provider ID: 307658

Board Certified Specialty: No
LANIKA A TUCKER

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)

D3. Directorio de proveedores especialistas

926-8273
Provider Gender: Female
NPI: 1477325181
☑ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

YEO, ALEXANDRIA

Provider ID: 299942
Board Certified Specialty: No
ALEXANDRIA YEO
📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1902368319
☑ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A

CERTIFIED REGISTERED NURSE ANESTHETIST

ALFONSO, ALVIN

Provider ID: 256375

Board Certified Specialty: No
ALVIN M ALFONSO
📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
📞 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1952653404
☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

CERTIFIED REGISTERED NURSE ANESTHETIST

BAYLIS, CHRISTOPHER

Provider ID: 240764
Board Certified Specialty: No
CHRISTOPHER M BAYLIS
📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1174893358
☑ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

CERTIFIED REGISTERED NURSE ANESTHETIST BURROWS, TERENCE

Provider ID: 256695
Board Certified Specialty: No
TERENCE J BURROWS
📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1023194560
☑ Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N


♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

CERTIFIED REGISTERED NURSE ANESTHETIST DOLLAND, STEVEN

Provider ID: 280553
Board Certified Specialty: No
STEVEN C DOLLAND
📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

D3. Directorio de proveedores especialistas


 Phone: (800) 926-8273

 Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1982059044

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: KERN

MEDICAL CENTER, UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

CERTIFIED REGISTERED

NURSE ANESTHETIST


FERRITER, STACY


Provider ID: 265296

Board Certified Specialty: No

STACY K FERRITER

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

 Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1780725556

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999


American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

CERTIFIED REGISTERED

NURSE ANESTHETIST

GARCIA, CALVIN


Provider ID: 217366

Board Certified Specialty: No

CALVIN J GARCIA

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

 Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1427419944

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999


American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

CERTIFIED REGISTERED

NURSE ANESTHETIST


GONZALEZ, LISA


Provider ID: 299906

Board Certified Specialty: No

LISA A GONZALEZ

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1083254205

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:

UNIVERSITY OF CALIFORNIA

IRVINE MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

CERTIFIED REGISTERED

NURSE ANESTHETIST


POLIKOWSKI, SAMANTHA


Provider ID: 291443

Board Certified Specialty: No

SAMANTHA E POLIKOWSKI

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1194134114

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: KAISER

FOUNDATION HOSPITAL SAN

D3. Directorio de proveedores especialistas

DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED REGISTERED


NURSE ANESTHETIST

RAMIREZ, NICOLE


Provider ID: 291403

Board Certified Specialty: No
NICOLE A RAMIREZ

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1487213500


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED REGISTERED


NURSE ANESTHETIST

SACKS, BRENT

Provider ID: 278004

Board Certified Specialty: No
BRENT A SACKS

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1982133591

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED REGISTERED


NURSE MIDWIFE

CHOI, NATHALIE

Provider ID: 301713

Board Certified Specialty: No
NATHALIE L CHOI

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1073241618

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER,
SOUTHWEST HEALTHCARE

RANCHO SPRINGS HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED REGISTERED

NURSE MIDWIFE


GOODWIN, RACHEL


Provider ID: 210017

Board Certified Specialty: No
RACHEL K GOODWIN

 8910 VILLA LA JOLLA DR
STE 200



LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1518274919

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED REGISTERED

D3. Directorio de proveedores especialistas

NURSE MIDWIFE

GREAR MANN, MELISSA

Provider ID: 210051

Board Certified Specialty: No
MELISSA P GREAR MANN

8910 VILLA LA JOLLA DR
STE 200

LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1255384475

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED REGISTERED

NURSE MIDWIFE

GUNTHER, HOPE

Provider ID: 210040

Board Certified Specialty: No
HOPE R GUNTHER

8910 VILLA LA JOLLA DR
STE 200

LA JOLLA, CA 92037

Phone: (858) 657-8745

After Hours Phone: (858)
657-8745

Provider Gender: Female

NPI: 1285667741

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TU
8:00AM-5:00PM

W 8:00AM-8:00PM

TH-F 8:00AM-5:00PM

Website: N/A

CERTIFIED REGISTERED

NURSE MIDWIFE

HIRSCH, JENNIFER

Provider ID: 210056

Board Certified Specialty: No
JENNIFER S HIRSCH

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (858) 657-8745

After Hours Phone: (858)
657-8745

Provider Gender: Female

NPI: 1891752069

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED REGISTERED

NURSE MIDWIFE

HIRSCH, JENNIFER

Provider ID: 210057

Board Certified Specialty: No

JENNIFER S HIRSCH

8910 VILLA LA JOLLA DR
STE 200

LA JOLLA, CA 92037

Phone: (858) 657-8745

After Hours Phone: (858)
657-8745

Provider Gender: Female

NPI: 1891752069

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TU
8:00AM-5:00PM

W 8:00AM-8:00PM

TH-F 8:00AM-5:00PM

Website: N/A

CERTIFIED REGISTERED

NURSE MIDWIFE

NATHAN, CARLY

Provider ID: 301046

Board Certified Specialty: No
CARLY NATHAN

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1235670977

Provider English Spoken: Y

Cultural Competency: N

D3. Directorio de proveedores especialistas

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): Board Certified Specialty: No
N

 Accessibility: CONTACT PROVIDER

 Website: N/A


EMERGENCY MEDICINE

AMANN, CHRISTOPHER

Provider ID: 270914

Board Certified Specialty: No
CHRISTOPHER J AMANN

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (858) 657-7000

Fax: (888) 539-8781

 After Hours Phone: (858)
657-7000

Provider Gender: Male

NPI: 1134326895

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON, USC
KENNETH NORRIS JR CANCER

HOSPITAL, KECK HOSPITAL OF
USC, USC VERDUGO HILLS


HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


EMERGENCY MEDICINE

AUSTIN, ANDREA

Provider ID: 269292

Board Certified Specialty: No
ANDREA L AUSTIN

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1811289093

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,
GROSSMONT HOSPITAL, Los

Angeles General Medical
Center, TEMECULA VALLEY


HOSPITAL INC


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


EMERGENCY MEDICINE

BAGBY, JESSICA

Provider ID: 271138

Board Certified Specialty: No
JESSICA A BAGBY

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)

926-8273

Provider Gender: Female

NPI: 1093161473

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

EMERGENCY MEDICINE


BAGBY, JESSICA

Provider ID: 271135

Board Certified Specialty: No
JESSICA A BAGBY

 8910 VILLA LA JOLLA DR
STE 100

LA JOLLA, CA 92037

 Phone: (858) 249-6800

Fax: (858) 404-9226

 After Hours Phone: (858)
249-6800

Provider Gender: Female

NPI: 1093161473

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

D3. Directorio de proveedores especialistas

American Sign Language (ASL):  9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


EMERGENCY MEDICINE

BARRY, JEFFREY

Provider ID: 271131

Board Certified Specialty: No
JEFFREY R BARRY

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1801207006


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

EMERGENCY MEDICINE

BELLINGHAUSEN, AMY

Provider ID: 270335

Board Certified Specialty: No
AMY BELLINGHAUSEN

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1801206354

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SHARP
CORONADO HOSP AND
HEALTHCARE CTR, SHARP
MEMORIAL HOSPITAL, UCSD
LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


EMERGENCY MEDICINE


BLACK, NICHOLAS

Provider ID: 284415

Board Certified Specialty: No
NICHOLAS D BLACK


 8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1154852689

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:


COMMUNITY REGIONAL
MEDICAL CENTER-FRESNO,
UCSD MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-8:00PM

 Website: N/A


EMERGENCY MEDICINE


CASTELLANO, TIFFANY

Provider ID: 271611

Board Certified Specialty: No
TIFFANY M CASTELLANO


 8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037

 Phone: (858) 249-6800
Fax: (858) 404-9226

 After Hours Phone: (858)
249-6800

Provider Gender: Female


NPI: 1063893063


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

D3. Directorio de proveedores especialistas

 Website: N/A


EMERGENCY MEDICINE

CHEN, ALICE

Provider ID: 287427

Board Certified Specialty: No
ALICE Y CHEN

 8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1427476597

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Mandarin

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


EMERGENCY MEDICINE

CHEN, ALICE

Provider ID: 287429

Board Certified Specialty: No
ALICE Y CHEN

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1427476597

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Mandarin

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

EMERGENCY MEDICINE


GALUST, HENRIK

Provider ID: 300053

Board Certified Specialty: No

HENRIK GALUST

 8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1932696093

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SAN

GORGONIO MEMORIAL HOSP

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


EMERGENCY MEDICINE

GOODRICH, ANDREW

Provider ID: 271625

Board Certified Specialty: No
ANDREW S GOODRICH

 8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1245688415

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL


CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

EMERGENCY MEDICINE

GUITTARD, JESSE

Provider ID: 239880

Board Certified Specialty: No

JESSE A GUITTARD

D3. Directorio de proveedores especialistas

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (858) 657-6400

After Hours Phone: (858)
657-6400

Provider Gender: Male

NPI: 1770979890

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: EL CENTRO
REGIONAL MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

EMERGENCY MEDICINE

HERNANDEZ, CRISTINA

Provider ID: 242545

Board Certified Specialty: No
CRISTINA T HERNANDEZ

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1164765046

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

EMERGENCY MEDICINE

HERNANDEZ, CRISTINA

Provider ID: 278988

Board Certified Specialty: No
CRISTINA T HERNANDEZ

8910 VILLA LA JOLLA DR
STE 100

LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1164765046

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

EMERGENCY MEDICINE

HOGUE, BRENNAL

Provider ID: 300006

Board Certified Specialty: No
BRENNAL HOGUE

8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1043705296

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PIONEERS
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

EMERGENCY MEDICINE

HOGUE, BRENNAL

Provider ID: 301710

Board Certified Specialty: No
BRENNAL HOGUE

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781


After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1043705296








Provider English Spoken: Y
Cultural Competency: N

D3. Directorio de proveedores especialistas

Hospital Affiliation: PIONEERS
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

EMERGENCY MEDICINE








HORNBEAK, KIRSTEN

Provider ID: 240023
Board Certified Specialty: No
KRISTEN B HORNBEAK
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1205214442
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

EMERGENCY MEDICINE



KRESHAK, ALLYSON




Provider ID: 257564
Board Certified Specialty: No

ALLYSON A KRESHAK
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1194758219
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

EMERGENCY MEDICINE







KUTZ, CRAIG

Provider ID: 283846
Board Certified Specialty: No
KUTZ CRAIG MD
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1598295925
 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, TRI CITY MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

EMERGENCY MEDICINE

KUTZ, CRAIG

Provider ID: 283844
Board Certified Specialty: No
KUTZ CRAIG MD
 8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1598295925
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, TRI CITY MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F

D3. Directorio de proveedores especialistas

8:00AM-5:00PM
Website: N/A

EMERGENCY MEDICINE **LI, JINGHONG**

Provider ID: 255938
Board Certified Specialty: No
JINGHONG LI

9434 MEDICAL CENTER DR
FL 1
LA JOLLA, CA 92037
Phone: (858) 657-7125
Fax: (858) 657-7107
After Hours Phone: (858)
657-7125
Provider Gender: Female
NPI: 1619014479

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

EMERGENCY MEDICINE **LI, JINGHONG**

Provider ID: 255937
Board Certified Specialty: No
JINGHONG LI

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (858) 657-7125
Fax: (858) 657-7107
After Hours Phone: (858)

657-7125
Provider Gender: Female
NPI: 1619014479
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

EMERGENCY MEDICINE **LIOTTA, BENJAMIN**

Provider ID: 283150
Board Certified Specialty: No
BENJAMIN I LIOTTA

8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1396270278

Provider English Spoken: Y
Provider Language(s)
Spoken: Chinese
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR, UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes

Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-8:00PM
Website: N/A

EMERGENCY MEDICINE **MCDANIEL, MICHELE**

Provider ID: 246900
Board Certified Specialty: No
MICHELE A MCDANIEL

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1366761959
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
RADY CHILDRENS HOSPITAL
SAN DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

D3. Directorio de proveedores especialistas

EMERGENCY MEDICINE

NOSTE, ERIN

Provider ID: 239796

Board Certified Specialty: No
ERIN E NOSTE

8910 VILLA LA JOLLA DR
STE 100

LA JOLLA, CA 92037

Phone: (858) 249-6800

After Hours Phone: (858)
249-6800

Provider Gender: Female

NPI: 1871732214

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

EMERGENCY MEDICINE

PARK, JAY

Provider ID: 285609

Board Certified Specialty: No
JAY H PARK

8910 VILLA LA JOLLA DR
STE 100

LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1366478372

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

EMERGENCY MEDICINE

PARK, JAY

Provider ID: 285608

Board Certified Specialty: No
JAY H PARK

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1366478372

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

EMERGENCY MEDICINE

QUENZER, FAITH

Provider ID: 243284

Board Certified Specialty: No
FAITH C QUENZER

8910 VILLA LA JOLLA DR
STE 100

LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1295112670

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:
UNIVERSITY OF CALIFORNIA
IRVINE MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: SU 8:00AM-8:00PM
M-F 8:00AM-5:00PM
SA 8:00AM-8:00PM

Website: N/A

EMERGENCY MEDICINE

RUDOLF, FRANCES

Provider ID: 240160

Board Certified Specialty: No
FRANCES E RUDOLPH

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (858) 657-7000

After Hours Phone: (858)
657-7000

Provider Gender: Female

D3. Directorio de proveedores especialistas

NPI: 1821487430

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

EMERGENCY MEDICINE

SABHA, MAHMOUD

Provider ID: 240450

Board Certified Specialty: No
MAHMOUD SABHA

8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037

Phone: (858) 249-6800

After Hours Phone: (858)
249-6800

Provider Gender: Male

NPI: 1457747883

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: SU 8:00AM-8:00PM

M-F 8:00AM-5:00PM

SA 8:00AM-8:00PM

Website: N/A

EMERGENCY MEDICINE

SELTZER, JUSTIN

Provider ID: 283135

Board Certified Specialty: No
JUSTIN A SELTZER

8910 VILLA LA JOLLA DR
STE 200

LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1447791843

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

EMERGENCY MEDICINE

SMITH, CASEY

Provider ID: 300008

Board Certified Specialty: No
CASEY L SMITH

8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1871099333

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

EMERGENCY MEDICINE

SUPAT, BENJAMIN

Provider ID: 299907

Board Certified Specialty: No
BENJAMIN R SUPAT

8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1376772905

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

EMERGENCY MEDICINE

WINKLER, GARRET

D3. Directorio de proveedores especialistas

Provider ID: 271416

Board Certified Specialty: No
GARRET A WINKLER

8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1336502095

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

EMERGENCY MEDICINE

YOU, ALAN

Provider ID: 269938

Board Certified Specialty: No
ALAN X YOU

8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1225425697

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

EMERGENCY MEDICINE

YOU, ALAN

Provider ID: 269937

Board Certified Specialty: No
ALAN X YOU

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1225425697

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

EMERGENCY MEDICINE

YU, ELAINE

Provider ID: 301707

Board Certified Specialty: No
ELAINE YU

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1528564150

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

EMERGENCY MEDICINE

YU, ELAINE

Provider ID: 299985

Board Certified Specialty: Yes
ELAINE YU

8910 VILLA LA JOLLA DR
STE A
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1528564150


Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

D3. Directorio de proveedores especialistas

Min/Max Age: 0\999

American Sign Language (ASL): Board Certified Specialty: No
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

ENDOCRINOLOGY


METABOLISM DIABETES

JUANG, PATRICIA

Provider ID: 255606

Board Certified Specialty: No
PATRICIA S JUANG

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1265695795

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Mandarin

Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): JODI B NAGELBERG
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

ENDOCRINOLOGY


METABOLISM DIABETES

KULASA, KRISTEN

Provider ID: 255623

Board Certified Specialty: No
KRISTEN M KULASA

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 962-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
962-8273

Provider Gender: Female

NPI: 1932324175

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

ENDOCRINOLOGY

METABOLISM DIABETES


NAGELBERG, JODI

Provider ID: 287778

Board Certified Specialty: No

JODI B NAGELBERG

 8939 VILLA LA JOLLA DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1720474141

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

ENDOCRINOLOGY


METABOLISM DIABETES

PETTUS, JEREMY

Provider ID: 303286

Board Certified Specialty: No
JEREMY H PETTUS

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1225234982

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

ENDOCRINOLOGY

METABOLISM DIABETES

SANTOS CAVAIOLA, TRICIA

Provider ID: 256092

D3. Directorio de proveedores especialistas

Board Certified Specialty: No
TRICIA SANTOS CAVAIOLA

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1518163799

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

FAMILY PRACTICE

CHEN, ALICE

Provider ID: 207165

Board Certified Specialty: No

ALICE I CHEN

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1265810337

Provider English Spoken: Y

Provider Language(s)

Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

FAMILY PRACTICE

CHEN, ALICE

Provider ID: 207166

Board Certified Specialty: No

ALICE I CHEN

9300 MEDICAL CENTER
DR

LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1265810337

Provider English Spoken: Y

Provider Language(s)

Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

FAMILY PRACTICE

JOLICOEUR, MEGAN

Provider ID: 300056

Board Certified Specialty: Yes

MEGAN E JOLICOEUR

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1114366192

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

GASTROENTEROLOGY

ANAND, GOBIND

Provider ID: 272836

Board Certified Specialty: No

GOBIND S ANAND

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (619) 543-2347

Fax: (858) 657-7259

After Hours Phone: (619)
543-2347

Provider Gender: Male

NPI: 1861626814

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR




Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

D3. Directorio de proveedores especialistas


 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*

GASTROENTEROLOGY

DAVE, SHRAVAN


Provider ID: 270449
Board Certified Specialty: No
SHRAVAN S DAVE

 9300 CAMPUS POINT DR
STE 2C
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*
Fax: (888) 539-8781


 *After Hours Phone: (800)
926-8273*

Provider Gender: Male
NPI: 1588081814

 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*


 *Website: N/A*

GASTROENTEROLOGY


DAVE, SHRAVAN

Provider ID: 270448
Board Certified Specialty: No
SHRAVAN S DAVE


 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 *Phone: (800) 925-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800)*

925-8273
Provider Gender: Male
NPI: 1588081814
 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*


 *Website: N/A*

GASTROENTEROLOGY

FEJLEH, MOHAMMAD

Provider ID: 271042
Board Certified Specialty: No
MOHAMMAD P FEJLEH

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*
Fax: (800) 926-8273

 *After Hours Phone: (800)
926-8273*

Provider Gender: Female
NPI: 1205240959


 *Provider English Spoken: Y*
Cultural Competency: N

*Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*


 *Hours: M-F
8:00AM-5:00PM*


 *Website: N/A*

GASTROENTEROLOGY

FEJLEH, MOHAMMAD

Provider ID: 271043
Board Certified Specialty: No
MOHAMMAD P FEJLEH

 9300 CAMPUS POINT DR
STE 2C
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Female
NPI: 1205240959


 *Provider English Spoken: Y*
Cultural Competency: N

*Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON*

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*


 *Website: N/A*

GASTROENTEROLOGY

HASAN, AWS

Provider ID: 299952
Board Certified Specialty: No
AWS K HASAN

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Male

D3. Directorio de proveedores especialistas


NPI: 1780047597

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


GASTROENTEROLOGY

HASAN, AWS

Provider ID: 299953

Board Certified Specialty: No
AWS K HASAN

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1780047597

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


GASTROENTEROLOGY

HOLMER, ARIELA

Provider ID: 273216

Board Certified Specialty: No
ARIELA K HOLMER

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1083032544


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


GASTROENTEROLOGY

SHAH, SHAILJA

Provider ID: 283898

Board Certified Specialty: No
SHAILJA C SHAH

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1073803243

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


GASTROENTEROLOGY

SHAH, SHAILJA

Provider ID: 283897

Board Certified Specialty: No
SHAILJA C SHAH

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1073803243

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

GASTROENTEROLOGY



TSAI, MATTHEW

Provider ID: 252369

Board Certified Specialty: No
MATTHEW TSAI

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

D3. Directorio de proveedores especialistas

 Phone: (800) 926-8273
 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1285051177

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


GASTROENTEROLOGY


TSAI, MATTHEW

Provider ID: 252368

Board Certified Specialty: No
MATTHEW TSAI

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1285051177

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

GASTROENTEROLOGY


YOUSSEF, FADY

Provider ID: 300023

Board Certified Specialty: No

FADY F YOUSSEF

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1265887723


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A


GASTROENTEROLOGY

YOUSSEF, FADY

Provider ID: 300025

Board Certified Specialty: No
FADY F YOUSSEF

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1265887723


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

HEMATOLOGY / ONCOLOGY


ASIMAKOPOULOS, FOTIOS


Provider ID: 246594

Board Certified Specialty: No
FOTIOS A ASIMAKOPOULOS

 3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

 Phone: (858) 822-6100

 After Hours Phone: (858) 822-6100

Provider Gender: Male

NPI: 1518134923

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

HEMATOLOGY / ONCOLOGY

CHEN, YU-WEI

D3. Directorio de proveedores especialistas

Provider ID: 303057

Board Certified Specialty: No
YU-WEI CHEN

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1245694801

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

HEMATOLOGY / ONCOLOGY

CHEN, YU-WEI

Provider ID: 303058

Board Certified Specialty: No
YU-WEI CHEN

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1245694801

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER
Website: N/A

HEMATOLOGY / ONCOLOGY

HAMDAN, AYAD

Provider ID: 241429

Board Certified Specialty: No
AYAD R HAMDAN

3960 HEALTH SCIENCES
DRIVE

LA JOLLA, CA 92093

Phone: (800) 926-8273
After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1144431230

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic, French

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

HEMATOLOGY / ONCOLOGY

HEYMAN, BENJAMIN

Provider ID: 202662

Board Certified Specialty: No
BENJAMIN M HEYMAN

3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

Phone: (800) 926-8273
After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1982995809

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: SU-SA
8:00AM-5:00PM

Website: N/A

HEMATOLOGY / ONCOLOGY

HEYMAN, BENJAMIN

Provider ID: 202663

Board Certified Specialty: No
BENJAMIN M HEYMAN

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273
After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1982995809

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA




JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

D3. Directorio de proveedores especialistas

 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A


HEMATOLOGY / ONCOLOGY


HEYMAN, BENJAMIN

Provider ID: 202664

Board Certified Specialty: No
BENJAMIN M HEYMAN

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1982995809

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

HEMATOLOGY / ONCOLOGY


PARK, SOO

Provider ID: 257202

Board Certified Specialty: No
SOO J PARK

 3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1821351198

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

HEMATOLOGY / ONCOLOGY

RICHARDSON, ANGELIQUE


Provider ID: 215010

Board Certified Specialty: No
ANGELIQUE E RICHARSON

 3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1700120102

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


HEMATOLOGY / ONCOLOGY


STEWART, TYLER

Provider ID: 243920

Board Certified Specialty: No
TYLER F STEWART

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1699110676

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

HEMATOLOGY / ONCOLOGY

VU, PETER

Provider ID: 272717

Board Certified Specialty: No
PETER VU

 3855 HEALTH SCIENCES
DR

D3. Directorio de proveedores especialistas

LA JOLLA, CA 92093
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1861810830
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

HOSPICE AND PALLIATIVE MEDICINE

RUBENZIK, TAMARA
Provider ID: 245574
Board Certified Specialty: No
TAMARA T RUBENZIK
📍 3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1811200652
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

INFECTIOUS DISEASE

KUPPALLI, KRUTIKA
Provider ID: 301059
Board Certified Specialty: No
KRUTIKA KUPPALLI
📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1538346317

🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, Stanford Health Care, STANFORD HEALTH CARE TRI-VALLEY
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🌐 Website: N/A

INFECTIOUS DISEASE

KUPPALLI, KRUTIKA

Provider ID: 301057
Board Certified Specialty: No
KRUTIKA KUPPALLI
📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1538346317
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, Stanford Health Care, STANFORD HEALTH CARE TRI-VALLEY
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🌐 Website: N/A

INFECTIOUS DISEASE

RAMIREZSANCHEZ, CLAUDIA
Provider ID: 299947
Board Certified Specialty: No
CLAUDIA C RAMIREZSANCHEZ
📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1659720555
🗣 Provider English Spoken: Y
🗣 Provider Language(s) Spoken: Spanish
Cultural Competency: N

D3. Directorio de proveedores especialistas

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


INFECTIOUS DISEASE

TANG, MICHAEL

Provider ID: 300063

Board Certified Specialty: No
MICHAEL E TANG

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male


NPI: 1982018545

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

INTERNAL MEDICINE


BORDIN-WOSK, TALYA


Provider ID: 273985

Board Certified Specialty: No
TALYA S BORDIN WOSK

 9350 CAMPUS POINT DR

LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1801184973

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INTERNAL MEDICINE

BORDIN-WOSK, TALYA

Provider ID: 273984

Board Certified Specialty: No
TALYA S BORDIN WOSK

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (760) 471-9186
Fax: (619) 543-8255

 After Hours Phone: (760)
471-9186

Provider Gender: Female

NPI: 1801184973

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A



INTERNAL MEDICINE

CHENG, GEORGE

Provider ID: 247640



Board Certified Specialty: No
GEORGE Z CHENG

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1316174568

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERNAL MEDICINE

DJEKIC, KRISTINA

Provider ID: 286669

Board Certified Specialty: No

D3. Directorio de proveedores especialistas

KRISTINA DJEKIC

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1417343732

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INTERNAL MEDICINE

HOGARTH, MICHAEL

Provider ID: 214385

Board Certified Specialty: No
MICHAEL A HOGARTH

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1225019193

Provider English Spoken: Y

Provider Language(s)
Spoken: Portuguese,
Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON, UC

DAVIS MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INTERNAL MEDICINE

IVANOV, MARGARET

Provider ID: 272876

Board Certified Specialty: No
MARGARET A IVANOV

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1326427014

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INTERNAL MEDICINE

JABBOUR, MOUSSA

Provider ID: 256658

Board Certified Specialty: No

MOUSSA JABBOUR

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1255741633

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INTERNAL MEDICINE

KATZ, YISRAEL

Provider ID: 272937

Board Certified Specialty: No
YISRAEL KATZ

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

D3. Directorio de proveedores especialistas

Provider Gender: Male

NPI: 1730507872

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INTERNAL MEDICINE

KVIATKOVSKY, MILLA

Provider ID: 274004

Board Certified Specialty: No
MILLA J KVIATKOVSKY

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1366855355

Provider English Spoken: Y

Provider Language(s)
Spoken: Finnish, French,
Hebrew, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

INTERNAL MEDICINE

KVIATKOVSKY, MILLA

Provider ID: 274002

Board Certified Specialty: No
MILLA J KVIATKOVSKY

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (858) 657-7000

After Hours Phone: (858)
657-7000

Provider Gender: Female

NPI: 1366855355

Provider English Spoken: Y

Provider Language(s)
Spoken: Finnish, French,
Hebrew, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INTERNAL MEDICINE

LAGO HERNANDEZ, CARLOS

Provider ID: 238623

Board Certified Specialty: No

CARLOS A LAGO-HERNANDEZ

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)

926-8273

Provider Gender: Male

NPI: 1558756270

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INTERNAL MEDICINE

LAGO HERNANDEZ, CARLOS

Provider ID: 238624

Board Certified Specialty: No

CARLOS A LAGO-HERNANDEZ

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1558756270

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes


Min/Max Age: 18\999

American Sign Language (ASL):

D3. Directorio de proveedores especialistas

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INTERNAL MEDICINE

LAM, MICHAEL

Provider ID: 274409

Board Certified Specialty: No
MICHAEL T LAM


 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1578974259

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Mandarin

Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERNAL MEDICINE


MAJITHIA, AMIT


Provider ID: 255881

Board Certified Specialty: No
AMIT R MAJITHIA

 9350 CAMPUS POINT DR


LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1801091459

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INTERNAL MEDICINE

MARTINEZ, ARMANDO

Provider ID: 291422

Board Certified Specialty: No
ARMANDO R MARTINEZ


 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8372
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8372

Provider Gender: Male

NPI: 1598261091

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


INTERNAL MEDICINE

NOKES, BRANDON

Provider ID: 287581

Board Certified Specialty: No
BRANDON T NOKES

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1487040051

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INTERNAL MEDICINE

POTOK, OLIVIA

Provider ID: 272707

Board Certified Specialty: No
OLIVIA A POTOK

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

D3. Directorio de proveedores especialistas

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1073951323

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INTERNAL MEDICINE

SEBASKY, MEGHAN

Provider ID: 273964

Board Certified Specialty: No
MEGHAN M SEBASKY

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1538351408

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INTERNAL MEDICINE


SEBASKY, MEGHAN

Provider ID: 273963

Board Certified Specialty: No
MEGHAN M SEBASKY

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (619) 471-9186

 After Hours Phone: (619)
471-9186

Provider Gender: Female

NPI: 1538351408

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERNAL MEDICINE


SMITH, CHELSEY

Provider ID: 239921

Board Certified Specialty: No
CHELSEY J SMITH

 9350 CAMPUS POINT DR
STE 2B

LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1013264506

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INTERNAL MEDICINE

TAYLOR, DAVID

Provider ID: 274470

Board Certified Specialty: No
DAVID S TAYLOR

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1033572995

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):




D3. Directorio de proveedores especialistas


N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

INTERNAL MEDICINE



WANG, ANGELA

Provider ID: 259536
Board Certified Specialty: No
ANGELA C WANG

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1730133976

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL, UCSD
MEDICAL CTR



Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):


N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

INTERNAL MEDICINE




YADLAPATI, RENA

Provider ID: 238587
Board Certified Specialty: No
RENA H YADLAPATI

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1548597784

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999



American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A


INTERNAL MEDICINE

YADLAPATI, RENA

Provider ID: 238586
Board Certified Specialty: No
RENA H YADLAPATI

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1548597784

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON




Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):


N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

INTERNAL MEDICINE

YANG, JENNY




Provider ID: 283025
Board Certified Specialty: No
JENNY Z YANG

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1346636453

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR, UCSD

MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

INTERNAL MEDICINE

ZHANG, SHERRY

Provider ID: 272658

D3. Directorio de proveedores especialistas

Board Certified Specialty: No
SHERRY S ZHANG

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1588198147

Provider English Spoken: Y

Provider Language(s)
Spoken: Mandarin

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INTERVENTIONAL

CARDIOLOGY

AL KHIAMI, BELAL

Provider ID: 275993

Board Certified Specialty: No
BELAL O AL KHIAMI

9434 MEDICAL CENTER DR
FL 1

LA JOLLA, CA 92037

Phone: (858) 657-8530

After Hours Phone: (858)
657-8530

Provider Gender: Male

NPI: 1861623506

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR, PIONEERS MEMORIAL

HOSPITAL, EL CENTRO
REGIONAL MEDICAL CENTER,

LOMA LINDA UNIVERSITY

MED CTR MURRIETA,

TEMECULA VALLEY HOSPITAL
INC

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INTERVENTIONAL

CARDIOLOGY

CRUZ RODRIGUEZ, JOSE

Provider ID: 300062

Board Certified Specialty: No
JOSE B CRUZ RODRIGUEZ

9434 MEDICAL CENTER DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1457770240

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PIONEERS
MEMORIAL HOSPITAL, EL
CENTRO REGIONAL MEDICAL
CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

INTERVENTIONAL

CARDIOLOGY

DAMANI, SAMIR

Provider ID: 303097

Board Certified Specialty: No
SAMIR B DAMANI

9850 GENESEE AVE STE
650

LA JOLLA, CA 92037

Phone: (858) 800-2480

Fax: (858) 216-1908

After Hours Phone: (858)
800-2480

Provider Gender: Male

NPI: 1457379372

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

SA 9:00AM-4:00PM

D3. Directorio de proveedores especialistas

 Website: N/A


INTERVENTIONAL CARDIOLOGY

GOVEA, ALAYN

Provider ID: 300030

Board Certified Specialty: No
ALAYN GOVEA

 9434 MEDICAL CENTER DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1972997104

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:


LAKEWOOD REGIONAL MED
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

INTERVENTIONAL CARDIOLOGY


TAUB, PAM

Provider ID: 277682

Board Certified Specialty: No
PAM R TAUB

 9434 MEDICAL CENTER DR
FL 1

LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)

926-8273

Provider Gender: Female

NPI: 1346355161

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, UCSD MEDICAL


CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INTERVENTIONAL CARDIOLOGY

TAUB, PAM

Provider ID: 277681

Board Certified Specialty: No
PAM R TAUB

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1346355161

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERVENTIONAL CARDIOLOGY


WETTERSTEN, NICHOLAS

Provider ID: 210604

Board Certified Specialty: No
NICHOLAS W WETTERSTEN

 9434 MEDICAL CENTER DR
FL 1

LA JOLLA, CA 92037

 Phone: (858) 657-8530

Fax: (858) 657-8814

 After Hours Phone: (858)
657-8530

Provider Gender: Male

NPI: 1063701068

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

MATERNAL AND FETAL MEDICINE

BALLAS, JERASIMOS

Provider ID: 209561

D3. Directorio de proveedores especialistas

Board Certified Specialty: No
JERASIMOS BALLAS

9444 MEDICAL CENTER DR N
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1871767384

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON,
EISENHOWER MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

MATERNAL AND FETAL MEDICINE

EMERUWA, UKACHI

Provider ID: 300009

Board Certified Specialty: No
UKACHI N EMERUWA

9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1245627421

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

Accessibility: CONTACT
PROVIDER

Website: N/A

MATERNAL AND FETAL MEDICINE

HULL, ANDREW

Provider ID: 209482

Board Certified Specialty: No
ANDREW D HULL

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (858) 657-8745

After Hours Phone: (858)
657-8745

Provider Gender: Male

NPI: 1902862121

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS
MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA
VISTA, SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,
PALOMAR MEDICAL CENTER,
SCRIPPS MEMORIAL

HOSPITAL, UCSD LA JOLLA
JOHN SALLY THORNTON,

UCSD LA JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

MATERNAL AND FETAL MEDICINE

LAURENT, LOUISE

Provider ID: 208639

Board Certified Specialty: No
LOUISE C LAURENT

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1770532707

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA
VISTA, SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,
PALOMAR MEDICAL CENTER,
SCRIPPS MEMORIAL

HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

MATERNAL AND FETAL MEDICINE

MELBER, DORA

Provider ID: 240599

Board Certified Specialty: No

D3. Directorio de proveedores especialistas

DORA J MELBER

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1124413026

Provider English Spoken: Y

Provider Language(s)
Spoken: Hungarian, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

MATERNAL AND FETAL MEDICINE

MOORE, THOMAS

Provider ID: 208642

Board Certified Specialty: No
THOMAS R MOORE

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (858) 657-8745

After Hours Phone: (858)
657-8745

Provider Gender: Male

NPI: 1184682379

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

MATERNAL AND FETAL MEDICINE

WOELKERS, DOUGLAS

Provider ID: 209383

Board Certified Specialty: No
DOUGLAS A WOELKERS

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (858) 657-7200

After Hours Phone: (858)
657-7200

Provider Gender: Male

NPI: 1013965748

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, PALOMAR

MEDICAL CENTER, UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

MATERNAL AND FETAL MEDICINE

WOLF, RICHARD

Provider ID: 209252

Board Certified Specialty: No
RICHARD B WOLF

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1497713846

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, PALOMAR

MEDICAL CENTER, UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,

UCSD LA JOLLA JOHN SALLY

THORNTON




Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

D3. Directorio de proveedores especialistas

 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A


NEONATAL / PERINATAL MEDICINE


BAI-TONG, SHIYU

Provider ID: 283287

Board Certified Specialty: No
SHIYU S BAI-TONG

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (858) 249-5800

 After Hours Phone: (858)
249-5800

Provider Gender: Female

NPI: 1528454188

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEONATAL / PERINATAL MEDICINE

DELROSARIO, PAMELA

Provider ID: 295001

Board Certified Specialty: No
PAMELA G DELROSARIO

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (858) 249-5800
Fax: (858) 249-5839

 After Hours Phone: (858)
249-5800

Provider Gender: Female

NPI: 1952691941

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, RADY


CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEONATAL / PERINATAL MEDICINE

HIETALATI, SAMANTHA

Provider ID: 294252

Board Certified Specialty: No
SAMANTHA M HIETALATI

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (858) 249-5800

Fax: (858) 249-5839

 After Hours Phone: (858)
249-5800

Provider Gender: Female

NPI: 1245617489

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEONATAL / PERINATAL MEDICINE

MARC-AURELE, KRISHELLE

Provider ID: 206207

Board Certified Specialty: No
KRISHELLE L MARC-AURELE

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (858) 249-5800

Fax: (858) 249-5839

 After Hours Phone: (858)
249-5800

Provider Gender: Female

NPI: 1952503435

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,

UCSD LA JOLLA JOHN SALLY

THORNTON, TRI CITY


MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

D3. Directorio de proveedores especialistas

 Website: N/A


NEONATAL / PERINATAL MEDICINE

MARC-AURELE, KRISHELLE


Provider ID: 206209

Board Certified Specialty: No
KRISHELLE L MARC-AURELE

 9888 GENESEE AVE
LA JOLLA, CA 92037

 Phone: (858) 626-4123

Fax: (760) 633-7998

 After Hours Phone: (858)
626-4123

Provider Gender: Female

NPI: 1952503435

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
UCSD LA JOLLA JOHN SALLY
THORNTON, TRI CITY


MEDICAL CTR, SCRIPPS
MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

NEONATAL / PERINATAL MEDICINE


MATOBA, NANA

Provider ID: 297977

Board Certified Specialty: No
NANA MATOBA

 9300 CAMPUS POINT DR
STE 8

LA JOLLA, CA 92037


 Phone: (858) 657-7000

Fax: (858) 249-5839

 After Hours Phone: (858)
657-7000

Provider Gender: Female

NPI: 1801952197

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Japanese

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


NEONATAL / PERINATAL MEDICINE

MATOBA, NANA

Provider ID: 299893

Board Certified Specialty: No
NANA MATOBA

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (858) 249-5800

Fax: (858) 249-5839

 After Hours Phone: (858)
249-5800

Provider Gender: Female

NPI: 1801952197

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Japanese

Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEONATAL / PERINATAL MEDICINE

MESTAN, KAREN

Provider ID: 285931

Board Certified Specialty: Yes
KAREN K MESTAN

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (858) 249-5800

Fax: (858) 249-5839

 After Hours Phone: (858)
249-5800

Provider Gender: Female

NPI: 1942253356


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

D3. Directorio de proveedores especialistas

NEONATAL / PERINATAL MEDICINE

NYMAN, KATHERINE

Provider ID: 301824

Board Certified Specialty: No
KATHERINE N NYMAN

9888 GENESEE AVE
LA JOLLA, CA 92037

Phone: (858) 626-4123

Fax: (760) 633-7998

After Hours Phone: (858)
626-4123

Provider Gender: Female

NPI: 1003260951

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

NEONATAL / PERINATAL MEDICINE

RAMOS, CARLOS

Provider ID: 206062

Board Certified Specialty: No
CARLOS G RAMOS

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (858) 249-5800

Fax: (619) 543-3812

After Hours Phone: (858)
249-5800

Provider Gender: Male

NPI: 1205047545

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, EL CENTRO
REGIONAL MEDICAL CENTER,
SOUTHWEST HEALTHCARE

INLAND VALLEY HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
RADY CHILDRENS HOSPITAL

SAN DIEGO, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

NEONATAL / PERINATAL MEDICINE

SAJTI, ENIKO

Provider ID: 206170

Board Certified Specialty: No
ENIKO C SAJTI

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (858) 249-5800

Fax: (858) 249-5839

After Hours Phone: (858)
249-5800

Provider Gender: Female

NPI: 1649433103

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSF
BENIOFF CHILDREN'S
HOSPITAL OAKLAND, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

NEONATAL / PERINATAL MEDICINE

SAUER, CHARLES

Provider ID: 303907

Board Certified Specialty: No
CHARLES W SAUER

9888 GENESEE AVE
LA JOLLA, CA 92037

Phone: (858) 626-4123

Fax: (760) 633-7998

After Hours Phone: (858)
626-4123

Provider Gender: Male

NPI: 1538388988


Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,

PALOMAR MEDICAL CENTER,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, PALOMAR

HEALTH, SCRIPPS MEMORIAL

D3. Directorio de proveedores especialistas

HOSPITAL, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

NEONATAL / PERINATAL MEDICINE







SAUER, CHARLES

Provider ID: 303908
Board Certified Specialty: No
CHARLES W SAUER
 9300 CAMPUS POINT DR
FL 8
LA JOLLA, CA 92037
 Phone: (858) 249-5800
Fax: (858) 249-5839
 After Hours Phone: (858)
249-5800
Provider Gender: Male
NPI: 1538388988
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
PALOMAR MEDICAL CENTER,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, PALOMAR

HEALTH, SCRIPPS MEMORIAL
HOSPITAL, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

NEUROLOGY

BEVINS, ELIZABETH






Provider ID: 277726
Board Certified Specialty: No
ELIZABETH A BEVINS
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1013395151
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F

8:00AM-5:00PM

 Website: N/A




NEUROLOGY

COUGHLIN, DAVID

Provider ID: 240950
Board Certified Specialty: No
DAVID G COUGHLIN
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1740543784
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

NEUROLOGY

IRAGUIMADOZ, VICENTE

Provider ID: 246701
Board Certified Specialty: No
VICENTE J IRAGUIMADOZ
 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (858) 657-8540
 After Hours Phone: (858)
657-8540
Provider Gender: Male
NPI: 1053326710
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA

D3. Directorio de proveedores especialistas

JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): WALI Z QAYOUMI

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

NEUROLOGY

LEE, DAVID


Provider ID: 246264


Board Certified Specialty: No

DAVID J LEE

 9350 CAMPUS POINT DR
STE LLB

LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1871884130

Provider English Spoken: Y

Provider Language(s)

Spoken: Korean

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

NEUROLOGY


QAYOUMI, WALI

Provider ID: 284369

Board Certified Specialty: No

WALI Z QAYOUMI

 9500 GILMAN DR STE 2069
LA JOLLA, CA 92093

 Phone: (858) 822-5881

Fax: (888) 539-8781

 After Hours Phone: (858)
822-5881

Provider Gender: Male

NPI: 1093178220

Provider English Spoken: Y

Provider Language(s)

Spoken: French

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

NEUROLOGY

QAYOUMI, WALI


Provider ID: 284371

Board Certified Specialty: No

WALI Z QAYOUMI

 9350 CAMPUS POINT DR
STE LLB

LA JOLLA, CA 92037

 Phone: (619) 284-3746

Fax: (888) 579-8781

 After Hours Phone: (619)

284-3746

Provider Gender: Male

NPI: 1093178220

Provider English Spoken: Y

Provider Language(s)

Spoken: French

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A


NEUROLOGY

SCHULTE, JESSICA


Provider ID: 284819

Board Certified Specialty: No

JESSICA D SCHULTE

 3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (858) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1467870576

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSF

MEDICAL CENTER AT MOUNT

ZION, UCSD LA JOLLA JOHN

SALLY THORNTON, UCSD

D3. Directorio de proveedores especialistas


MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


OBSTETRICS / GYNECOLOGY

BINDER, PRATIBHA

Provider ID: 273225

Board Certified Specialty: No
PRATIBHA S BINDER

 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female


NPI: 1174758031


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OBSTETRICS / GYNECOLOGY

DELCORE, LAURA

Provider ID: 291323

Board Certified Specialty: No
LAURA M DELCORE

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1790128759


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A


OBSTETRICS / GYNECOLOGY


DELCORE, LAURA

Provider ID: 291324

Board Certified Specialty: No
LAURA M DELCORE

 8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1790128759

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A


OBSTETRICS / GYNECOLOGY

DRIEBE, AMY

Provider ID: 291335

Board Certified Specialty: No
AMY M DRIEBE

 8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1730507567

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A


OBSTETRICS / GYNECOLOGY

DRIEBE, AMY

Provider ID: 291334

Board Certified Specialty: No
AMY M DRIEBE

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273
Fax: (888) 539-8781

D3. Directorio de proveedores especialistas

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1730507567

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OBSTETRICS / GYNECOLOGY

GUPTA, PRATIMA


Provider ID: 257546

Board Certified Specialty: No

PRATIMA GUPTA

 8910 VILLA LA JOLLA DR
STE 200

LA JOLLA, CA 92037


 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1891749842

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Hindi, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999


American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

OBSTETRICS / GYNECOLOGY


HARVEY, SCOTT

Provider ID: 278916

Board Certified Specialty: No

SCOTT A HARVEY

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 923-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 923-8273

Provider Gender: Male

NPI: 1457662868

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

OBSTETRICS / GYNECOLOGY


HARVEY, SCOTT

Provider ID: 278918

Board Certified Specialty: No

SCOTT A HARVEY

 9444 MEDICAL CENTER DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1457662868

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

OBSTETRICS / GYNECOLOGY

HOANG, MAI


Provider ID: 208295


Board Certified Specialty: No

MAI P HOANG

 8910 VILLA LA JOLLA DR
STE 200

LA JOLLA, CA 92037


 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1104143593

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR


Medi-Cal Open Panel: Yes


D3. Directorio de proveedores especialistas

Min/Max Age: 16\999

American Sign Language (ASL): DAVID A KLEIN

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OBSTETRICS / GYNECOLOGY


HOM-TEDLA, MARIANNE

Provider ID: 242752

Board Certified Specialty: No
MARIANNE S HOM-TEDLA


 9444 MEDICAL CENTER DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1972047397

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OBSTETRICS / GYNECOLOGY


KLEIN, DAVID


Provider ID: 271558

Board Certified Specialty: No

DAVID A KLEIN


 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1780073635

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OBSTETRICS / GYNECOLOGY


KLEIN, DAVID

Provider ID: 271559

Board Certified Specialty: No
DAVID A KLEIN


 8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037


 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1780073635

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OBSTETRICS / GYNECOLOGY


LAMALE-SMITH, LEAH

Provider ID: 286230

Board Certified Specialty: No
LEAH M LAMALE-SMITH

 8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1396904876

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL

CTR, EISENHOWER MEDICAL
CTR




Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

D3. Directorio de proveedores especialistas


 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A


OBSTETRICS / GYNECOLOGY


MACKAY, GILLIAN

Provider ID: 200964

Board Certified Specialty: No
GILLIAN MACKAY

 8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1770702177

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A


OBSTETRICS / GYNECOLOGY

MACKAY, GILLIAN

Provider ID: 303062

Board Certified Specialty: No
GILLIAN MACKAY

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1770702177

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Website: N/A


OBSTETRICS / GYNECOLOGY

MEADOWS, AUDRA

Provider ID: 285740

Board Certified Specialty: No
AUDRA R MEADOWS

 8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1467585521

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OBSTETRICS / GYNECOLOGY

MEADOWS, AUDRA

Provider ID: 285739

Board Certified Specialty: No
AUDRA R MEADOWS

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (858) 657-8745

Fax: (888) 539-8781

 After Hours Phone: (858)
657-8745

Provider Gender: Female

NPI: 1467585521

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OBSTETRICS / GYNECOLOGY

MELLENDEZ, ARIANA

Provider ID: 299920

D3. Directorio de proveedores especialistas

Board Certified Specialty: No

ARIANA L MELENDEZ

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1295232973

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

OBSTETRICS / GYNECOLOGY

PICKETT, CHARLOTTE

Provider ID: 299976

Board Certified Specialty: No

CHARLOTTE M PICKETT

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1447530696

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

OBSTETRICS / GYNECOLOGY

PICKETT, CHARLOTTE

Provider ID: 299977

Board Certified Specialty: No

CHARLOTTE M PICKETT

8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1447530696

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

OBSTETRICS / GYNECOLOGY

RIVAS, RENEE

Provider ID: 284296

Board Certified Specialty: No

RENEE N RIVAS

9333 GENESEE AVE STE
340

LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1295263861

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

**THORNTON, UCSD MEDICAL
CTR**

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OBSTETRICS / GYNECOLOGY

RIVAS, RENEE

Provider ID: 284295

Board Certified Specialty: No

RENEE N RIVAS

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1295263861

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

**THORNTON, UCSD MEDICAL
CTR**

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

D3. Directorio de proveedores especialistas

OBSTETRICS / GYNECOLOGY

RIVAS, RENEE

Provider ID: 284297

Board Certified Specialty: No

RENEE N RIVAS

9444 MEDICAL CENTER DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1295263861

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OBSTETRICS / GYNECOLOGY

SUYAMA, JULIE

Provider ID: 284289

Board Certified Specialty: No

JULIE A SUYAMA

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1306372800

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OBSTETRICS / GYNECOLOGY

THOMSON, SAMANTHA

Provider ID: 285173

Board Certified Specialty: No

SAMANTHA L THOMSON

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1689013468

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: CEDARS
SINAI MEDICAL CENTER,
UCSD LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OBSTETRICS / GYNECOLOGY

THOMSON, SAMANTHA

Provider ID: 285175

Board Certified Specialty: No

SAMANTHA L THOMSON

8910 VILLA LA JOLLA DR
STE 200

LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1689013468

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: CEDARS
SINAI MEDICAL CENTER,
UCSD LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OCCUPATIONAL THERAPIST

AMARAL, MARGARET

D3. Directorio de proveedores especialistas

Provider ID: 258303

Board Certified Specialty: No
MARGARET L AMARAL

9350 CAMPUS POINT DR
STE LLD
LA JOLLA, CA 92037

Phone: (858) 657-6879

Fax: (858) 657-6873

After Hours Phone: (858)
657-6879

Provider Gender: Female

NPI: 1689874521

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OCCUPATIONAL THERAPIST **COLLINS, RESENIA**

Provider ID: 258356

Board Certified Specialty: No
RESENIA V COLLINS

9350 CAMPUS POINT DR
STE LLD
LA JOLLA, CA 92037

Phone: (858) 657-6879

Fax: (858) 657-6873

After Hours Phone: (858)
657-6879

Provider Gender: Female

NPI: 1184936718

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OCCUPATIONAL THERAPIST **MUNCADA, CAESAR**

Provider ID: 288724

Board Certified Specialty: No
CEASAR B MUNCADA

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1790268100

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OCCUPATIONAL THERAPIST **SMITH, EMILY**

Provider ID: 258537

Board Certified Specialty: No
EMILY A SMITH

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (855) 543-0333

Fax: (858) 657-6873

After Hours Phone: (855)
543-0333

Provider Gender: Female

NPI: 1417337403

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OCCUPATIONAL THERAPIST **SOROKIN, LISA**

Provider ID: 258362

Board Certified Specialty: No
LISA F SOROKIN

9350 CAMPUS POINT DR
STE LLD
LA JOLLA, CA 92037

Phone: (858) 657-6879

Fax: (858) 657-6873

After Hours Phone: (858)
657-6879

Provider Gender: Female

NPI: 1336445063




Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

D3. Directorio de proveedores especialistas

 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

OPHTHALMOLOGY

BAXTER, SALLY

Provider ID: 272787
Board Certified Specialty: No
SALLY L BAXTER

 9415 CAMPUS POINT DR
LA JOLLA, CA 92093
 Phone: (858) 534-6290
Fax: (888) 539-8781


 After Hours Phone: (858)
534-6290

Provider Gender: Female
NPI: 1912325184

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

 Hours: M-F
7:00AM-5:00PM
SA 7:45AM-2:00PM


 Website: N/A

OPHTHALMOLOGY

BEAZER, ALEX

Provider ID: 272802
Board Certified Specialty: No
ALEX P BEAZER

 9415 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273


Provider Gender: Male
NPI: 1942662168

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM



 Website: N/A

OPHTHALMOLOGY



MOVAGHAR, MANSOOR

Provider ID: 215055
Board Certified Specialty: No
MANSOOR MOVAGHAR

 9415 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1497792220


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

OPHTHALMOLOGY

PUIG LLANO, MANUEL

Provider ID: 299965
Board Certified Specialty: No
MANUEL PUIG LLANO


 9415 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273


Provider Gender: Male
NPI: 1427102979

 Provider English Spoken: Y

 Provider Language(s)
Spoken: French, German,
Spanish, Tagalog

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP
MEMORIAL HOSPITAL, SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OPHTHALMOLOGY

SATTERFIELD, KELLIE

D3. Directorio de proveedores especialistas

Provider ID: 305303
Board Certified Specialty: No
KELLIE R SATTERFIELD

9834 GENESEE AVE STE
200

LA JOLLA, CA 92037

Phone: (858) 457-3050

Fax: (858) 457-0851

After Hours Phone: (858)
457-3050

Provider Gender: Female

NPI: 1629509336

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPHTHALMOLOGY

SCHONBACH, ETIENNE

Provider ID: 284432

Board Certified Specialty: No
ETIENNE M SCHONBACH

9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1073040580

Provider English Spoken: Y

Provider Language(s)
Spoken: German

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPHTHALMOLOGY

SHEILS, CATHERINE

Provider ID: 299935

Board Certified Specialty: No
CATHERINE R SHEILS

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1932605649

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OPHTHALMOLOGY

SHEILS, CATHERINE

Provider ID: 299937

Board Certified Specialty: No
CATHERINE R SHEILS

9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1932605649

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OPHTHALMOLOGY

SHEILS, CATHERINE

Provider ID: 305309

Board Certified Specialty: No
CATHERINE R SHEILS

9834 GENESEE AVE STE
200

LA JOLLA, CA 92037

Phone: (858) 457-3050

Fax: (858) 457-0851

After Hours Phone: (858)
457-3050

Provider Gender: Female

NPI: 1932605649

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS

D3. Directorio de proveedores especialistas

MEMORIAL HOSPITAL, SHARP


MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OPHTHALMOLOGY

SONG, DELU

Provider ID: 284425

Board Certified Specialty: No
DELU SONG



 9415 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1437689536

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Chinese, Mandarin


Cultural Competency: N


Hospital Affiliation: TRI CITY
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OPHTHALMOLOGY

TOPILOW, NICOLE

Provider ID: 284348

Board Certified Specialty: No
NICOLE TOPILOW


 9415 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1215468376


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OPTOMETRIST

AOTO, KIM

Provider ID: 296798

Board Certified Specialty: No
KIM N AOTO


 9850 GENESEE AVE STE
310


LA JOLLA, CA 92037
 Phone: (800) 898-2020
Fax: (844) 897-3788

 After Hours Phone: (800)
898-2020

Provider Gender: Female

NPI: 1780935650

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Vietnamese


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M 9:00AM-5:00PM
TU 8:30AM-4:30PM

W 7:30AM-4:15PM

TH 9:30AM-5:00PM

F 8:30AM-4:00PM

 Website: N/A


OPTOMETRIST

HOO, PAMELA

Provider ID: 269621

Board Certified Specialty: No
PAMELA A HOO

 9415 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (858) 534-6290
Fax: (858) 822-4438

 After Hours Phone: (858)
534-6290

Provider Gender: Female

NPI: 1275566010

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

D3. Directorio de proveedores especialistas

8:00AM-5:00PM
Website: N/A

OPTOMETRIST

JOMOC, CAITLIN

Provider ID: 299914

Board Certified Specialty: No
CAITLIN JOMOC

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1861164642

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OPTOMETRIST

JOMOC, CAITLIN

Provider ID: 299915

Board Certified Specialty: No
CAITLIN JOMOC

9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1861164642

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OPTOMETRIST

KIM, PHILIP

Provider ID: 287909

Board Certified Specialty: No
PHILIP KIM

9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8372

Fax: (888) 539-8781

After Hours Phone: (800)
926-8372

Provider Gender: Male

NPI: 1376929034

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPTOMETRIST

MCCLEAN, ESMERALDA

Provider ID: 269907

Board Certified Specialty: No
ESMERALDA C MCCLEAN

9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (858) 534-6290

Fax: (858) 534-8293

After Hours Phone: (858)

534-6290

Provider Gender: Female

NPI: 1962817981

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPTOMETRIST

VO, ANDREW

Provider ID: 304148

Board Certified Specialty: No
ANDREW M VO

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1790291565

Provider English Spoken: Y

Provider Language(s)

Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD



MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N




D3. Directorio de proveedores especialistas

 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*

OPTOMETRIST



VO, ANDREW

Provider ID: 201311
Board Certified Specialty: No
ANDREW M VO

 9415 CAMPUS POINT DR
LA JOLLA, CA 92093
 *Phone: (858) 534-6290*
 *After Hours Phone: (858) 534-6290*

Provider Gender: Male

NPI: 1790291565


 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Vietnamese*
Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*



 *Hours: M-F 8:00AM-5:00PM*

 *Website: N/A*

OPTOMETRIST



YU, CAROL

Provider ID: 301681
Board Certified Specialty: No
CAROL Y YU

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800)*

926-8273
Provider Gender: Female
NPI: 1639697451

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Chinese*

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

OPTOMETRIST



YU, CAROL

Provider ID: 301682
Board Certified Specialty: No
CAROL Y YU

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800) 926-8273*


Provider Gender: Female
NPI: 1639697451

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Chinese*

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

OPTOMETRIST



YU, CAROL

Provider ID: 258078
Board Certified Specialty: No
CAROL Y YU

 9415 CAMPUS POINT DR
LA JOLLA, CA 92093
 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800) 926-8273*


Provider Gender: Female
NPI: 1639697451

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Chinese*

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8:00AM-5:00PM*

 *Website: N/A*

OTOLARYNGOLOGY


BRUMUND, KEVIN

Provider ID: 299633
Board Certified Specialty: No
KEVIN T BRUMUND

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800) 926-8273*

Provider Gender: Male
NPI: 1033193669

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

D3. Directorio de proveedores especialistas

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A


OTOLARYNGOLOGY

BRUMUND, KEVIN

Provider ID: 299637

Board Certified Specialty: No
KEVIN T BRUMUND

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1033193669

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OTOLARYNGOLOGY

BRUMUND, KEVIN


Provider ID: 299636

Board Certified Specialty: No
KEVIN T BRUMUND

 3855 HEALTH SCIENCES

DR

LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1033193669

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OTOLARYNGOLOGY

CALIFANO, JOSEPH

Provider ID: 299463

Board Certified Specialty: No
JOSEPH A CALIFANO III

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male


NPI: 1881652972


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A


OTOLARYNGOLOGY

CALIFANO, JOSEPH

Provider ID: 299459

Board Certified Specialty: No
JOSEPH A CALIFANO III

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male


NPI: 1881652972

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A


OTOLARYNGOLOGY

CALIFANO, JOSEPH

Provider ID: 299460

Board Certified Specialty: No
JOSEPH A CALIFANO III

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1881652972

 Provider English Spoken: Y
Cultural Competency: N

D3. Directorio de proveedores especialistas

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OTOLARYNGOLOGY

CALIFANO, JOSEPH


Provider ID: 299458

Board Certified Specialty: No


JOSEPH A CALIFANO III

 3855 HEALTH SCIENCES DR

LA JOLLA, CA 92093

 Phone: (858) 822-6197

Fax: (858) 822-6198

 After Hours Phone: (858) 822-6197

Provider Gender: Male

NPI: 1881652972

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OTOLARYNGOLOGY


COFFEY, CHARLES

Provider ID: 299585

Board Certified Specialty: No

CHARLES S COFFEY

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1932297330

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

GREEN HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OTOLARYNGOLOGY


COFFEY, CHARLES

Provider ID: 299580

Board Certified Specialty: No

CHARLES S COFFEY

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1932297330

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OTOLARYNGOLOGY


COFFEY, CHARLES

Provider ID: 299581

Board Certified Specialty: No

CHARLES S COFFEY

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1932297330

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS


GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OTOLARYNGOLOGY

COFFEY, CHARLES

Provider ID: 299584


Board Certified Specialty: No

CHARLES S COFFEY

 3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

D3. Directorio de proveedores especialistas

NPI: 1932297330

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, SCRIPPS
GREEN HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OTOLARYNGOLOGY

DECONDE, ADAM

Provider ID: 299570

Board Certified Specialty: No
ADAM S DECONDE

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1588988919

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OTOLARYNGOLOGY


DECONDE, ADAM

Provider ID: 299565

Board Certified Specialty: No
ADAM S DECONDE

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (858) 657-8590

 After Hours Phone: (858)
657-8590

Provider Gender: Male

NPI: 1588988919

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OTOLARYNGOLOGY

DECONDE, ADAM

Provider ID: 299566

Board Certified Specialty: No
ADAM S DECONDE

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1588988919

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

OTOLARYNGOLOGY


DECONDE, ADAM


Provider ID: 299564

Board Certified Specialty: No
ADAM S DECONDE

 3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

 Phone: (858) 657-8590

 After Hours Phone: (858)
657-8590

Provider Gender: Male

NPI: 1588988919

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OTOLARYNGOLOGY

FRIEDMAN, RICK

Provider ID: 299528

Board Certified Specialty: No
RICK A FRIEDMAN

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

D3. Directorio de proveedores especialistas

Fax: (888) 539-8781

☐ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1982708558

☐ Provider English Spoken: Y

☐ Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PIH

HEALTH GOOD SAMARITAN HOSPITAL, CHILDRENS HOSP OF LOS ANGELES, SOUTH COAST GLOBAL MEDICAL CENTER INC, ANAHEIM GLOBAL MEDICAL CENTER, ORANGE COUNTY GLOBAL MEDICAL CENTER INC, CHAPMAN GLOBAL MEDICAL CENTER INC, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

OTOLARYNGOLOGY

FRIEDMAN, RICK

Provider ID: 299529

Board Certified Specialty: No

RICK A FRIEDMAN

📍 9350 CAMPUS POINT DR LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☐ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1982708558

☐ Provider English Spoken: Y

☐ Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PIH

HEALTH GOOD SAMARITAN HOSPITAL, CHILDRENS HOSP OF LOS ANGELES, SOUTH COAST GLOBAL MEDICAL CENTER INC, ANAHEIM GLOBAL MEDICAL CENTER, ORANGE COUNTY GLOBAL MEDICAL CENTER INC, CHAPMAN GLOBAL MEDICAL CENTER INC, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

OTOLARYNGOLOGY

FRIEDMAN, RICK

Provider ID: 299534

Board Certified Specialty: No

RICK A FRIEDMAN

📍 9300 CAMPUS POINT DR LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☐ After Hours Phone: (800)

926-8273

Provider Gender: Male

NPI: 1982708558

☐ Provider English Spoken: Y

☐ Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PIH

HEALTH GOOD SAMARITAN HOSPITAL, CHILDRENS HOSP OF LOS ANGELES, SOUTH COAST GLOBAL MEDICAL CENTER INC, ANAHEIM GLOBAL MEDICAL CENTER, ORANGE COUNTY GLOBAL MEDICAL CENTER INC, CHAPMAN GLOBAL MEDICAL CENTER INC, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

OTOLARYNGOLOGY

FRIEDMAN, RICK

Provider ID: 299533

Board Certified Specialty: No

RICK A FRIEDMAN

📍 3855 HEALTH SCIENCES DR LA JOLLA, CA 92093

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

Fax: (888) 539-8781


☐ After Hours Phone: (800)

D3. Directorio de proveedores especialistas

926-8273

Provider Gender: Male

NPI: 1982708558

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PIH

HEALTH GOOD SAMARITAN

HOSPITAL, CHILDRENS HOSP

OF LOS ANGELES, SOUTH

COAST GLOBAL MEDICAL

CENTER INC, ANAHEIM

GLOBAL MEDICAL CENTER,

ORANGE COUNTY GLOBAL

MEDICAL CENTER INC,

CHAPMAN GLOBAL MEDICAL

CENTER INC, UCSD LA JOLLA

JOHN SALLY THORNTON,

UCSD LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

OTOLARYNGOLOGY

GILANI, SAPIDEH


Provider ID: 299562

Board Certified Specialty: No

SAPIDEH GILANI

 3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)

926-8273

Provider Gender: Female

NPI: 1003825571

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

OTOLARYNGOLOGY


GILANI, SAPIDEH

Provider ID: 299558

Board Certified Specialty: No

SAPIDEH GILANI

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1003825571

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

OTOLARYNGOLOGY


GILANI, SAPIDEH

Provider ID: 299563

Board Certified Specialty: No

SAPIDEH GILANI

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1003825571

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

OTOLARYNGOLOGY


GILANI, SAPIDEH

Provider ID: 299557

Board Certified Specialty: Yes

SAPIDEH GILANI

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1003825571

 Provider English Spoken: Y




D3. Directorio de proveedores especialistas

Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Website: N/A*


OTOLARYNGOLOGY

GREENE, JACQUELINE



Provider ID: 298398
Board Certified Specialty: No
JACQUELINE J GREENE

 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800)*
926-8273

Provider Gender: Female
NPI: 1144583931

 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N


 *Accessibility: CONTACT*
PROVIDER
 *Website: N/A*

OTOLARYNGOLOGY

GREENE, JACQUELINE

Provider ID: 298394
Board Certified Specialty: No
JACQUELINE J GREENE

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800)*
926-8273

Provider Gender: Female

NPI: 1144583931


 *Provider English Spoken: Y*
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER


 *Website: N/A*

OTOLARYNGOLOGY

GREENE, JACQUELINE

Provider ID: 298395
Board Certified Specialty: No
JACQUELINE J GREENE

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800)*
926-8273

Provider Gender: Female

NPI: 1144583931


 *Provider English Spoken: Y*
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER


 *Website: N/A*


OTOLARYNGOLOGY

GREENE, JACQUELINE

Provider ID: 272958
Board Certified Specialty: No
JACQUELINE J GREENE


 9300 CAMPUS POINT DR
STE LLA
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800)*
926-8273

Provider Gender: Female

NPI: 1144583931

 *Provider English Spoken: Y*
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

 *Hours: M-F*

8:00AM-5:00PM


 *Website: N/A*


OTOLARYNGOLOGY

HARRIS, JEFFREY

Provider ID: 299577
Board Certified Specialty: No
JEFFREY P HARRIS


 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800)*
926-8273

Provider Gender: Male

NPI: 1417988783

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: SCRIPPS

D3. Directorio de proveedores especialistas


MEMORIAL HOSPITAL, UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OTOLARYNGOLOGY


HARRIS, JEFFREY

Provider ID: 299574

Board Certified Specialty: No

JEFFREY P HARRIS

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1417988783

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OTOLARYNGOLOGY


HARRIS, JEFFREY

Provider ID: 299578

Board Certified Specialty: No

JEFFREY P HARRIS

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1417988783

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OTOLARYNGOLOGY


HARRIS, JEFFREY

Provider ID: 299573

Board Certified Specialty: No

JEFFREY P HARRIS

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1417988783

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A


OTOLARYNGOLOGY

HOM, DAVID

Provider ID: 299512

Board Certified Specialty: No
DAVID B HOM

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1659305027


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


 Website: N/A

OTOLARYNGOLOGY


HOM, DAVID

Provider ID: 299516

Board Certified Specialty: No
DAVID B HOM

 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

D3. Directorio de proveedores especialistas

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1659305027

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OTOLARYNGOLOGY

HOM, DAVID

Provider ID: 299517

Board Certified Specialty: No
DAVID B HOM

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1659305027

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): Fax: (888) 539-8781

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OTOLARYNGOLOGY

HOM, DAVID


Provider ID: 299513

Board Certified Specialty: No
DAVID B HOM

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1659305027

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OTOLARYNGOLOGY

HUSSEMAN, JACOB

Provider ID: 301051

Board Certified Specialty: No
JACOB W HUSSEMAN

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1124034053


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, SCRIPPS
GREEN HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OTOLARYNGOLOGY


KARI, ELINA

Provider ID: 294828

Board Certified Specialty: No
ELINA KARI

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (858) 857-8590

 After Hours Phone: (858) 857-8590

Provider Gender: Female

NPI: 1780860536

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:
CHILDRENS HOSP OF LOS
ANGELES, PIH HEALTH
HOSPITAL - WHITTIER, UCSD
LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, RADY CHILDRENS

D3. Directorio de proveedores especialistas


HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


OTOLARYNGOLOGY

KARI, ELINA

Provider ID: 299447

Board Certified Specialty: No
ELINA KARI

 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1780860536

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation:
CHILDRENS HOSP OF LOS
ANGELES, PIH HEALTH
HOSPITAL - WHITTIER, UCSD
LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL

CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OTOLARYNGOLOGY

KARI, ELINA

Provider ID: 299448

Board Certified Specialty: No
ELINA KARI

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1780860536

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:
CHILDRENS HOSP OF LOS
ANGELES, PIH HEALTH
HOSPITAL - WHITTIER, UCSD
LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OTOLARYNGOLOGY

KARI, ELINA

Provider ID: 299442

Board Certified Specialty: No
ELINA KARI

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (858) 857-8590

 After Hours Phone: (858)
857-8590

Provider Gender: Female

NPI: 1780860536


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation:
CHILDRENS HOSP OF LOS
ANGELES, PIH HEALTH
HOSPITAL - WHITTIER, UCSD
LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OTOLARYNGOLOGY


KARI, ELINA

Provider ID: 299444

Board Certified Specialty: No
ELINA KARI

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1780860536

 Provider English Spoken: Y
Cultural Competency: N







Hospital Affiliation:
CHILDRENS HOSP OF LOS

D3. Directorio de proveedores especialistas







ANGELES, PIH HEALTH
HOSPITAL - WHITTIER, UCSD
LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

OTOLARYNGOLOGY

MAGIT, ANTHONY





Provider ID: 299479
Board Certified Specialty: No
ANTHONY E MAGIT
 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1891858379
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A



OTOLARYNGOLOGY

MAGIT, ANTHONY
Provider ID: 299478
Board Certified Specialty: No
ANTHONY E MAGIT
 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1891858379
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

OTOLARYNGOLOGY







MAGIT, ANTHONY

Provider ID: 299484
Board Certified Specialty: No
ANTHONY E MAGIT
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1891858379
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

OTOLARYNGOLOGY

MAGIT, ANTHONY

Provider ID: 299483
Board Certified Specialty: No
ANTHONY E MAGIT
 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1891858379
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A


OTOLARYNGOLOGY


MATSUOKA, AKIHIRO

Provider ID: 299593
Board Certified Specialty: No

D3. Directorio de proveedores especialistas

AKIHIRO MATSUOKA

 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1669630653


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

OTOLARYNGOLOGY


MATSUOKA, AKIHIRO

Provider ID: 299589

Board Certified Specialty: No

AKIHIRO MATSUOKA

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male


NPI: 1669630653

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

OTOLARYNGOLOGY


MATSUOKA, AKIHIRO

Provider ID: 299588

Board Certified Specialty: No

AKIHIRO MATSUOKA

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1669630653

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

OTOLARYNGOLOGY


MATSUOKA, AKIHIRO

Provider ID: 299594

Board Certified Specialty: No

AKIHIRO MATSUOKA

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1669630653

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

OTOLARYNGOLOGY


NGUYEN, QUYEN

Provider ID: 299605

Board Certified Specialty: No

QUYEN T NGUYEN

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1477524452

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

OTOLARYNGOLOGY

NGUYEN, QUYEN

Provider ID: 299608

Board Certified Specialty: No

QUYEN T NGUYEN

 3855 HEALTH SCIENCES
DR

D3. Directorio de proveedores especialistas

LA JOLLA, CA 92093
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1477524452
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, SCRIPPS
GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A

OTOLARYNGOLOGY

NGUYEN, QUYEN

Provider ID: 299604
Board Certified Specialty: No
QUYEN T NGUYEN
📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
☎ Phone: (858) 657-8590
🕒 After Hours Phone: (858) 657-8590
Provider Gender: Female
NPI: 1477524452
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, SCRIPPS
GREEN HOSPITAL
Medi-Cal Open Panel: Yes

Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

OTOLARYNGOLOGY

NGUYEN, QUYEN

Provider ID: 299609
Board Certified Specialty: No
QUYEN T NGUYEN
📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1477524452

☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, SCRIPPS
GREEN HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A

OTOLARYNGOLOGY

VAHABZADEH-HAGH, ANDREW

Provider ID: 299504

Board Certified Specialty: No
ANDREW M
VAHABZADEH-HAGH
📍 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
☎ Phone: (858) 822-6197
🕒 After Hours Phone: (858) 822-6197

Provider Gender: Male
NPI: 1346506920
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RONALD
REAGAN UCLA MED CTR,
SANTA MONICA UCLA MED
CTR, UCSD LA JOLLA JOHN
SALLY THORNTON, UCSD
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

OTOLARYNGOLOGY

VAHABZADEH-HAGH,

ANDREW

Provider ID: 299510
Board Certified Specialty: No
ANDREW M
VAHABZADEH-HAGH
📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800)

D3. Directorio de proveedores especialistas

926-8273
Provider Gender: Male
NPI: 1346506920
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RONALD REAGAN UCLA MED CTR, SANTA MONICA UCLA MED CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

OTOLARYNGOLOGY

VAHABZADEH-HAGH, ANDREW

Provider ID: 299505
Board Certified Specialty: No
ANDREW M
VAHABZADEH-HAGH
 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1346506920
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RONALD REAGAN UCLA MED CTR, SANTA MONICA UCLA MED CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD

MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

OTOLARYNGOLOGY

VAHABZADEH-HAGH, ANDREW

Provider ID: 299506
Board Certified Specialty: No
ANDREW M
VAHABZADEH-HAGH
 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1346506920
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RONALD REAGAN UCLA MED CTR, SANTA MONICA UCLA MED CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

OTOLARYNGOLOGY

WATSON, DEBORAH

Provider ID: 299643
Board Certified Specialty: No
DEBORAH WATSON
 3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1346270816
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

OTOLARYNGOLOGY

WATSON, DEBORAH

Provider ID: 299640
Board Certified Specialty: Yes
DEBORAH WATSON
 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1346270816
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS

D3. Directorio de proveedores especialistas

GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OTOLARYNGOLOGY


WATSON, DEBORAH

Provider ID: 299638

Board Certified Specialty: No

DEBORAH WATSON

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (858) 657-8590

Fax: (858) 657-8682

 After Hours Phone: (858)
657-8590

Provider Gender: Female

NPI: 1346270816

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS

GREEN HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OTOLARYNGOLOGY


WATSON, DEBORAH

Provider ID: 299644

Board Certified Specialty: No

DEBORAH WATSON

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1346270816

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS

GREEN HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OTOLARYNGOLOGY


WEISSBROD, PHILIP

Provider ID: 299613

Board Certified Specialty: No

PHILIP A WEISSBROD

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1366590853

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OTOLARYNGOLOGY

WEISSBROD, PHILIP


Provider ID: 299612


Board Certified Specialty: No

PHILIP A WEISSBROD

 3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

 Phone: (858) 657-8590

 After Hours Phone: (858)
657-8590

Provider Gender: Male

NPI: 1366590853

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS


GREEN HOSPITAL


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OTOLARYNGOLOGY


WEISSBROD, PHILIP

Provider ID: 299611

Board Certified Specialty: No

PHILIP A WEISSBROD

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (858) 657-8590

 After Hours Phone: (858)

D3. Directorio de proveedores especialistas

657-8590
Provider Gender: Male
NPI: 1366590853
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, SCRIPPS
GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

OTOLARYNGOLOGY

WEISSBROD, PHILIP

Provider ID: 299616
Board Certified Specialty: No
PHILIP A WEISSBROD
📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1366590853
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, SCRIPPS
GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT

PROVIDER
🌐 Website: N/A

OTOLARYNGOLOGY

YAN, CAROL

Provider ID: 242138
Board Certified Specialty: No
CAROL H YAN
📍 9350 CAMPUS POINT DR
STE LLA
LA JOLLA, CA 92037
☎ Phone: (858) 657-8590
🕒 After Hours Phone: (858)
657-8590
Provider Gender: Female
NPI: 1619237260
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Chinese
Cultural Competency: N
Hospital Affiliation: Stanford
Health Care, LUCILE SALTER
PACKARD CHILDRENS HOSP,
UCSD LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

OTOLARYNGOLOGY

YAN, CAROL

Provider ID: 298415
Board Certified Specialty: No
CAROL H YAN

📍 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1619237260
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Chinese
Cultural Competency: N
Hospital Affiliation: Stanford
Health Care, LUCILE SALTER
PACKARD CHILDRENS HOSP,
UCSD LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A

OTOLARYNGOLOGY

YAN, CAROL

Provider ID: 298411
Board Certified Specialty: No
CAROL H YAN
📍 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1619237260
☐ Provider English Spoken: Y
☐ Provider Language(s)


D3. Directorio de proveedores especialistas

Spoken: Chinese
Cultural Competency: N
Hospital Affiliation: Stanford Health Care, LUCILE SALTER PACKARD CHILDRENS HOSP, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A


OTOLARYNGOLOGY

YAN, CAROL

Provider ID: 298416
Board Certified Specialty: No
CAROL H YAN
 9300 CAMPUS POINT DR LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1619237260
 Provider English Spoken: Y
 Provider Language(s) Spoken: Chinese
Cultural Competency: N
Hospital Affiliation: Stanford Health Care, LUCILE SALTER PACKARD CHILDRENS HOSP, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999







American Sign Language (ASL):  Website: N/A
N

 Accessibility: CONTACT PROVIDER

 Website: N/A








PATHOLOGY ANATOMIC CLINICAL

AISAGBONHI, OMONIGHO

Provider ID: 201304
Board Certified Specialty: No
OMONIGHO A AISAGBONHI
 9300 CAMPUS POINT DR LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1043571045
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS GREEN HOSPITAL, SCRIPPS GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

PATHOLOGY ANATOMIC CLINICAL

AISAGBONHI, OMONIGHO

Provider ID: 275750
Board Certified Specialty: No
OMONIGHO A AISAGBONHI
 9444 MEDICAL CENTER DR LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1043571045
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS GREEN HOSPITAL, SCRIPPS GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

PATHOLOGY ANATOMIC CLINICAL

D3. Directorio de proveedores especialistas

ALLEN, ELIZABETH

Provider ID: 275757

Board Certified Specialty: No
ELIZABETH S ALLEN

9444 MEDICAL CENTER DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1174814065

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

UCSD MEDICAL CTR, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,

SCRIPPS GREEN HOSPITAL,

SCRIPPS GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PATHOLOGY ANATOMIC

CLINICAL

BROOME, HELEN

Provider ID: 275722

Board Certified Specialty: No

HELEN E BROOME

9444 MEDICAL CENTER DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1184674145

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PATHOLOGY ANATOMIC

CLINICAL

BUI, JACK

Provider ID: 275746

Board Certified Specialty: No

JACK D BUI

9444 MEDICAL CENTER DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1942529821

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PATHOLOGY ANATOMIC

CLINICAL

DON, MICHELLE

Provider ID: 275816

Board Certified Specialty: No

MICHELLE D DON

9444 MEDICAL CENTER DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1205288396

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

D3. Directorio de proveedores especialistas

8:00AM-5:00PM
Website: N/A

PATHOLOGY ANATOMIC

CLINICAL

DON, MICHELLE

Provider ID: 247149

Board Certified Specialty: No
MICHELLE D DON

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (858) 249-4410

After Hours Phone: (858)
249-4410

Provider Gender: Female

NPI: 1205288396

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PATHOLOGY ANATOMIC

CLINICAL

ELKIND, JAE

Provider ID: 284903

Board Certified Specialty: No
JAE B ELKIND

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1922497700

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PATHOLOGY ANATOMIC

CLINICAL

HU, JINGJING

Provider ID: 243965

Board Certified Specialty: No
JINGJING HU

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1538574744

Provider English Spoken: Y
Provider Language(s)
Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PATHOLOGY ANATOMIC

CLINICAL

HU, JINGJING

Provider ID: 243966

Board Certified Specialty: No
JINGJING HU

9444 MEDICAL CENTER DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1538574744

Provider English Spoken: Y
Provider Language(s)
Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PATHOLOGY ANATOMIC

CLINICAL

D3. Directorio de proveedores especialistas

ROMA, ANDRES

Provider ID: 275827

Board Certified Specialty: No

ANDRES A ROMA

9444 MEDICAL CENTER DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1295912657

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PATHOLOGY ANATOMIC

CLINICAL

SHABAIK, AHMED

Provider ID: 275782

Board Certified Specialty: No

AHMED S SHABAIK

9444 MEDICAL CENTER DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1679521579

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PATHOLOGY ANATOMIC

CLINICAL

VAVINSKAYA, VERA

Provider ID: 275840

Board Certified Specialty: No

VERA VAVINSKAYA

9444 MEDICAL CENTER DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1174757181

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PATHOLOGY ANATOMIC

CLINICAL

ZARE, SOMAYE

Provider ID: 275814

Board Certified Specialty: No

SOMAYE Y ZARE

9444 MEDICAL CENTER DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1700334802

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PATHOLOGY ANATOMIC

CLINICAL

ZARE, SOMAYE

Provider ID: 203172

Board Certified Specialty: No

D3. Directorio de proveedores especialistas

SOMAYE Y ZARE

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1700334802

Provider English Spoken: Y

Provider Language(s)

Spoken: Farsi

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

PATHOLOGY ANATOMIC

CLINICAL

ZHANG, HAIYAN

Provider ID: 203176

Board Certified Specialty: No

HAIYAN ZHANG

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1457617110

Provider English Spoken: Y

Provider Language(s)

Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,

SCRIPPS MEMORIAL

HOSPITAL, SCRIPPS MERCY

HOSPITAL, SCRIPPS MERCY

HOSPITAL CHULA VISTA,

SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,

SCRIPPS GREEN HOSPITAL,

SCRIPPS GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

PATHOLOGY ANATOMIC

CLINICAL

ZHANG, HAIYAN

Provider ID: 275841

Board Certified Specialty: No

HAIYAN ZHANG

9444 MEDICAL CENTER DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1457617110

Provider English Spoken: Y

Provider Language(s)

Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,

SCRIPPS MEMORIAL

HOSPITAL, SCRIPPS MERCY

HOSPITAL, SCRIPPS MERCY

HOSPITAL CHULA VISTA,

SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,

SCRIPPS GREEN HOSPITAL,

SCRIPPS GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

AINSWORTH, DELISSA

Provider ID: 243366

Board Certified Specialty: No

DELISSA M AINSWORTH

8910 VILLA LA JOLLA DR
STE 100

LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1750734893

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:

SOUTHWEST HEALTHCARE

INLAND VALLEY HOSPITAL,

SOUTHWEST HEALTHCARE

RANCHO SPRINGS HOSPITAL,


D3. Directorio de proveedores especialistas

UCSD MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT


ALBRIGHT, KELSEY

Provider ID: 284764

Board Certified Specialty: No
KELSEY A ALBRIGHT

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1235653148

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT

ALLERS, JENNA

Provider ID: 301037

Board Certified Specialty: No
JENNA C ALLERS

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1730605486

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SALINAS
VALLEY MEMORIAL HOSP

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PHYSICIANS ASSISTANT


ARMEEN, GARY

Provider ID: 247036

Board Certified Specialty: No
GARY P ARMEEN JR

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1760774863

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT


BOYD, LISA

Provider ID: 217650

Board Certified Specialty: No
LISA N BOYD

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1871859421

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT

BRUECKNER, TAMMIE

D3. Directorio de proveedores especialistas

Provider ID: 255557

Board Certified Specialty: No
TAMMIE N BRUECKNER

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1407212376

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

CHERRY, REENA

Provider ID: 243349

Board Certified Specialty: No
REENA W CHERRY

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1689729683

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

CHERRY, REENA

Provider ID: 269494

Board Certified Specialty: No
REENA W CHERRY

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1689729683

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

COOKISH, DAVID

Provider ID: 286591

Board Certified Specialty: No
DAVID ANDREW COOKISH

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1215338884

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

CRIFE, TAYLOR

Provider ID: 210983

Board Certified Specialty: No
TAYLOR M CRIFE

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1659827087

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

D3. Directorio de proveedores especialistas


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT

DEMASCO, MICHAEL

Provider ID: 278969

Board Certified Specialty: No
MICHAEL A DEMASCO

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1467926295

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT


DEMOOR, PATRICIA

Provider ID: 212879

Board Certified Specialty: No
PATRICIA A DEMOOR

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1477721702


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT


HASEGAWA, CHRIS


Provider ID: 247205

Board Certified Specialty: No
CHRIS HASEGAWA

 8939 VILLA LA JOLLA DR
STE 110

LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1225698962

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT


HIGGINS, JOSHUA

Provider ID: 287135

Board Certified Specialty: No
JOSHUA B HIGGINS

 8910 VILLA LA JOLLA DR
STE 200

LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1861624181

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT

HIGGINS, JOSHUA

Provider ID: 287136

Board Certified Specialty: No

D3. Directorio de proveedores especialistas

JOSHUA B HIGGINS

9434 MEDICAL CENTER DR N
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1861624181

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

HUNTER, JACOB

Provider ID: 298431

Board Certified Specialty: No
JACOB A HUNTER

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1114459765

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): Provider English Spoken: Y
Cultural Competency: N

Accessibility: CONTACT
PROVIDER

Website: N/A

PHYSICIANS ASSISTANT

HUNTER, JACOB

Provider ID: 298432

Board Certified Specialty: No
JACOB A HUNTER

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1114459765

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

PHYSICIANS ASSISTANT

HUNTER, JACOB

Provider ID: 298429

Board Certified Specialty: No
JACOB A HUNTER

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1114459765

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

PHYSICIANS ASSISTANT

HUNTER, JACOB

Provider ID: 287450

Board Certified Specialty: No
JACOB A HUNTER

9350 CAMPUS POINT DR
STE LLA
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1114459765

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

HUNTER, JACOB


Provider ID: 279334

Board Certified Specialty: No
JACOB A HUNTER

D3. Directorio de proveedores especialistas

 8910 VILLA LA JOLLA DR
STE 100

LA JOLLA, CA 92037

 Phone: (800) 826-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
826-8273

Provider Gender: Male


NPI: 1114459765


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT


LEE, JENNIFER

Provider ID: 309997

Board Certified Specialty: No
JENNIFER C LEE

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female


NPI: 1265081871

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PHYSICIANS ASSISTANT


LEE, JENNIFER


Provider ID: 309996

Board Certified Specialty: No

JENNIFER C LEE

 9434 MEDICAL CENTER DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1265081871


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

PHYSICIANS ASSISTANT


LIN, JOYCE


Provider ID: 265147

Board Certified Specialty: No
LIN, JOYCE

 3855 HEALTH SCIENCES
DR



LA JOLLA, CA 92093

 Phone: (858) 554-1212

 After Hours Phone: (858)
554-1212

Provider Gender: Female

NPI: 1427681022

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Taiwanese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT

LIN, JOYCE

Provider ID: 265146

Board Certified Specialty: No
LIN, JOYCE

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 888-9268

Fax: (888) 539-8781

 After Hours Phone: (800)
888-9268

Provider Gender: Female

NPI: 1427681022

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Taiwanese

Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT

D3. Directorio de proveedores especialistas

LUONG, TRAN

Provider ID: 279015

Board Certified Specialty: No
TRAN H LUONG

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1821532292

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish,
Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

LUONG, TRAN

Provider ID: 279014

Board Certified Specialty: No
TRAN H LUONG

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1821532292

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish,
Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

MARTIN, HALEY

Provider ID: 305025

Board Certified Specialty: No
HALEY R MARTIN

3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1093440836

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

PHYSICIANS ASSISTANT

MARTIN, HALEY

Provider ID: 305024

Board Certified Specialty: No
HALEY R MARTIN

9300 CAMPUS POINT DR

LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1093440836

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

PHYSICIANS ASSISTANT

MARTIN, HALEY

Provider ID: 305027

Board Certified Specialty: No
HALEY R MARTIN

9434 MEDICAL CENTER DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1093440836

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

PHYSICIANS ASSISTANT

MCADAMS, JOSEPH

Provider ID: 280612

Board Certified Specialty: No

D3. Directorio de proveedores especialistas

JOSEPH MCADAMS

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1104371251

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

MERRILL, COREY

Provider ID: 258039

Board Certified Specialty: No
COREY M MERRILL

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1386032308

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): MICHELLE R OKADA

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

OKADA, MICHELLE

Provider ID: 278016

Board Certified Specialty: No
MICHELLE R OKADA

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1497129860

Provider English Spoken: Y

Provider Language(s)
Spoken: Japanese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

OKADA, MICHELLE

Provider ID: 278017

Board Certified Specialty: No

3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1497129860

Provider English Spoken: Y

Provider Language(s)
Spoken: Japanese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

PELIO, DARREN

Provider ID: 293440

Board Certified Specialty: No
DARREN A PELIO

3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

Phone: (858) 822-7967

Fax: (858) 822-6395

After Hours Phone: (858)
822-7967

Provider Gender: Male


NPI: 1386791028

Provider English Spoken: Y

D3. Directorio de proveedores especialistas

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*


PHYSICIANS ASSISTANT

PELIO, DARREN

Provider ID: 293442

Board Certified Specialty: No
DARREN A PELIO

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 *Phone: (800) 926-8276*

Fax: (888) 539-8784

 *After Hours Phone: (800) 926-8276*

Provider Gender: Male

NPI: 1386791028

 *Provider English Spoken: Y*
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*


PHYSICIANS ASSISTANT

PERREAULT, MARK

Provider ID: 283584

Board Certified Specialty: No
MARK R PERREAULT

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 *Phone: (800) 926-8273*

 *After Hours Phone: (800)*

926-8273

Provider Gender: Male

NPI: 1356749451


 *Provider English Spoken: Y*
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*
8:00AM-5:00PM

 *Website: N/A*


PHYSICIANS ASSISTANT


PERREAULT, MARK

Provider ID: 283583

Board Certified Specialty: No
MARK R PERREAULT

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

 *After Hours Phone: (800) 926-8273*

Provider Gender: Male

NPI: 1356749451


 *Provider English Spoken: Y*
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*
8:00AM-5:00PM

 *Website: N/A*


PHYSICIANS ASSISTANT


ROBERTS, AUDREY

Provider ID: 253255

Board Certified Specialty: No
AUDREY ELIZABETH ZANZUCCHI

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 *Phone: (858) 657-7876*

 *After Hours Phone: (858) 657-7876*

Provider Gender: Female

NPI: 1265960256

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*
8:00AM-5:00PM

 *Website: N/A*


PHYSICIANS ASSISTANT


ROBERTS, AUDREY

Provider ID: 253254

Board Certified Specialty: No
AUDREY ELIZABETH ZANZUCCHI


 9300 CAMPUS POINT DR
LA JOLLA, CA 92037


 *Phone: (619) 543-5540*

 *After Hours Phone: (619) 543-5540*

Provider Gender: Female

NPI: 1265960256

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*


Cultural Competency: N


Medi-Cal Open Panel: Yes

D3. Directorio de proveedores especialistas

Min/Max Age: 0\999

American Sign Language (ASL):  N
After Hours Phone: (800) 926-8273

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT


ROMO, JORGE

Provider ID: 309983

Board Certified Specialty: No
JORGE ROMO

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1275962383


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: EL CENTRO
REGIONAL MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

PHYSICIANS ASSISTANT


SAIKHON, TALIA

Provider ID: 293439

Board Certified Specialty: No
TALIA N SAIKHON

 8910 VILLA LA JOLLA DR
STE 100


LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

Provider Gender: Female

NPI: 1699263905

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

PHYSICIANS ASSISTANT


SANCHEZ, MICHAEL


Provider ID: 206907

Board Certified Specialty: No
MICHAEL R SANCHEZ

 8939 VILLA LA JOLLA DR
STE 110

LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1184135006

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS

GREEN HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, SCRIPPS


MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT


SCHWARTZEL, KEVIN

Provider ID: 214276

Board Certified Specialty: No
KEVIN N SCHWARTZEL

 8910 VILLA LA JOLLA DR
STE 100

LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male


NPI: 1104277847


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 8:00AM-8:00PM
M-F 8:00AM-5:00PM

SA 8:00AM-8:00PM

 Website: N/A

PHYSICIANS ASSISTANT







SHAUL, SHERA

Provider ID: 247975

Board Certified Specialty: No
SHERA M SHAUL

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

D3. Directorio de proveedores especialistas

 Phone: (800) 926-8273
 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1336659507
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PHYSICIANS ASSISTANT

SHAUL, SHERA

Provider ID: 247976
Board Certified Specialty: No
SHERA M SHAUL
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8373
 After Hours Phone: (800) 926-8373
Provider Gender: Female
NPI: 1336659507
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PHYSICIANS ASSISTANT

SPEH, BRIAN




Provider ID: 305010
Board Certified Specialty: No
BRIAN A SPEH
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1124593926
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Website: N/A

PHYSICIANS ASSISTANT

TESFAI, HELEN






Provider ID: 277072
Board Certified Specialty: No
HELEN S TESFAI
 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (800) 926-8273
 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1942724042
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A




PHYSICIANS ASSISTANT

WAHLIN, TAMARA

Provider ID: 299596
Board Certified Specialty: No
TAMARA A WAHLIN
 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1083823322
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Website: N/A

PHYSICIANS ASSISTANT

WAHLIN, TAMARA

Provider ID: 299602
Board Certified Specialty: No
TAMARA A WAHLIN
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273

D3. Directorio de proveedores especialistas

Provider Gender: Female

NPI: 1083823322


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

PHYSICIANS ASSISTANT


WAHLIN, TAMARA

Provider ID: 299601

Board Certified Specialty: No
TAMARA A WAHLIN

 3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1083823322


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PHYSICIANS ASSISTANT

WEIR, JACQUELINE

Provider ID: 278202

Board Certified Specialty: No
JACQUELINE R WEIR

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (800) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1932494499

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PSYCHOLOGIST


BAILIS, JESSICA


Provider ID: 300043

Board Certified Specialty: No
JESSICA R BAILIS

 8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1760739049

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

PSYCHOLOGIST


BOOTH, CHRISTOPHER


Provider ID: 209117

Board Certified Specialty: No
CHRISTOPHER R BOOTH

 8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1568893162


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PSYCHOLOGIST


BOOTH, CHRISTOPHER

Provider ID: 209118

Board Certified Specialty: No
CHRISTOPHER R BOOTH

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

D3. Directorio de proveedores especialistas

NPI: 1568893162

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PSYCHOLOGIST

BOUTELLE, KERRI

Provider ID: 302876

Board Certified Specialty: No

KERRI N BOUTELLE

3344 N TORREY PINES CT
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1780620906

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Website: N/A

PSYCHOLOGIST

BOUTELLE, KERRI

Provider ID: 240034

Board Certified Specialty: No

KERRI N BOUTELLE

8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1780620906

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PSYCHOLOGIST

BOUTELLE, KERRI

Provider ID: 258988

Board Certified Specialty: No

KERRI N BOUTELLE

8950 VILLA LA JOLLA DR
STE C212

LA JOLLA, CA 92037

Phone: (858) 246-1654

After Hours Phone: (858)
246-1654

Provider Gender: Male

NPI: 1780620906

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PSYCHOLOGIST

CHESHER, NICHOLAS

Provider ID: 273812

Board Certified Specialty: No

NICHOLAS J CHESHER

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1124539697

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

D3. Directorio de proveedores especialistas

 Website: N/A

PSYCHOLOGIST


CRANDAL, BRENT

Provider ID: 291463

Board Certified Specialty: No
BRENT R CRANDAL

 8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

 Phone: (800) 926-8372

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8372

Provider Gender: Male

NPI: 1588739452

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

PSYCHOLOGIST


DUARTE, KRISTEN


Provider ID: 255479

Board Certified Specialty: No
KRISTEN L DUARTE

 8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1093119364

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PSYCHOLOGIST


DUARTE, KRISTEN

Provider ID: 255480

Board Certified Specialty: No
KRISTEN L DUARTE

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1093119364

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PSYCHOLOGIST

EICHEN, DAWN

Provider ID: 302888

Board Certified Specialty: No
DAWN M EICHEN

 3344 N TORREY PINES CT
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1861043366

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

PSYCHOLOGIST


EICHEN, DAWN

Provider ID: 245715

Board Certified Specialty: No
DAWN M EICHEN

 8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

 Phone: (800) 926-8273





Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female




NPI: 1861043366

D3. Directorio de proveedores especialistas


 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*



PSYCHOLOGIST

EICHEN, DAWN

Provider ID: 259524
Board Certified Specialty: No
DAWN M EICHEN
 8950 VILLA LA JOLLA DR STE C212
LA JOLLA, CA 92037
 *Phone: (858) 246-1654*
Fax: (858) 246-3181
 *After Hours Phone: (858) 246-1654*
Provider Gender: Female

NPI: 1861043366

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT*

PROVIDER
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

PSYCHOLOGIST

LASSWELL, EVE

Provider ID: 208260
Board Certified Specialty: No
EVE N LASSWELL
 8950 VILLA LA JOLLA DR STE C101
LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
 *After Hours Phone: (800) 926-8273*

Provider Gender: Female

NPI: 1013483635

 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*


PSYCHOLOGIST

LINKE, SARAH

Provider ID: 273640
Board Certified Specialty: No
SARAH E LINKE
 8939 VILLA LA JOLLA DR
LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800) 926-8273*

Provider Gender: Female

NPI: 1487026415

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*


PSYCHOLOGIST

MAGINOT-CHESHER, TAMARA




Provider ID: 273224
Board Certified Specialty: No
TAMARA R MAGINOT CHESHER
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 *Phone: (858) 534-7792*
Fax: (619) 471-9017
 *After Hours Phone: (858) 534-7792*

Provider Gender: Female

NPI: 1043441165

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

D3. Directorio de proveedores especialistas

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*

PSYCHOLOGIST



MENDEZ, ANDRES

Provider ID: 279058
Board Certified Specialty: No
ANDRES G MENDEZ

 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800)
926-8273*

Provider Gender: Male

NPI: 1841482692

 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N


*Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON*


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

PSYCHOLOGIST

PELHAM, WILLIAM

Provider ID: 307681
Board Certified Specialty: No
WILLIAM E PELHAM

 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
 *After Hours Phone: (800)
926-8273*

Provider Gender: Male

NPI: 1306629399

 *Provider English Spoken: Y*
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N



 *Accessibility: CONTACT PROVIDER*


 *Website: N/A*

PSYCHOLOGIST

REED, KRISTIE

Provider ID: 291395
Board Certified Specialty: No
KRISTIE L REED

 8950 VILLA LA JOLLA DR
STE C212
LA JOLLA, CA 92037
 *Phone: (800) 926-8372*
Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8372*

Provider Gender: Female

NPI: 1679869556


 *Provider English Spoken: Y*
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*


 *Website: N/A*

PSYCHOLOGIST

REED, KRISTIE

Provider ID: 302867
Board Certified Specialty: No
KRISTIE L REED

 3344 N TORREY PINES CT
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Female

NPI: 1679869556

 *Provider English Spoken: Y*
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*


 *Website: N/A*


PSYCHOLOGIST

TARLE, STEPHANIE

Provider ID: 303116
Board Certified Specialty: No
STEPHANIE J TARLE


 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Female

NPI: 1659920403

 *Provider English Spoken: Y*
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

D3. Directorio de proveedores especialistas

American Sign Language (ASL): NPI: 1497139059

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


PSYCHOLOGIST

THOMAS, KELSEY

Provider ID: 310060

Board Certified Specialty: No
KELSEY R THOMAS

 8950 VILLA LA JOLLA DR
STE 101
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1700264264

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


 Website: N/A


PSYCHOLOGIST

ZLATAR, ZVINKA

Provider ID: 272712

Board Certified Specialty: No
ZVINKA Z ZLATAR


 9444 MEDICAL CENTER DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999


American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A


PULMONARY DISEASES

BAILEY, JACOB


Provider ID: 299925

Board Certified Specialty: No
JACOB A BAILEY

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1598150039

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


PULMONARY DISEASES


JOSHUA, JISHA

Provider ID: 238060

Board Certified Specialty: No
JISHA K JOSHUA

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1023436417

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Hindi, Malayalam

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A


PULMONARY DISEASES

MCGUIRE, WILLIAM

Provider ID: 299987

Board Certified Specialty: No
WILLIAM C MCGUIRE

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781



 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1841684081

 Provider English Spoken: Y

D3. Directorio de proveedores especialistas








Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR, SHARP
MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,
SHARP CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Website: N/A*

PULMONARY DISEASES





PEARCE, ALEX

Provider ID: 300054
Board Certified Specialty: No
ALEX K PEARCE
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800)*
926-8273
Provider Gender: Female
NPI: 1265896856
 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Website: N/A*

RADIOLOGY DIAGNOSTIC **BERMAN, ZACHARY**







Provider ID: 269319
Board Certified Specialty: No
ZACHARY T BERMAN
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800)*
926-8273
Provider Gender: Male
NPI: 1033521190
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

RADIOLOGY DIAGNOSTIC **BRANCH, CODY**

Provider ID: 283676
Board Certified Specialty: No
CODY BRANCH
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800)*
926-8273
Provider Gender: Male
NPI: 1851770622
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

RADIOLOGY DIAGNOSTIC **CARSWELL, AIMEE**

Provider ID: 303056
Board Certified Specialty: No
AIMEE P CARSWELL
 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 *Phone: (858) 554-1212*
Fax: (858) 795-1195
 *After Hours Phone: (858)*
554-1212
Provider Gender: Female
NPI: 1619156635
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation:
EISENHOWER MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Website: N/A*

RADIOLOGY DIAGNOSTIC **CHENG, KAREN**

Provider ID: 283227
Board Certified Specialty: No

D3. Directorio de proveedores especialistas

KAREN Y CHENG

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1427430511

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

RADIOLOGY DIAGNOSTIC

FAZELI, SOUDABEH

Provider ID: 299993

Board Certified Specialty: No
SOUDABEH FAZELI

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1639553613

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

RADIOLOGY DIAGNOSTIC

FORCIER, NANCY

Provider ID: 286955

Board Certified Specialty: No
NANCY J FORCIER

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1497721724

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL,
Providence Mission Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

RADIOLOGY DIAGNOSTIC

FOWLER, KATHRYN

Provider ID: 201290

Board Certified Specialty: No
KATHRYN J FOWLER

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1255457941

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL

CTR, SCRIPPS MEMORIAL
HOSPITAL, SCRIPPS MERCY

HOSPITAL, SCRIPPS MERCY

HOSPITAL CHULA VISTA,

SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,

SCRIPPS GREEN HOSPITAL,

SCRIPPS GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

RADIOLOGY DIAGNOSTIC

GRISSOM, MURRAY

Provider ID: 271568

Board Certified Specialty: No
MURRAY J GRISSOM

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male




NPI: 1720465396

Provider English Spoken: Y

D3. Directorio de proveedores especialistas

Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON,
Stanford Health Care,
STANFORD HEALTH CARE
TRI-VALLEY

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A



RADIOLOGY DIAGNOSTIC

HANNSUN, GEMMY

Provider ID: 282790
Board Certified Specialty: No
GEMMY HANNSUN




 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1992120026

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Khmer, Spanish

Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A


RADIOLOGY DIAGNOSTIC

HORKY, LAURA




Provider ID: 241854
Board Certified Specialty: No
LAURA L HORKY

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1598967812

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999




American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

RADIOLOGY DIAGNOSTIC


HORKY, LAURA




Provider ID: 241855
Board Certified Specialty: No
LAURA L HORKY

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
 Phone: (800) 926-8273
 After Hours Phone: (800)

926-8273

Provider Gender: Female
NPI: 1598967812

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A


RADIOLOGY DIAGNOSTIC

JAFFRAY, PAUL

Provider ID: 299959
Board Certified Specialty: No
PAUL M JAFFRAY

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1275700999

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Los Angeles
General Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

D3. Directorio de proveedores especialistas

 Website: N/A


RADIOLOGY DIAGNOSTIC

JAZBEH, SAMMER

Provider ID: 271128

Board Certified Specialty: No
SAMMER JAZBEH

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1770825457

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,

PROVIDENCE LITTLE CO OF

MARY MED CTR TORRANCE,

PROVIDENCE LITTLE CO OF

MARY MED CTR SAN PEDRO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999


American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A


RADIOLOGY DIAGNOSTIC

KHURANA, AMAN

Provider ID: 307767

Board Certified Specialty: No
AMAN KHURANA

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1427496710

 Provider English Spoken: Y


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


RADIOLOGY DIAGNOSTIC

KONDILI, DHIMITER

Provider ID: 283144

Board Certified Specialty: No
DHIMITER KONDILI

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1699125450

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:


EISENHOWER MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A


RADIOLOGY DIAGNOSTIC

MARKS, ROBERT

Provider ID: 300066

Board Certified Specialty: No
ROBERT M MARKS

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1952389934

 Provider English Spoken: Y

Cultural Competency: N


Hospital Affiliation: ST MARY
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


RADIOLOGY DIAGNOSTIC

RITCHIE, DAVID

Provider ID: 300033

Board Certified Specialty: No
DAVID J RITCHIE

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273




Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1407201916

D3. Directorio de proveedores especialistas

 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*


RADIOLOGY DIAGNOSTIC

SADAT, SAYED


Provider ID: 299967
Board Certified Specialty: No
SAYED W SADAT

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
 *After Hours Phone: (800) 926-8273*

Provider Gender: Male
NPI: 1679000806

 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*


RADIOLOGY DIAGNOSTIC

SCHULTZ, HEATHER

Provider ID: 240343
Board Certified Specialty: No
HEATHER M SCHULTZ


 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
 *After Hours Phone: (800) 926-8273*


Provider Gender: Female
NPI: 1871910810

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


 *Hours: M-F 8:00AM-5:00PM*

 *Website: N/A*

RADIOLOGY DIAGNOSTIC


SEARLEMAN, ADAM

Provider ID: 299950
Board Certified Specialty: No
ADAM C SEARLEMAN

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800) 926-8273*

Provider Gender: Male
NPI: 1134570641

 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


 *Website: N/A*

RADIOLOGY DIAGNOSTIC

SLATER, JERRY


Provider ID: 283311
Board Certified Specialty: No
JERRY SLATER

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*
Fax: (888) 539-8781


 *After Hours Phone: (800) 926-8273*

Provider Gender: Male
NPI: 1851746382

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, LOMA LINDA UNIVERSITY MED CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8:00AM-5:00PM*


 *Website: N/A*

RADIOLOGY DIAGNOSTIC

SPENGLER, NATHAN

Provider ID: 303050
Board Certified Specialty: No
NATHAN M SPENGLER

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800) 926-8273*

Provider Gender: Male

D3. Directorio de proveedores especialistas

NPI: 1992919666

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

UNIVERSITY OF CALIFORNIA
IRVINE MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


RADIOLOGY DIAGNOSTIC

STEPENOSKY, JAMES

Provider ID: 309704

Board Certified Specialty: No
JAMES E STEPENOSKY

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1598738577


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

RADIOLOGY DIAGNOSTIC


TADDONIO, MICHAEL


Provider ID: 240406

Board Certified Specialty: No

MICHAEL A TADDONIO

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1386987261

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


RADIOLOGY DIAGNOSTIC

TADROS, ANTHONY

Provider ID: 268545

Board Certified Specialty: No
ANTHONY S TADROS

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1306112057

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


RADIOLOGY DIAGNOSTIC

UNSDORFER, KYLE

Provider ID: 300036

Board Certified Specialty: No
KYLE M UNSDORFER

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1285165183


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

RADIOLOGY DIAGNOSTIC

VAHDAT, NOUSHIN

Provider ID: 300069

Board Certified Specialty: No
NOUSHIN VAHDAT

D3. Directorio de proveedores especialistas

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1396700852

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

RADIOLOGY DIAGNOSTIC

YORK, VINCENT

Provider ID: 283518

Board Certified Specialty: No
VINCENT M YORK

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1790146611

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

RADIOLOGY DIAGNOSTIC

ZAPALA, MATTHEW

Provider ID: 307677

Board Certified Specialty: No
MATTHEW A ZAPALA

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1346482809

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSF

BENIOFF CHILDREN'S

HOSPITAL OAKLAND, UCSF
MEDICAL CENTER, UCSF

Medical Center At Mission Bay,
UCSF MEDICAL CENTER AT
MOUNT ZION

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

REGISTERED PHYSICAL

THERAPIST

BERGERON, PATRICK

Provider ID: 258296

Board Certified Specialty: No
PATRICK BERGERON

9350 CAMPUS POINT DR
STE LLD

LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Male

NPI: 1285061390

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

REGISTERED PHYSICAL

THERAPIST

BERGERON, PATRICK

Provider ID: 206533

Board Certified Specialty: No
PATRICK BERGERON

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1285061390

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

REGISTERED PHYSICAL

THERAPIST

D3. Directorio de proveedores especialistas

BUNOSKY, ABIGAIL

Provider ID: 246021

Board Certified Specialty: No

ABIGAIL S BUNOSKY

📍 9350 CAMPUS POINT DR
STE LLD

LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1780018416

🗨 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

REGISTERED PHYSICAL

THERAPIST

CHIEN, PEI

Provider ID: 214699

Board Certified Specialty: No

PEI S CHIEN

📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1891260238

🗨 Provider English Spoken: Y

🗨 Provider Language(s)

Spoken: Chinese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

REGISTERED PHYSICAL

THERAPIST

CHIEN, PEI

Provider ID: 258324

Board Certified Specialty: No

PEI S CHIEN

📍 9350 CAMPUS POINT DR
STE LLD

LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1891260238

🗨 Provider English Spoken: Y

🗨 Provider Language(s)
Spoken: Chinese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

REGISTERED PHYSICAL

THERAPIST

HOUSELY, ALEXIS

Provider ID: 299971

Board Certified Specialty: No

ALEXIS J HOUSELY

📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1689321416

🗨 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

REGISTERED PHYSICAL

THERAPIST

MAROLLA, ALICE

Provider ID: 241145

Board Certified Specialty: No

ALICE R MAROLLA

📍 9350 CAMPUS POINT DR
STE LLD

LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1477018729

🗨 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

D3. Directorio de proveedores especialistas

MEDICAL CTR, UCSD LA JOLLA **REGISTERED PHYSICAL**


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): Board Certified Specialty: No
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

REGISTERED PHYSICAL


THERAPIST


RUDD, CHRISTOPHER

Provider ID: 207559

Board Certified Specialty: No
CHRISTOPHER D RUDD

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1831539337

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

THERAPIST


RUDD, CHRISTOPHER

Provider ID: 258372

Board Certified Specialty: No
CHRISTOPHER D RUDD

 9350 CAMPUS POINT DR
STE LLD

LA JOLLA, CA 92037

 Phone: (855) 543-0333

Fax: (858) 657-6873

 After Hours Phone: (855)
543-0333

Provider Gender: Male

NPI: 1831539337

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

REGISTERED PHYSICAL


THERAPIST

SKINNER, NICOLE

Provider ID: 206546

Board Certified Specialty: No
NICOLE J SKINNER

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

 After Hours Phone: (800)

926-8273

Provider Gender: Female

NPI: 1386964997

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

REGISTERED PHYSICAL

THERAPIST

TRIMM, CASSIDY


Provider ID: 258443

Board Certified Specialty: No

CASSIDY M TRIMM

 9350 CAMPUS POINT DR
STE LLD

LA JOLLA, CA 92037

 Phone: (855) 543-0333

Fax: (858) 657-6873

 After Hours Phone: (855)
543-0333

Provider Gender: Male

NPI: 1740708478

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

D3. Directorio de proveedores especialistas

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

REGISTERED PHYSICAL


THERAPIST

TRIMM, CASSIDY

Provider ID: 258442

Board Certified Specialty: No
CASSIDY M TRIMM

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (855) 543-0333
Fax: (858) 657-6873

 After Hours Phone: (855)
543-0333

Provider Gender: Male

NPI: 1740708478

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

REGISTERED PHYSICAL

THERAPIST

VASQUEZ, BENJAMIN


Provider ID: 258480

Board Certified Specialty: No

BENJAMIN P VASQUEZ

 9350 CAMPUS POINT DR
STE LLD

LA JOLLA, CA 92037

 Phone: (858) 657-6879

Fax: (858) 657-6873

 After Hours Phone: (858)
657-6879

Provider Gender: Male

NPI: 1568938413

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

REGISTERED PHYSICAL

THERAPIST


VASQUEZ, BENJAMIN


Provider ID: 200968

Board Certified Specialty: No

BENJAMIN P VASQUEZ

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1568938413

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

REGISTERED PHYSICAL

THERAPIST


WILLIAMS, STACY

Provider ID: 258496


Board Certified Specialty: No
STACY M WILLIAMS

 9350 CAMPUS POINT DR
STE LLD

LA JOLLA, CA 92037

 Phone: (858) 657-6879

Fax: (858) 657-6873

 After Hours Phone: (858)
657-6879

Provider Gender: Female

NPI: 1689962169

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

REGISTERED PHYSICAL

D3. Directorio de proveedores especialistas

THERAPIST

YU, AUDRINE

Provider ID: 258481

Board Certified Specialty: No
AUDRINE A YU

9350 CAMPUS POINT DR
STE LLD
LA JOLLA, CA 92037

Phone: (858) 657-6879

Fax: (858) 657-6873

After Hours Phone: (858)
657-6879

Provider Gender: Female

NPI: 1639271208

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SPEECH PATHOLOGIST

SCHIEDERMAYER, BENJAMIN

Provider ID: 288939

Board Certified Specialty: No
BENJAMIN F

SCHIEDERMAYER

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1164979837

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SPEECH PATHOLOGIST

SCHIEDERMAYER, BENJAMIN

Provider ID: 288938

Board Certified Specialty: No
BENJAMIN F

SCHIEDERMAYER

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1164979837

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SPEECH PATHOLOGIST

UNGER, LINDSEY

Provider ID: 265338

Board Certified Specialty: No

LINDSEY A UNGER

9350 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1972936813

Provider English Spoken: Y

Provider Language(s)
Spoken: Sign Language

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY COLON SURGERY

LIU, SHANGLEI

Provider ID: 273364

Board Certified Specialty: No
SHANGLEI LIU

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1043558653

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA

D3. Directorio de proveedores especialistas

JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999


American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

SURGERY COLON SURGERY


LOPEZ, NICOLE


Provider ID: 286388

Board Certified Specialty: No
NICOLE E LOPEZ

 3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

 Phone: (858) 822-6100

 After Hours Phone: (858)
822-6100

Provider Gender: Female

NPI: 1518163005

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

SURGERY COLON SURGERY

PARRY, LISA


Provider ID: 278551

Board Certified Specialty: No

LISA A PARRY

 3855 HEALTH SCIENCES
DR

LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1235369067

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999


American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A


SURGERY COLON SURGERY

RAMAMOORTHY, SONIA

Provider ID: 286371

Board Certified Specialty: No
SONIA L RAMAMOORTHY

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1801812656

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

SURGERY GENERAL


AL-NOURI, OMAR


Provider ID: 211904

Board Certified Specialty: No
OMAR AL-NOURI

 9434 MEDICAL CENTER DR
FL 1

LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1770742264

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

D3. Directorio de proveedores especialistas

SURGERY GENERAL

AL-NOURI, OMAR

Provider ID: 211905

Board Certified Specialty: No
OMAR AL-NOURI

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1770742264

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY GENERAL

ARMANI, AVA

Provider ID: 282142

Board Certified Specialty: No
AVA ARMANI

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

Phone: (858) 822-6100

After Hours Phone: (858)
822-6100

Provider Gender: Female

NPI: 1861759383

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSF
MEDICAL CENTER, UCSF
Medical Center At Mission Bay,
UCSF MEDICAL CENTER AT

MOUNT ZION, UCSD LA JOLLA
JOHN SALLY THORNTON,
UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY GENERAL

CLARY, BRYAN

Provider ID: 202568

Board Certified Specialty: No
BRYAN M CLARY

3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1982787131

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY GENERAL

HORGAN, SANTIAGO

Provider ID: 286380

Board Certified Specialty: No
SANTIAGO HORGAN

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (619) 471-0755

After Hours Phone: (619)
471-0755

Provider Gender: Male

NPI: 1932297231

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY GENERAL

JACOBSEN, GARTH

Provider ID: 201728

Board Certified Specialty: No
GARTH R JACOBSEN

9350 CAMPUS POINT DR

D3. Directorio de proveedores especialistas

LA JOLLA, CA 92037
Phone: (619) 471-0755
After Hours Phone: (619) 471-0755

Provider Gender: Male

NPI: 1265649966

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY GENERAL

SANTORELLI, JARRETT

Provider ID: 272304

Board Certified Specialty: No
JARRETT E SANTORELLI

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1033529201

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY GENERAL

VASCULAR

BARLEBEN, ANDREW

Provider ID: 275371

Board Certified Specialty: Yes
ANDREW R BARLEBEN

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273
After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1497936900

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY GENERAL

VASCULAR

BARLEBEN, ANDREW

Provider ID: 275373

Board Certified Specialty: No
ANDREW R BARLEBEN

9434 MEDICAL CENTER DR
FL 1

LA JOLLA, CA 92037

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1497936900

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY GENERAL

VASCULAR

GAFFEY, ANN

Provider ID: 287012

Board Certified Specialty: No
ANN GAFFEY MD

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1316232010

D3. Directorio de proveedores especialistas


 *Provider English Spoken: Y*


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

SURGERY GENERAL

VASCULAR


HOWE, STEVEN

Provider ID: 206760

*Board Certified Specialty: No
STEVEN C HOWE*

 9434 MEDICAL CENTER DR
FL 1

LA JOLLA, CA 92037

 *Phone: (858) 657-7777*

Fax: (858) 657-5058

 *After Hours Phone: (858)
657-7777*

Provider Gender: Male

NPI: 1497702740


 *Provider English Spoken: Y
Cultural Competency: N*


*Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON, TRI
CITY MEDICAL CTR*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

SURGERY NEUROLOGICAL


BARBA, DAVID

Provider ID: 275678

*Board Certified Specialty: No
DAVID BARBA*

 9350 CAMPUS POINT DR
STE 2A

LA JOLLA, CA 92037


 *Phone: (619) 543-5540*

Fax: (619) 287-7663

 *After Hours Phone: (619)
543-5540*

Provider Gender: Male

NPI: 1093730251

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N


*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
UCSD LA JOLLA JOHN SALLY*

*THORNTON, SCRIPPS
MEMORIAL HOSPITAL*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

SURGERY NEUROLOGICAL

BEAUMONT, THOMAS


Provider ID: 214126


*Board Certified Specialty: No
THOMAS L BEAUMONT*

 3855 HEALTH SCIENCES

DR

LA JOLLA, CA 92093

 *Phone: (858) 657-8540*

 *After Hours Phone: (858)
657-8540*

Provider Gender: Male

NPI: 1497067573

 *Provider English Spoken: Y
Cultural Competency: N*


*Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA*


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


SURGERY NEUROLOGICAL


BEN-HAIM, SHARONA

Provider ID: 244070

*Board Certified Specialty: No
SHARONA BEN-HAIM*

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037


 *Phone: (800) 926-8273*

 *After Hours Phone: (800)
926-8273*

Provider Gender: Female

NPI: 1942469663

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Hebrew, Spanish*

Cultural Competency: N

*Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY*

*THORNTON, UCSD MEDICAL
CTR*

D3. Directorio de proveedores especialistas


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): DUSTIN HATEFI

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY NEUROLOGICAL

BLASKIEWICZ, DONALD

Provider ID: 270282

Board Certified Specialty: No
DONALD J BLASKIEWICZ

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1215176839

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY NEUROLOGICAL


HATEFI, DUSTIN

Provider ID: 310034

Board Certified Specialty: No

DUSTIN HATEFI

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1790072106

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:
UNIVERSITY OF CALIFORNIA
IRVINE MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

 Website: N/A


SURGERY NEUROLOGICAL


MARSHALL, LAWRENCE

Provider ID: 244149

Board Certified Specialty: No
LAWRENCE F MARSHALL


 9350 CAMPUS POINT DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1750306171

 Provider English Spoken: Y

 Provider Language(s)
Spoken: German, Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY NEUROLOGICAL

MURTHY, NIKHIL

Provider ID: 299995

Board Certified Specialty: No
NIKHIL K MURTHY

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (619) 543-5540

Fax: (888) 539-8781

 After Hours Phone: (619)
543-5540

Provider Gender: Male


NPI: 1710371273

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


SURGERY NEUROLOGICAL

MURTHY, NIKHIL

Provider ID: 299994

Board Certified Specialty: No
NIKHIL K MURTHY

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

D3. Directorio de proveedores especialistas

Provider Gender: Male

NPI: 1710371273


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


SURGERY NEUROLOGICAL


OSORIO, JOSEPH

Provider ID: 242005

Board Certified Specialty: No
JOSEPH A OSORIO

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1437416591

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL


CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY NEUROLOGICAL


OSORIO, JOSEPH

Provider ID: 242006

Board Certified Specialty: No
JOSEPH A OSORIO

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1437416591

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL


CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY NEUROLOGICAL


PHAM, MARTIN

Provider ID: 244159

Board Certified Specialty: No
MARTIN H PHAM

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1609130921

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL


CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY NEUROLOGICAL


U, HOI

Provider ID: 244133

Board Certified Specialty: Yes
HOI S U

 9350 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1164468146

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL


CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

D3. Directorio de proveedores especialistas

SURGERY ORTHOPEDIC

ANDRY, JAMES

Provider ID: 302085

Board Certified Specialty: No

JAMES P ANDRY

9834 GENESEE AVE STE 228

LA JOLLA, CA 92037

Phone: (858) 455-9942

Fax: (858) 455-6473

After Hours Phone: (858) 455-9942

Provider Gender: Male

NPI: 1679726103

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PARADISE

VALLEY HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, SCRIPPS MERCY

HOSPITAL, SHARP CHULA

VISTA MED CTR, SHARP

CORONADO HOSP AND

HEALTHCARE CTR, Sharp

Grossmont Hospital, SHARP

MEMORIAL HOSPITAL, SHARP

MEMORIAL HOSPITAL, TRI

CITY MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Website: N/A

SURGERY ORTHOPEDIC

BUKATA, SUSAN

Provider ID: 277947

Board Certified Specialty: No

SUSAN V BUKATA

9400 CAMPUS POINT DR LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1932140639

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

SURGERY ORTHOPEDIC

CHIARAPPA, FRANK

Provider ID: 244460

Board Certified Specialty: No

FRANK E CHIARAPPA

9400 CAMPUS POINT DR LA JOLLA, CA 92093

Phone: (800) 926-8273

After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1932536828

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

SURGERY ORTHOPEDIC

CHOI, JIHOON

Provider ID: 284787

Board Certified Specialty: No

JIHOON CHOI

9300 CAMPUS POINT DR LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1285097741

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Website: N/A

SURGERY ORTHOPEDIC

CHOI, JIHOON

Provider ID: 284786

Board Certified Specialty: No

D3. Directorio de proveedores especialistas

JIHOON CHOI

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8181

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1285097741

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY ORTHOPEDIC

FLINT, JAMES

Provider ID: 203177

Board Certified Specialty: No
JAMES H FLINT

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1629239140

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): YANNICK L GOEB

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY ORTHOPEDIC

GOEB, YANNICK

Provider ID: 284793

Board Certified Specialty: No
YANNICK L GOEB

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1730542747

Provider English Spoken: Y

Provider Language(s)
Spoken: German, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY ORTHOPEDIC

GOEB, YANNICK

Provider ID: 284792

Board Certified Specialty: No

YANNICK L GOEB

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1730542747

Provider English Spoken: Y

Provider Language(s)
Spoken: German, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY ORTHOPEDIC

KUSNEZOV, NICHOLAS

Provider ID: 303194

Board Certified Specialty: No

NICHOLAS A KUSNEZOV

9834 GENESEE AVE STE
228

LA JOLLA, CA 92037

Phone: (858) 455-9942

Fax: (858) 455-6473

After Hours Phone: (858)
455-9942

Provider Gender: Male




D3. Directorio de proveedores especialistas

NPI: 1396185161

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: TWIN
CITIES COMMUNITY
HOSPITAL, TRI CITY MEDICAL
CTR, PARADISE VALLEY
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, SHARP CHULA
VISTA MED CTR, SHARP
CORONADO HOSP AND
HEALTHCARE CTR, Sharp
Grossmont Hospital, Sharp
Grossmont Hospital, SHARP
MEMORIAL HOSPITAL, UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A


SURGERY ORTHOPEDIC

PALLIA, CHRISTOPHER

Provider ID: 302103


Board Certified Specialty: No
CHRISTOPHER S PALLIA




 9834 GENESEE AVE STE
228
LA JOLLA, CA 92037

 Phone: (858) 455-9942
Fax: (858) 455-6473

 After Hours Phone: (858)
455-9942

Provider Gender: Male
NPI: 1497751457

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
CORONADO HOSP AND
HEALTHCARE CTR, SCRIPPS
MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL ENCINITAS
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A


SURGERY ORTHOPEDIC

SULLIVAN, THOMAS

Provider ID: 285246


Board Certified Specialty: No
THOMAS B SULLIVAN

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1437565488

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A


SURGERY ORTHOPEDIC

SULLIVAN, THOMAS

Provider ID: 285245


Board Certified Specialty: No
THOMAS B SULLIVAN

 9400 CAMPUS POINT DR
LA JOLLA, CA 92093

 Phone: (800) 926-8273
Fax: (888) 539-8781




 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1437565488

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

SURGERY PLASTIC

HINCHCLIFF, KATHARINE

Provider ID: 277289

Board Certified Specialty: No
KATHARINE M HINCHCLIFF

D3. Directorio de proveedores especialistas

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1346674561

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A



SURGERY PLASTIC

REID, CHRISTOPHER

Provider ID: 224796
Board Certified Specialty: No
CHRISTOPHER M REID

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1982964276

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

SURGERY THORACIC




BOYS, JOSHUA

Provider ID: 243533
Board Certified Specialty: No
JOSHUA A BOYS

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (858) 657-7777
 After Hours Phone: (858)
657-7777
Provider Gender: Male
NPI: 1114368990

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N





 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A




SURGERY THORACIC

KEARNS, MARK

Provider ID: 274297
Board Certified Specialty: No
MARK J KEARNS

 9434 MEDICAL CENTER DR
FL 1

LA JOLLA, CA 92037
 Phone: (858) 647-8817
Fax: (858) 853-9878
 After Hours Phone: (858)
647-8817
Provider Gender: Male
NPI: 1033683719
 Provider English Spoken: Y
 Provider Language(s)
Spoken: French
Cultural Competency: N
Hospital Affiliation: CEDARS
SINAI MEDICAL CENTER,
UCSD LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N



 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

SURGERY THORACIC




KEARNS, MARK

Provider ID: 274296
Board Certified Specialty: No
MARK J KEARNS

 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (858) 657-8817
Fax: (888) 539-8781
 After Hours Phone: (858)
657-8817
Provider Gender: Male
NPI: 1033683719

 Provider English Spoken: Y
 Provider Language(s)
Spoken: French



D3. Directorio de proveedores especialistas

Cultural Competency: N
*Hospital Affiliation: CEDARS
SINAI MEDICAL CENTER,
UCSD LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
*American Sign Language (ASL):
N*
 *Accessibility: CONTACT
PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*

SURGERY THORACIC




POLLEMA, TRAVIS

Provider ID: 210576
Board Certified Specialty: No
TRAVIS L POLLEMA
 9434 MEDICAL CENTER DR
FL 1
LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800)
926-8273*
Provider Gender: Male
NPI: 1871752956
 *Provider English Spoken: Y*
Cultural Competency: N
*Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
*American Sign Language (ASL):
N*
 *Accessibility: CONTACT*

PROVIDER
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*

SURGERY THORACIC

RAMIREZ, ALFREDO



Provider ID: 256390
Board Certified Specialty: No
ALFREDO R RAMIREZ
 9434 MEDICAL CENTER DR
FL 1
LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
 *After Hours Phone: (800)
926-8273*




Provider Gender: Male
NPI: 1003829417

 *Provider English Spoken: Y*
Cultural Competency: N
*Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
*American Sign Language (ASL):
N*
 *Accessibility: CONTACT
PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*

SURGERY THORACIC



ZANDER, ASHLEY

Provider ID: 291383
Board Certified Specialty: No
ASHLEY L ZANDER
 9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*
Provider Gender: Female
NPI: 1780940031
 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
*American Sign Language (ASL):
N*
 *Accessibility: CONTACT
PROVIDER*
 *Website: N/A*

SURGERY THORACIC

ZANDER, ASHLEY

Provider ID: 291382
Board Certified Specialty: No
ASHLEY L ZANDER
 3855 HEALTH SCIENCES
DR
LA JOLLA, CA 92093
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800)
926-8273*
Provider Gender: Female
NPI: 1780940031
 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
*American Sign Language (ASL):
N*
 *Accessibility: CONTACT
PROVIDER*
 *Website: N/A*

SURGERY THORACIC

ZANDER, ASHLEY

Provider ID: 291381

D3. Directorio de proveedores especialistas

Board Certified Specialty: No
ASHLEY L ZANDER

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1780940031

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

UROLOGY

CRAWFORD, ELWARD

Provider ID: 244131

Board Certified Specialty: No
ELWARD D CRAWFORD

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (858) 657-7876

Fax: (888) 539-8781

After Hours Phone: (858)
657-7876

Provider Gender: Male

NPI: 1902814379

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

UROLOGY

HSIEH, TUNG CHIN

Provider ID: 294878

Board Certified Specialty: No
TUNG CHIN HSIEH

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (858) 249-3534

After Hours Phone: (858)
249-3534

Provider Gender: Male

NPI: 1073758652

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

UROLOGY

KATZ, JONATHAN

Provider ID: 299917

Board Certified Specialty: No
JONATHAN E KATZ

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1952756207

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

UROLOGY

WANG, LUKE

Provider ID: 299934

Board Certified Specialty: No
LUKE L WANG

9400 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1033630173

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

LA MESA

CARDIOVASCULAR DISEASE

KOTHA, PURUSHOTHAM

Provider ID: 32053

Board Certified Specialty: Yes

D3. Directorio de proveedores especialistas

PURUSHOTHAM KOTHA
8860 CENTER DR STE 400
LA MESA, CA 91942
Phone: (619) 229-1995
Fax: (619) 229-1109

After Hours Phone: (619)
229-1995

Provider Gender: Male

NPI: 1093730814

Provider English Spoken: Y
Provider Language(s)
Spoken: Hindi, Spanish,
Telugu

Cultural Competency: N

Hospital Affiliation: ALVARADO
HOSPITAL LLC, GROSSMONT
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

CARDIOVASCULAR DISEASE

REDDY, REDDIWANDLA

Provider ID: 265393

Board Certified Specialty: No
REDDIWANDLA S REDDY

5565 GROSSMONT
CENTER DR STE 202
LA MESA, CA 91942

Phone: (619) 461-6130
Fax: (619) 461-3108

After Hours Phone: (619)
461-6130

Provider Gender: Male

NPI: 1710996384

Provider English Spoken: Y

Provider Language(s)
Spoken: Kannada, Spanish,
Telugu

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
ALVARADO HOSPITAL LLC

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-5:00PM

Website: N/A

CARDIOVASCULAR DISEASE

SHEREV, DIMITRI

Provider ID: 290704

Board Certified Specialty: No
DIMITRI A SHEREV

8851 CENTER DR STE 304
LA MESA, CA 91942

Phone: (619) 867-0557
Fax: (619) 867-0558

After Hours Phone: (619)
867-0557

Provider Gender: Male

NPI: 1154323996

Provider English Spoken: Y
Provider Language(s)
Spoken: Bulgarian, Russian,
Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,

GROSSMONT HOSPITAL,
SHARP MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL, ALVARADO
HOSPITAL LLC, SHARP CHULA

VISTA MED CTR, TRI CITY
MEDICAL CTR, TRI CITY
MEDICAL CTR, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, Sharp Grossmont
Hospital, SHARP CORONADO
HOSP AND HEALTHCARE CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

LANE, KIMBERLY

Provider ID: 295955

Board Certified Specialty: No
KIMBERLY A LANE

8851 CENTER DR STE 501
LA MESA, CA 91942

Phone: (619) 697-2456
Fax: (858) 429-7930

After Hours Phone: (619)
697-2456

Provider Gender: Female

NPI: 1457670119

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 16\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

D3. Directorio de proveedores especialistas

 Website: N/A


CERTIFIED NURSE PRACTITIONER


RESELLI, LYNDSEY

Provider ID: 217692

Board Certified Specialty: No
LYNDSEY RESELLI

 8881 FLETCHER PKWY STE
200
LA MESA, CA 91942

 Phone: (619) 464-6434

 After Hours Phone: (619)
464-6434

Provider Gender: Female

NPI: 1558854000


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE PRACTITIONER


RESELLI, LYNDSEY

Provider ID: 217693

Board Certified Specialty: No
LYNDSEY RESELLI

 8881 FLETCHER PKWY STE
205
LA MESA, CA 91942

 Phone: (619) 464-6434

 After Hours Phone: (619)
464-6434

Provider Gender: Female

NPI: 1558854000


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


EMERGENCY MEDICINE

QUINONES-PEREZ, BIANCA

Provider ID: 206948

Board Certified Specialty: No
BIANCA N QUINONES-PEREZ

 5565 GROSSMONT
CENTER DR STE 2 STE 2
LA MESA, CA 91942



 Phone: (619) 713-5375

Fax: (619) 713-5379

 After Hours Phone: (619)
713-5375

Provider Gender: Female

NPI: 1124360565

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM


 Website: N/A


HEARING AID DEALER / SUPPLIER

ANDERSON, ELAINE


Provider ID: 268693

Board Certified Specialty: No
ELAINE ANDERSON

 5565 GROSSMONT
CENTER DR
LA MESA, CA 91942

 Phone: (619) 589-5414

Fax: (619) 589-7391

 After Hours Phone: (619)
589-5414

Provider Gender: Female

NPI: 1063558856


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INTERVENTIONAL CARDIOLOGY

TAGHIZADEH, BEHZAD

Provider ID: 269161

Board Certified Specialty: No
TAGHIZADEH, BEHZAD

 8851 CENTER DR STE 405
LA MESA, CA 91942

 Phone: (619) 582-2404

Fax: (619) 582-2915

 After Hours Phone: (619)
582-2404

Provider Gender: Male

D3. Directorio de proveedores especialistas

NPI: 1275514986

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
ALVARADO HOSPITAL LLC


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERVENTIONAL


CARDIOLOGY

YELLEN, LAURENCE


Provider ID: 269173

Board Certified Specialty: No
LAURENCE G YELLEN

 8851 CENTER DR STE 405
LA MESA, CA 91942


 Phone: (619) 582-2404


Fax: (619) 582-2915

 After Hours Phone: (619)
582-2404

Provider Gender: Male

NPI: 1477680551

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Farsi, Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
ALVARADO HOSPITAL LLC,

USC Arcadia Hospital


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

MATERNAL AND FETAL

MEDICINE

ADAMI, REBECCA


Provider ID: 272676

Board Certified Specialty: No

REBECCA R ADAMI

 5555 GROSSMONT
CENTER DR

LA MESA, CA 91942


 Phone: (858) 966-6710

Fax: (858) 966-6711

 After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1992149447

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, SHARP MEMORIAL

HOSPITAL


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

MATERNAL AND FETAL

MEDICINE

MCCULLOUGH, DEIRDRE


Provider ID: 244873

Board Certified Specialty: No

DEIRDRE M MCCULLOUGH

 5555 GROSSMONT
CENTER DR

LA MESA, CA 91942

 Phone: (858) 966-6710

Fax: (858) 966-6711

 After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1639153018

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SHARP

MARY BIRCH HOSP FOR

WOMEN AND NEWBORNS,

Sharp Grossmont Hospital,

SHARP MEMORIAL HOSPITAL,

RADY CHILDRENS HOSPITAL

SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

MATERNAL AND FETAL

MEDICINE


MELBER, DORA

Provider ID: 296997

Board Certified Specialty: No

DORA J MELBER

 8851 CENTER DR STE 201
LA MESA, CA 91942

 Phone: (858) 966-6710

D3. Directorio de proveedores especialistas

Fax: (858) 966-6711

☎ After Hours Phone: (858) 966-6710

Provider Gender: Female

NPI: 1124413026

☑ Provider English Spoken: Y

☑ Provider Language(s) Spoken: Hungarian, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, RADY CHILDRENS

HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): Board Certified Specialty: No
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

MATERNAL AND FETAL MEDICINE

REIMERS, REBECCA

Provider ID: 294654

Board Certified Specialty: No
REBECCA M REIMERS

📍 5555 GROSSMONT CENTER DR

LA MESA, CA 91942

☎ Phone: (858) 966-6710

Fax: (858) 966-6711

☎ After Hours Phone: (858) 966-6710

Provider Gender: Female

NPI: 1801207634

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): Board Certified Specialty: No
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

MATERNAL AND FETAL MEDICINE

REIMERS, REBECCA

Provider ID: 294656

Board Certified Specialty: No
REBECCA M REIMERS

📍 8851 CENTER DR STE 201

LA MESA, CA 91942

☎ Phone: (858) 966-6710

Fax: (858) 966-6711

☎ After Hours Phone: (858) 966-6710

Provider Gender: Female

NPI: 1801207634

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): Board Certified Specialty: No
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

MATERNAL AND FETAL MEDICINE

RICHARDSON, ALVIE

Provider ID: 277317

Board Certified Specialty: No
ALVIE C RICHARDSON

📍 5555 GROSSMONT CENTER DR

LA MESA, CA 91942

☎ Phone: (858) 966-6710

Fax: (858) 966-6711

☎ After Hours Phone: (858) 966-6710

Provider Gender: Male

NPI: 1154305977

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, Sharp Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): Board Certified Specialty: No
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

MATERNAL AND FETAL MEDICINE

SCHWENDEMANN, WADE







Provider ID: 277305

Board Certified Specialty: No
WADE D SCHWENDEMANN

📍 5555 GROSSMONT CENTER DR

LA MESA, CA 91942


D3. Directorio de proveedores especialistas




 Phone: (858) 966-6710
Fax: (858) 966-6711
 After Hours Phone: (858) 966-6710
Provider Gender: Male
NPI: 1477563302
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, TRI CITY MEDICAL CTR, Sharp Grossmont Hospital, Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

MATERNAL AND FETAL MEDICINE

WILLIAMS, KRISTIN




Provider ID: 277384
Board Certified Specialty: No
KRISTIN M WILLIAMS
 5555 GROSSMONT CENTER DR
LA MESA, CA 91942
 Phone: (858) 966-6710
Fax: (858) 966-6711
 After Hours Phone: (858)



966-6710
Provider Gender: Female
NPI: 1992847131
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Stanford Health Care, LUCILE SALTER PACKARD CHILDRENS HOSP, SAN MATEO MEDICAL CTR, SHARP MEMORIAL HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, TRI CITY MEDICAL CTR, CALIFORNIA PACIFIC MED CTR, CALIFORNIA PACIFIC MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

NEUROLOGY





MOHAMMAD, AHMADSHAH

Provider ID: 39868
Board Certified Specialty: No
AHMADSHAH S MOHAMMAD
 8851 CENTER DR STE 307
LA MESA, CA 91942
 Phone: (619) 337-7900
Fax: (619) 337-7902
 After Hours Phone: (619) 337-7900
Provider Gender: Male
NPI: 1902973472

 Provider English Spoken: Y
 Provider Language(s) Spoken: Arabic, Farsi, French, German, Pashto, Persian, Spanish
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, SHARP CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

OPHTHALMOLOGY

HAIGHT, BRUCE


Provider ID: 295984
Board Certified Specialty: No
BRUCE T HAIGHT
 5565 GROSSMONT CENTER DR STE 2-3
LA MESA, CA 91942
 Phone: (619) 465-2020
Fax: (619) 698-1189
 After Hours Phone: (619) 465-2020
Provider Gender: Male
NPI: 1427029628
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

D3. Directorio de proveedores especialistas

American Sign Language (ASL): Provider ID: 269112

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH
8:30AM-4:00PM
F 8:00AM-0:00PM

 Website: N/A


OPHTHALMOLOGY

HAIGHT, BRUCE

Provider ID: 305885

Board Certified Specialty: No
BRUCE T HAIGHT

 5565 GROSSMONT
CENTER DR BLDG 3 STE
551

 Phone: (619) 465-2020

Fax: (619) 698-1189

 After Hours Phone: (619)
465-2020

Provider Gender: Male

NPI: 1427029628

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M 8:00AM-4:00PM
TU-W 8:30AM-4:00PM
TH 8:00AM-4:00PM
F 8:00AM-0:00PM

 Website: N/A


OPHTHALMOLOGY

HAIGHT, BRUCE

Board Certified Specialty: No
BRUCE T HAIGHT

 5565 GROSSMONT
CENTER DR BLDG 3 STE
551

LA MESA, CA 91942

 Phone: (619) 465-2020

Fax: (619) 698-1189

 After Hours Phone: (619)
465-2020

Provider Gender: Male

NPI: 1427029628

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M 8:00AM-4:00PM
TU-W 8:30AM-4:00PM
TH 8:00AM-4:00PM
F 8:00AM-0:00PM

 Website: N/A

OPHTHALMOLOGY


HAIGHT, BRUCE

Provider ID: 288660

Board Certified Specialty: No
BRUCE T HAIGHT

 7339 EL CAJON BLVD STE J
AND K

LA MESA, CA 91942

 Phone: (619) 722-8460

Fax: (619) 722-8465

 After Hours Phone: (619)
722-8460

Provider Gender: Male

NPI: 1427029628

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OPHTHALMOLOGY


HUDSON, HENRY

Provider ID: 297578


Board Certified Specialty: No
HENRY L HUDSON

 7339 EL CAJON BLVD STE J
AND K

LA MESA, CA 91942

 Phone: (626) 412-4040

Fax: (760) 267-9160

 After Hours Phone: (626)
412-4040

Provider Gender: Male

NPI: 1851349195

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, TRI

CITY MEDICAL CTR, RADY

CHILDRENS HOSPITAL SAN

DIEGO, SCRIPPS MERCY

HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL, Sharp

Grossmont Hospital


D3. Directorio de proveedores especialistas

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-4:30PM


 Website: N/A


OPHTHALMOLOGY

HUDSON, HENRY

Provider ID: 306768

Board Certified Specialty: Yes
HENRY L HUDSON


 5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942

 Phone: (626) 206-0633
Fax: (760) 267-9160

 After Hours Phone: (626)
206-0633

Provider Gender: Male

NPI: 1851349195

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, TRI
CITY MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MERCY
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL, Sharp
Grossmont Hospital



Medi-Cal Open Panel: Yes

Min/Max Age: 6\99

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER


 Hours: M-F
8:00AM-5:00PM
 Website: N/A


OPHTHALMOLOGY

HUDSON, HENRY

Provider ID: 297577

Board Certified Specialty: Yes
HENRY L HUDSON


 5565 GROSSMONT
CENTER DR STE 551
LA MESA, CA 91942

 Phone: (626) 206-0633
Fax: (760) 267-9160

 After Hours Phone: (626)
206-0633

Provider Gender: Male

NPI: 1851349195

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, TRI
CITY MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MERCY
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL, Sharp
Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


OPTOMETRIST

AOTO, KIM

Provider ID: 288652

Board Certified Specialty: No
KIM N AOTO

 7339 EL CAJON BLVD STE J
AND K
LA MESA, CA 91942

 Phone: (619) 722-8460

Fax: (619) 722-8465

 After Hours Phone: (619)
722-8460

Provider Gender: Female

NPI: 1780935650

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


OTOLARYNGOLOGY

MOSHTAGHI, OMID

Provider ID: 302380

Board Certified Specialty: No
OMID MOSHTAGHI

 5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

 Phone: (619) 464-3353

Fax: (619) 464-6720

 After Hours Phone: (619)
464-3353

Provider Gender: Male




NPI: 1730675927

 Provider English Spoken: Y

D3. Directorio de proveedores especialistas

Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, Sharp
Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999




American Sign Language (ASL):
N



 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

OTOLARYNGOLOGY

SAEZ, NEIL

Provider ID: 302431
Board Certified Specialty: No
NEIL A SAEZ




 5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942
 *Phone: (619) 464-3353*
Fax: (619) 464-6720
 *After Hours Phone: (619)*
464-3353
Provider Gender: Male
NPI: 1518456508

 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SHARP MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N



 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*


PEDIATRIC EMERGENCY


MEDICINE

GROSS, MATTHEW

Provider ID: 297177
Board Certified Specialty: No
MATTHEW F GROSS


 5565 GROSSMONT
CENTER DR STE 2 STE 2
LA MESA, CA 91942
 *Phone: (619) 713-5375*
Fax: (619) 713-5379

 *After Hours Phone: (619)*
713-5375
Provider Gender: Male
NPI: 1942223664

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

 *Hours: SU 1:00PM-10:00PM*
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

 *Website: N/A*

PEDIATRIC EMERGENCY


MEDICINE

PARKER, SHERINE

Provider ID: 205786
Board Certified Specialty: No



SHERINE B PARKER

 5565 GROSSMONT
CENTER DR STE 2
LA MESA, CA 91942

 *Phone: (619) 713-5375*
Fax: (619) 713-5379

 *After Hours Phone: (619)*
713-5375


Provider Gender: Female
NPI: 1477626513


 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Arabic, Spanish

Cultural Competency: N
Hospital Affiliation: GLENDALE
ADVENTIST MED CTR,
GLENDALE MEMORIAL HOSP
AND HEALTH CTR, TRI CITY
MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO, VALLEY CHILDRENS
HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

 *Hours: M-F*
8:00AM-5:00PM

 *Website: N/A*


PEDIATRIC EMERGENCY

MEDICINE

VARGAS, JACLYN

Provider ID: 285936
Board Certified Specialty: No
JACLYN F VARGAS

 5555 GROSSMONT
CENTER DR
LA MESA, CA 91942

 *Phone: (858) 966-6710*

D3. Directorio de proveedores especialistas

Fax: (858) 966-6711

☎ After Hours Phone: (858) 966-6710

Provider Gender: Female

NPI: 1619359718

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO, Los Angeles General Medical Center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PEDIATRICS

CLAY, CORRIE

Provider ID: 278807

Board Certified Specialty: No
CORRIE T CLAY

📍 8881 FLETCHER PKWY STE 200
LA MESA, CA 91942

☎ Phone: (619) 464-6434

Fax: (619) 464-5109

☎ After Hours Phone: (619) 464-6434

Provider Gender: Female

NPI: 1437207750

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SHARP MARY

BIRCH HOSP FOR WOMEN AND NEWBORNS

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-6:00PM
SA 11:30AM-3:30PM

🌐 Website: N/A

PHYSICIANS ASSISTANT

FERRARA, SAMANTHA

Provider ID: 309977

Board Certified Specialty: No
SAMANTHA L FERRARA

📍 5565 GROSSMONT CENTER DR STE 444
LA MESA, CA 91942

☎ Phone: (619) 698-0606

Fax: (619) 698-0609

☎ After Hours Phone: (619) 698-0606

Provider Gender: Female

NPI: 1437822434

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

EISENHOWER MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:30AM-5:30PM

🌐 Website: N/A

PHYSICIANS ASSISTANT

HINKLE, CORINNE

Provider ID: 309954

Board Certified Specialty: No
CORINNE C HINKLE

📍 5565 GROSSMONT CENTER DR STE 444
LA MESA, CA 91942

☎ Phone: (619) 698-0606

☎ After Hours Phone: (619) 698-0606

Provider Gender: Female

NPI: 1508451949

☑ Provider English Spoken: Y
☑ Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: Valleywise Health Medical Center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PHYSICIANS ASSISTANT

RAYMOND, ALAIN

Provider ID: 269057

Board Certified Specialty: No
ALAIN L RAYMOND

📍 8851 CENTER DR STE 505
LA MESA, CA 91942

☎ Phone: (619) 461-3880

Fax: (619) 461-3895

☎ After Hours Phone: (619) 461-3880

Provider Gender: Male

NPI: 1164729125

☑ Provider English Spoken: Y


D3. Directorio de proveedores especialistas

 *Provider Language(s)*
Spoken: French, Haitian Creole


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):  *After Hours Phone: (619) 303-7130*

N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*


PHYSICIANS ASSISTANT


WHITE, KYLE

Provider ID: 302382

Board Certified Specialty: No

KYLE WHITE

 5565 GROSSMONT
CENTER DR BLDG 3 STE 101
LA MESA, CA 91942

 *Phone: (619) 464-3353*

Fax: (619) 464-7509

 *After Hours Phone: (619) 464-3353*

Provider Gender: Male

NPI: 1922768860

 *Provider English Spoken: Y*
Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*
8:00AM-5:00PM

 *Website: N/A*

PODIATRIST


CAINE, SAMUEL

Provider ID: 308638

Board Certified Specialty: No

SAMUEL CAINE

 5565 GROSSMONT
CENTER DR STE 510
LA MESA, CA 91942

 *Phone: (619) 303-7130*

Fax: (619) 303-7150

 *After Hours Phone: (619) 303-7130*

Provider Gender: Male

NPI: 1396230298

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: Sharp

Grossmont Hospital, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL, SHARP MEMORIAL

HOSPITAL, SHARP CHULA


VISTA MED CTR, SHARP

CORONADO HOSP AND

HEALTHCARE CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): 

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*
8:00AM-5:00PM

 *Website: N/A*


PODIATRIST


CAINE, SAMUEL

Provider ID: 308213

Board Certified Specialty: No

SAMUEL CAINE

 5565 GROSSMONT
CENTER DR STE 510
LA MESA, CA 91942

 *Phone: (619) 303-7130*

Fax: (619) 303-7150

 *After Hours Phone: (619) 303-7130*

Provider Gender: Male

NPI: 1396230298

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: Sharp
Grossmont Hospital, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL, SHARP MEMORIAL

HOSPITAL, SHARP CHULA

VISTA MED CTR, SHARP

CORONADO HOSP AND

HEALTHCARE CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*
8:00AM-5:00PM

 *Website: N/A*

RADIATION ONCOLOGY


CARMONA, RUBEN

Provider ID: 303099

Board Certified Specialty: No

RUBEN CARMONA

 5555 GROSSMONT
CENTER DR
LA MESA, CA 91942

 *Phone: (619) 740-4500*

Fax: (619) 740-8499

 *After Hours Phone: (619) 740-4500*

Provider Gender: Male

NPI: 1275929242




 *Provider English Spoken: Y*

 *Provider Language(s)*

D3. Directorio de proveedores especialistas

Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR, Sharp
Grossmont Hospital, SHARP
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999



American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

RADIATION ONCOLOGY



COLEMAN, LORI

Provider ID: 221089
Board Certified Specialty: No
LORI A COLEMAN

 5555 GROSSMONT
CENTER DR
LA MESA, CA 91942
 *Phone: (619) 740-4500*
Fax: (619) 740-8499

 *After Hours Phone: (619)*
740-4500

Provider Gender: Female
NPI: 1053348920


 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SHARP MEMORIAL HOSPITAL,
GROSSMONT HOSPITAL,
PALOMAR MEDICAL CENTER,
Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes

Min/Max Age: 19\100

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

 *Hours: M-F*
8:00AM-5:00PM


 *Website: N/A*

RADIATION ONCOLOGY

VOLPP, PAUL



Provider ID: 221104
Board Certified Specialty: No
PAUL B VOLPP

 5555 GROSSMONT
CENTER DR
LA MESA, CA 91942

 *Phone: (619) 740-4500*
Fax: (619) 740-8499

 *After Hours Phone: (619)*
740-4500


Provider Gender: Male
NPI: 1225186232


 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP
CHULA VISTA MED CTR,
GROSSMONT HOSPITAL,
PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 19\100

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

 *Hours: M-F*
8:00AM-5:00PM


 *Website: N/A*

RHEUMATOLOGY

KOTHA, ROSHAN



Provider ID: 63454
Board Certified Specialty: No
ROSHAN KOTHA

 8860 CENTER DR STE 400
LA MESA, CA 91942

 *Phone: (619) 229-1995*
Fax: (619) 229-1109


 *After Hours Phone: (619)*
229-1995

Provider Gender: Female
NPI: 1417117839

 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Hindi, Spanish,
Telugu

Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

 *Hours: M-F*
8:30AM-5:00PM


 *Website: N/A*

SURGERY ORTHOPEDIC

BALLARD, BROOKE

Provider ID: 262205
Board Certified Specialty: No
BROOKE L BALLARD

 8860 CENTER DR STE 350
LA MESA, CA 91942

 *Phone: (619) 286-9480*
Fax: (619) 286-4568

 *After Hours Phone: (619)*
286-9480

Provider Gender: Female

D3. Directorio de proveedores especialistas

NPI: 1841447950

Provider English Spoken: Y
 Provider Language(s)
 Spoken: French, Spanish
 Cultural Competency: N
 Hospital Affiliation: ALVARADO
 HOSPITAL LLC, SHARP
 CORONADO HOSP AND
 HEALTHCARE CTR, SHARP
 MEMORIAL HOSPITAL
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N

Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 9:00AM-5:00PM
 Website: N/A
 Email:
 tracy@alvaradoortho.com

LAKE ELSINORE

OBSTETRICS / GYNECOLOGY **FRANCIS, LARRY**

Provider ID: 290293
 Board Certified Specialty: No
 LARRY N FRANCIS
 30195 FRASER DR
 LAKE ELSINORE, CA 92530
 Phone: (951) 252-2720
 Fax: (760) 414-3892
 After Hours Phone: (951)
 252-2720
 Provider Gender: Male
 NPI: 1215008552
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation:

SOUTHWEST HEALTHCARE
 RANCHO SPRINGS HOSPITAL,
 SHARP MEMORIAL HOSPITAL,
 POMONA VALLEY HOSP MED
 CTR
 Medi-Cal Open Panel: Yes
 Min/Max Age: 16\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

OPTOMETRIST

GEE, JENNIFER

Provider ID: 290211
 Board Certified Specialty: No
 JENNIFER W GEE
 30195 FRASER DR
 LAKE ELSINORE, CA 92530
 Phone: (951) 252-2720
 Fax: (760) 414-3892
 After Hours Phone: (951)
 252-2720

Provider Gender: Female
 NPI: 1336589332
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation:
 COMMUNITY REGIONAL
 MEDICAL CENTER-FRESNO,
 CALIFORNIA PACIFIC
 MEDICAL CENTER - D P APH
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER

Website: N/A

OPTOMETRIST

MORA, WENDY

Provider ID: 290239
 Board Certified Specialty: No
 WENDY A MORA
 30195 FRASER DR
 LAKE ELSINORE, CA 92530
 Phone: (951) 252-2720
 Fax: (760) 414-3892
 After Hours Phone: (951)
 252-2720
 Provider Gender: Female
 NPI: 1376958389
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\999
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Website: N/A

OPTOMETRIST

TAM, EMILY

Provider ID: 290319
 Board Certified Specialty: No
 EMILY TAM
 30195 FRASER DR
 LAKE ELSINORE, CA 92530
 Phone: (951) 252-2720
 Fax: (760) 414-3892
 After Hours Phone: (951)
 252-2720
 Provider Gender: Female
 NPI: 1497161236
 Provider English Spoken: Y
 Provider Language(s)

D3. Directorio de proveedores especialistas

Spoken: Chinese, Mandarin, Yue Chinese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*

LAKESIDE



CHIROPRACTOR

HOURIHAN, KEITH

Provider ID: 257549
Board Certified Specialty: No
KEITH M HOURIHAN
 10039 VINE ST
LAKESIDE, CA 92040
 *Phone: (619) 390-9975*
Fax: (858) 633-4690
 *After Hours Phone: (619) 390-9975*


Provider Gender: Male


NPI: 1306916994

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8:00AM-5:00PM*

 *Website: N/A*

PSYCHOLOGIST

BRUNETTO, HEIDI

Provider ID: 290407
Board Certified Specialty: No
HEIDI M BRUNETTO
 10039 VINE ST
LAKESIDE, CA 92040
 *Phone: (619) 390-9975*
Fax: (360) 462-2744
 *After Hours Phone: (619) 390-9975*

Provider Gender: Female


NPI: 1023250453

 *Provider English Spoken: Y*
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-TH 8:00AM-5:00PM*

 *Website: N/A*


MENIFEE


CERTIFIED NURSE

PRACTITIONER

VAHDAT, VALERIE

Provider ID: 306581
Board Certified Specialty: No
VALERIE K VAHDAT

 26926 CHERRY HILLS
BLVD STE B
MENIFEE, CA 92586




 *Phone: (951) 216-2200*
Fax: (858) 633-4699

 *After Hours Phone: (951) 216-2200*

Provider Gender: Female

NPI: 1093474090


 *Provider English Spoken: Y*
Cultural Competency: N



Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

PHYSICIANS ASSISTANT

SMITH, KELLI


Provider ID: 272954
Board Certified Specialty: No
KELLI A SMITH

 30420 HAUN RD
MENIFEE, CA 92584

 *Phone: (951) 676-4193*
 *After Hours Phone: (951) 676-4193*


Provider Gender: Female

NPI: 1841771664

 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8:00AM-5:00PM*

 *Website: N/A*

MURRIETA

ANESTHESIOLOGY

HYLTON, DIANA

Provider ID: 241738
Board Certified Specialty: No
DIANA J HYLTON

 25500 MEDICAL CENTER

D3. Directorio de proveedores especialistas

DR
MURRIETA, CA 92562
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1932527751
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

ANESTHESIOLOGY

KRAUSE, MARTIN

Provider ID: 287655
Board Certified Specialty: No
MARTIN KRAUSE
25500 MEDICAL CENTER DR
MURRIETA, CA 92562
Phone: (951) 696-6000
Fax: (951) 677-9757
After Hours Phone: (951) 696-6000
Provider Gender: Male
NPI: 1417243239
Provider English Spoken: Y

Provider Language(s)
Spoken: German
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE

PRACTITIONER

HEAD, KRISTIN

Provider ID: 268658
Board Certified Specialty: No
KRISTIN N HEAD
25170 HANCOCK AVE STE 1
MURRIETA, CA 92562
Phone: (951) 600-1640
Fax: (951) 600-1760
After Hours Phone: (951) 600-1640
Provider Gender: Female
NPI: 1699078923
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE

PRACTITIONER

MIRACLE, ANGELYN

Provider ID: 300259
Board Certified Specialty: No
ANGELYN M MIRACLE
25170 HANCOCK AVE STE 200
MURRIETA, CA 92562
Phone: (951) 461-9300
Fax: (951) 461-9399
After Hours Phone: (951) 461-9300
Provider Gender: Female
NPI: 1144539842
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 8:30AM-0:00PM M-F 8:00AM-5:00PM SA 8:30AM-0:00PM
Website: N/A

CERTIFIED NURSE

PRACTITIONER

SNYDER, MICHELLE

Provider ID: 210676
Board Certified Specialty: No
MICHELLE V SNYDER
41011 CALIFORNIA OAKS RD STE 104
MURRIETA, CA 92562
Phone: (800) 926-8273

D3. Directorio de proveedores especialistas

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1851561054

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

STEVENSON, REHEIA

Provider ID: 210794

Board Certified Specialty: No
REHEIA A STEVENSON

📍 41011 CALIFORNIA OAKS
RD STE 104
MURRIETA, CA 92562

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1346696044

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): JINGHONG LI

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

SYED-UDDIN, SUMIYAH

Provider ID: 297771

Board Certified Specialty: No
SUMIYAH SYED-UDDIN

📍 25500 MEDICAL CENTER
DR
MURRIETA, CA 92562

☎ Phone: (951) 696-6124

Fax: (951) 696-6293

☎ After Hours Phone: (951)
696-6124

Provider Gender: Female

NPI: 1225606478

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Hindi, Urdu
Cultural Competency: N

Hospital Affiliation:
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT

PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

EMERGENCY MEDICINE

LI, JINGHONG

Provider ID: 255941

Board Certified Specialty: No

JINGHONG LI

📍 25500 MEDICAL CENTER
DR
MURRIETA, CA 92562

☎ Phone: (951) 696-6000

☎ After Hours Phone: (951)
696-6000

Provider Gender: Female

NPI: 1619014479

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

INTERVENTIONAL

CARDIOLOGY

AL KHIAMI, BELAL

Provider ID: 275994

Board Certified Specialty: No

BELAL O AL KHIAMI

📍 28062 BAXTER RD
MURRIETA, CA 92563

☎ Phone: (951) 290-4000

Fax: (888) 539-8781

☎ After Hours Phone: (951)
290-4000

Provider Gender: Male


NPI: 1861623506

☑ Provider English Spoken: Y

D3. Directorio de proveedores especialistas

 *Provider Language(s)*
Spoken: Arabic
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, PIONEERS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER, LOMA LINDA UNIVERSITY MED CTR MURRIETA, TEMECULA VALLEY HOSPITAL INC

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*


 *Hours: M-F*
8:00AM-5:00PM


 *Website: N/A*

INTERVENTIONAL **CARDIOLOGY**

WETTERSTEN, NICHOLAS

Provider ID: 210605
Board Certified Specialty: No
NICHOLAS W WETTERSTEN


 41011 CALIFORNIA OAKS RD STE 104
MURRIETA, CA 92562

 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800) 926-8273*

Provider Gender: Male


NPI: 1063701068


 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*
8:00AM-5:00PM


 *Website: N/A*

MATERNAL AND FETAL **MEDICINE**

MELBER, DORA

Provider ID: 296988
Board Certified Specialty: No
DORA J MELBER


 25170 HANCOCK AVE FL 1
MURRIETA, CA 92562


 *Phone: (858) 966-6710*
Fax: (858) 966-6711

 *After Hours Phone: (858) 966-6710*

Provider Gender: Female

NPI: 1124413026

 *Provider English Spoken: Y*



 *Provider Language(s)*
Spoken: Hungarian, Spanish
Cultural Competency: N

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL): N


 *Accessibility: CONTACT PROVIDER*


 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

MATERNAL AND FETAL **MEDICINE**

MELBER, DORA

Provider ID: 296992
Board Certified Specialty: No
DORA J MELBER

 25500 MEDICAL CENTER DR
MURRIETA, CA 92562


 *Phone: (858) 966-6710*
Fax: (858) 966-6711

 *After Hours Phone: (858) 966-6710*

Provider Gender: Female

NPI: 1124413026

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Hungarian, Spanish
Cultural Competency: N


Hospital Affiliation: UCSD LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*
8:00AM-5:00PM

 *Website: N/A*

MATERNAL AND FETAL **MEDICINE**

REIMERS, REBECCA

Provider ID: 294652

D3. Directorio de proveedores especialistas

Board Certified Specialty: No
REBECCA M REIMERS

25500 MEDICAL CENTER
DR
MURRIETA, CA 92562

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1801207634

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

MATERNAL AND FETAL MEDICINE

REIMERS, REBECCA

Provider ID: 294649

Board Certified Specialty: No
REBECCA M REIMERS

25170 HANCOCK AVE FL 1
MURRIETA, CA 92562

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1801207634

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

NEONATAL / PERINATAL MEDICINE

NYMAN, KATHERINE

Provider ID: 301820

Board Certified Specialty: No
KATHERINE N NYMAN

25500 MEDICAL CENTER
DR

MURRIETA, CA 92562

Phone: (951) 696-6000

Fax: (951) 696-6105

After Hours Phone: (951)
696-6000

Provider Gender: Female

NPI: 1003260951

Provider English Spoken: Y
Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM
Website: N/A

NEONATAL / PERINATAL MEDICINE

WEISS, KATHERINE

Provider ID: 264676

Board Certified Specialty: Yes
KATHERINE J WEISS

25500 MEDICAL CENTER
DR

MURRIETA, CA 92562

Phone: (951) 696-6000

Fax: (951) 696-6105

After Hours Phone: (951)
696-6000

Provider Gender: Female

NPI: 1053541862

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

NEONATAL / PERINATAL MEDICINE




WEST, JULIE


Provider ID: 297071

Board Certified Specialty: No
JULIE E WEST

25500 MEDICAL CENTER





D3. Directorio de proveedores especialistas




DR
MURRIETA, CA 92562
 Phone: (951) 696-6000
Fax: (951) 696-6105
 After Hours Phone: (951)
696-6000
Provider Gender: Female
NPI: 1811151848
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

NEUROLOGY


GOLD, JEFFREY




Provider ID: 283334
Board Certified Specialty: No
JEFFREY J GOLD
 25170 HANCOCK AVE FL 1
MURRIETA, CA 92562
 Phone: (951) 600-1640
Fax: (951) 600-1760
 After Hours Phone: (951)
600-1640
Provider Gender: Male
NPI: 1568773984
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL

OAKLAND, SHARP MEMORIAL
HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

NEUROLOGY








JINDAL, ANUJA

Provider ID: 215521
Board Certified Specialty: No
ANUJA V JINDAL
 25170 HANCOCK AVE
MURRIETA, CA 92562
 Phone: (951) 600-1640
Fax: (951) 600-1760
 After Hours Phone: (951)
600-1640
Provider Gender: Female
NPI: 1194046581
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A





NEUROLOGY

SAHAGIAN, MICHELLE

Provider ID: 283166
Board Certified Specialty: No
MICHELLE L SAHAGIAN
 25170 HANCOCK AVE FL 1
MURRIETA, CA 92562
 Phone: (951) 600-1640
Fax: (951) 600-1760
 After Hours Phone: (951)
600-1640
Provider Gender: Female
NPI: 1275604035
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

NEUROLOGY CHILD

GOLD, JEFFREY

Provider ID: 215691
Board Certified Specialty: No
JEFFREY J GOLD
 25170 HANCOCK AVE
MURRIETA, CA 92562
 Phone: (951) 600-1640
 After Hours Phone: (951)
600-1640
Provider Gender: Male
NPI: 1568773984
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY


D3. Directorio de proveedores especialistas

CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND, SHARP MEMORIAL
HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEUROLOGY CHILD

GUIDO-ESTRADA, NATALIE

Provider ID: 215442

Board Certified Specialty: No
NATALIE M GUIDO-ESTRADA

 25170 HANCOCK AVE
MURRIETA, CA 92562

 Phone: (951) 600-1640

Fax: (951) 600-1760

 After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1528353521

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


NEUROLOGY CHILD


KIMMCMANUS, OLIVIA

Provider ID: 215666

Board Certified Specialty: No
OLIVIA S KIMMCMANUS

 25170 HANCOCK AVE
MURRIETA, CA 92562

 Phone: (951) 600-1640

 After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1174870067

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:
UNIVERSITY OF CALIFORNIA
IRVINE MED CTR, CHILDRENS
HOSPITAL OF ORANGE


COUNTY, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OBSTETRICS / GYNECOLOGY


BINDER, PRATIBHA

Provider ID: 273227

Board Certified Specialty: No
PRATIBHA S BINDER

 25405 HANCOCK AVE STE
217

MURRIETA, CA 92562


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1174758031

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OPHTHALMOLOGY


BANSAL, PREETI

Provider ID: 215606

Board Certified Specialty: No

PREETI BANSAL

 25170 HANCOCK AVE
MURRIETA, CA 92562


 Phone: (951) 600-1640

 After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1871664631

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hindi

Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT

HOSPITAL, SHARP MARY
BIRCH HOSP FOR WOMEN

D3. Directorio de proveedores especialistas

AND NEWBORNS, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MEMORIAL
HOSPITAL, TRI CITY MEDICAL
CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OPHTHALMOLOGY

BHATIA, SHAGUN


Provider ID: 267317

Board Certified Specialty: No
SHAGUN K BHATIA

 25170 HANCOCK AVE FL 1
MURRIETA, CA 92562

 Phone: (951) 600-1640

Fax: (951) 600-1760

 After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1104237353

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OPHTHALMOLOGY

HENNEIN, LAUREN


Provider ID: 297010

Board Certified Specialty: No
LAUREN M HENNEIN

 25170 HANCOCK AVE FL 1
MURRIETA, CA 92562

 Phone: (951) 600-1640

Fax: (951) 600-1760

 After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1699216010

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OPHTHALMOLOGY


MOLL, ANGELA

Provider ID: 215687

Board Certified Specialty: No
ANGELA M MOLL

 25170 HANCOCK AVE
MURRIETA, CA 92562

 Phone: (951) 600-1640

 After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1861648602

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT
HOSPITAL, SHARP MEMORIAL
HOSPITAL, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND, SCRIPPS MERCY
HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OPHTHALMOLOGY


MOVAGHAR, MANSOOR

Provider ID: 216415

Board Certified Specialty: No
MANSOOR MOVAGHAR



 25170 HANCOCK AVE FL 1
MURRIETA, CA 92562

 Phone: (858) 309-7702

 After Hours Phone: (858)
309-7702

Provider Gender: Male

NPI: 1497792220

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

D3. Directorio de proveedores especialistas

DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): MORGAN R BLISS

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OPHTHALMOLOGY


OHALLORAN, HENRY

Provider ID: 215685

Board Certified Specialty: No
HENRY S OHALLORAN


 25170 HANCOCK AVE
MURRIETA, CA 92562

 Phone: (951) 600-1640

 After Hours Phone: (951)
600-1640

Provider Gender: Male

NPI: 1235287947

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OTOLARYNGOLOGY


BLISS, MORGAN

Provider ID: 215684


Board Certified Specialty: No

MORGAN R BLISS

 25170 HANCOCK AVE
MURRIETA, CA 92562


 Phone: (951) 600-1640

Fax: (951) 600-1760

 After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1760707657

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OTOLARYNGOLOGY


CARVALHO, DANIELA


Provider ID: 215332

Board Certified Specialty: No

DANIELA CARVALHO


 25170 HANCOCK AVE
MURRIETA, CA 92562

 Phone: (951) 600-1640

 After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1154492916

 Provider English Spoken: Y

 Provider Language(s)
Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL, SHARP MEMORIAL
HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OTOLARYNGOLOGY


FRIESEN, TZYYNONG

Provider ID: 244898

Board Certified Specialty: No
TZYYNONG L FRIESEN

 25170 HANCOCK AVE
MURRIETA, CA 92562

 Phone: (951) 600-1400

 After Hours Phone: (951)
600-1400

Provider Gender: Female

NPI: 1952740177

 Provider English Spoken: Y


Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OTOLARYNGOLOGY

D3. Directorio de proveedores especialistas

JIANG, WEN

Provider ID: 215564

Board Certified Specialty: No
WEN A JIANG

25170 HANCOCK AVE
MURRIETA, CA 92562

Phone: (951) 600-1640

After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1659305753

Provider English Spoken: Y

Provider Language(s)
Spoken: Mandarin

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OTOLARYNGOLOGY

KARI, ELINA

Provider ID: 254089

Board Certified Specialty: No
ELINA KARI

25170 HANCOCK AVE
MURRIETA, CA 92562

Phone: (951) 600-1640

After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1780860536

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

CHILDRENS HOSP OF LOS
ANGELES, PIH HEALTH
HOSPITAL - WHITTIER, UCSD
LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OTOLARYNGOLOGY

KARI, ELINA

Provider ID: 254296

Board Certified Specialty: No
ELINA KARI

25170 HANCOCK AVE FL 1
MURRIETA, CA 92562

Phone: (951) 600-1640

After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1780860536

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:
CHILDRENS HOSP OF LOS
ANGELES, PIH HEALTH
HOSPITAL - WHITTIER, UCSD
LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OTOLARYNGOLOGY

PATEL, VIJAY

Provider ID: 297034

Board Certified Specialty: No
VIJAY PATEL

25170 HANCOCK AVE STE 1
MURRIETA, CA 92562

Phone: (951) 600-1640

Fax: (951) 600-1760

After Hours Phone: (951)
600-1640

Provider Gender: Male

NPI: 1508250747

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, VALLEY CHILDRENS
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC ALLERGY / IMMUNOLOGY

COLLINS, CATHLEEN

D3. Directorio de proveedores especialistas

Provider ID: 215733

Board Certified Specialty: No
CATHLEEN A COLLINS

25170 HANCOCK AVE
MURRIETA, CA 92562

Phone: (951) 600-1640

Fax: (951) 600-1760

After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1205128089

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: LUCILE
SALTER PACKARD CHILDRENS
HOSP, Stanford Health Care,
RADY CHILDRENS HOSPITAL
SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC CARDIOLOGY

BORQUEZ, ALEJANDRO

Provider ID: 284119

Board Certified Specialty: Yes
ALEJANDRO A BORQUEZ

25170 HANCOCK AVE FL 1
MURRIETA, CA 92562

Phone: (951) 600-1640

Fax: (951) 600-1760

After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1114277787

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC CARDIOLOGY

DAVIS, CHRISTOPHER

Provider ID: 215743

Board Certified Specialty: No
CHRISTOPHER K DAVIS

25170 HANCOCK AVE
MURRIETA, CA 92562

Phone: (951) 600-1640

After Hours Phone: (951)
600-1640

Provider Gender: Male

NPI: 1760691950

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT
HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC CARDIOLOGY

DUMMER, KIRSTEN

Provider ID: 215645

Board Certified Specialty: No
KRISTEN B DUMMER

25170 HANCOCK AVE
MURRIETA, CA 92562

Phone: (951) 600-1640

After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1780642280

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC CARDIOLOGY

MCCANDLESS, RACHEL

Provider ID: 215601

Board Certified Specialty: No
RACHEL T MCCANDLESS

25170 HANCOCK AVE
MURRIETA, CA 92562

Phone: (951) 600-1640

After Hours Phone: (951)

D3. Directorio de proveedores especialistas

600-1640
Provider Gender: Female
NPI: 1487821815
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

PEDIATRIC CARDIOLOGY

NARAYAN, HARI

Provider ID: 239114
Board Certified Specialty: No
HARI K NARAYAN
📍 25170 HANCOCK AVE
MURRIETA, CA 92562
☎ Phone: (951) 600-1640
🕒 After Hours Phone: (951)
600-1640
Provider Gender: Male
NPI: 1376705707
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

PEDIATRIC CARDIOLOGY

SILVASEPULVEDA, JOSE

Provider ID: 215679
Board Certified Specialty: No
JOSE A SILVASEPULVEDA
📍 25170 HANCOCK AVE
MURRIETA, CA 92562
☎ Phone: (951) 600-1640
🕒 After Hours Phone: (951)
600-1640
Provider Gender: Male
NPI: 1417222472
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

PEDIATRIC CARDIOLOGY

WILLIAMS, MATTHEW

Provider ID: 215678
Board Certified Specialty: No
MATTHEW R WILLIAMS
📍 25170 HANCOCK AVE
MURRIETA, CA 92562
☎ Phone: (951) 600-1640
🕒 After Hours Phone: (951)

600-1640
Provider Gender: Male
NPI: 1831423250
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
UCSF BENIOFF CHILDREN'S
HOSPITAL OAKLAND
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

PEDIATRIC EMERGENCY MEDICINE


DEVERA, GEMMIE

Provider ID: N/A
Board Certified Specialty: Yes
GEMMIE S DEVERA
📍 25500 MEDICAL CENTER
DR
MURRIETA, CA 92562
☎ Phone: (951) 696-6124
🕒 After Hours Phone: (951)
696-6124
Provider Gender: Female
NPI: 1366622078
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

D3. Directorio de proveedores especialistas

American Sign Language (ASL): *Board Certified Specialty: No*
N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*


 *Website: N/A*


PEDIATRIC EMERGENCY **MEDICINE**

DO, STEPHANIE

Provider ID: 216969

Board Certified Specialty: No
STEPHANIE T DO

 25500 MEDICAL CENTER
DR
MURRIETA, CA 92562

 *Phone: (951) 696-6124*
Fax: (951) 696-6293

 *After Hours Phone: (951)
696-6124*

Provider Gender: Female

NPI: 1750513644

 *Provider English Spoken: Y*
Cultural Competency: N


Hospital Affiliation: Martin


*Luther King Jr Community
Hospital, RADY CHILDRENS
HOSPITAL SAN DIEGO*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 *Accessibility: CONTACT
PROVIDER*

 *Website: N/A*


PEDIATRIC EMERGENCY **MEDICINE**

GROSS, MATTHEW

Provider ID: 297173

MATTHEW F GROSS

 25170 HANCOCK AVE FL 1
MURRIETA, CA 92562

 *Phone: (858) 966-7800*
Fax: (858) 966-8231

 *After Hours Phone: (858)
966-7800*

Provider Gender: Male

NPI: 1942223664

 *Provider English Spoken: Y*
Cultural Competency: N


*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 *Accessibility: CONTACT
PROVIDER*

 *Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM*

 *Website: N/A*


PEDIATRIC EMERGENCY **MEDICINE**


INDRA, SEAN


Provider ID: 302626

Board Certified Specialty: No

SEAN W INDRA


 25500 MEDICAL CENTER
DR
MURRIETA, CA 92562

 *Phone: (951) 696-6124*
Fax: (951) 696-6293

 *After Hours Phone: (951)
696-6124*

Provider Gender: Male

NPI: 1427349091

 *Provider English Spoken: Y*

Cultural Competency: N

*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, VALLEY CHILDRENS
HOSPITAL*

Medi-Cal Open Panel: No
Min/Max Age: 0\19

American Sign Language (ASL):
N

 *Accessibility: CONTACT
PROVIDER*


 *Website: N/A*


PEDIATRIC EMERGENCY **MEDICINE**

KINGDON, JOANNA

Provider ID: 302318

Board Certified Specialty: No
JOANNA E KINGDON



 25170 HANCOCK AVE STE
150
MURRIETA, CA 92562

 *Phone: (858) 966-7800*
Fax: (858) 966-8231

 *After Hours Phone: (858)
966-7800*

Provider Gender: Female

NPI: 1609495399

 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 *Accessibility: CONTACT
PROVIDER*

D3. Directorio de proveedores especialistas

 Hours: SU 1:00PM-10:00PM DAVID M MILLS

M-F 4:00PM-10:00PM

SA 1:00PM-10:00PM

 Website: N/A


PEDIATRIC EMERGENCY


MEDICINE

MESIWALA, ADNAN

Provider ID: 275655

Board Certified Specialty: No
ADNAN K MESIWALA

 25500 MEDICAL CENTER
DR
MURRIETA, CA 92562


 Phone: (951) 696-6161

Fax: (951) 696-6105

 After Hours Phone: (951)
696-6161

Provider Gender: Male

NPI: 1528483955

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Gujarati


Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC EMERGENCY

MEDICINE


MILLS, DAVID

Provider ID: 302147


Board Certified Specialty: No

 25500 MEDICAL CENTER
DR

MURRIETA, CA 92562

 Phone: (951) 696-6124

Fax: (951) 696-6293

 After Hours Phone: (951)
696-6124

Provider Gender: Male

NPI: 1194145946

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

PEDIATRIC EMERGENCY

MEDICINE


OZCAN, ALI

Provider ID: 287924


Board Certified Specialty: No
ALI K OZCAN

 25500 MEDICAL CENTER
DR

MURRIETA, CA 92562

 Phone: (951) 696-6124


Fax: (951) 696-6293

 After Hours Phone: (951)
696-6124

Provider Gender: Male

NPI: 1265867683

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Turkish

Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, LOMA LINDA
UNIVERSITY MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

PEDIATRIC EMERGENCY

MEDICINE


PARK, BRIAN

Provider ID: 302353

Board Certified Specialty: No
BRIAN L PARK

 25500 MEDICAL CENTER
DR

MURRIETA, CA 92562

 Phone: (951) 696-6124

Fax: (951) 696-6293

 After Hours Phone: (951)
696-6124

Provider Gender: Male

NPI: 1710418744

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SOUTHWEST

HEALTHCARE RANCHO


SPRINGS HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

D3. Directorio de proveedores especialistas

PEDIATRIC EMERGENCY MEDICINE

RANASURIYA, DUNISHA

Provider ID: 216972

Board Certified Specialty: No
DUNISHA G RANASURIYA

📍 25500 MEDICAL CENTER
DR
MURRIETA, CA 92562
☎ Phone: (951) 696-6161
📞 After Hours Phone: (951)
696-6161

Provider Gender: Female
NPI: 1740468057

🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

SCHROTER, STEPHANIE

Provider ID: 243831

Board Certified Specialty: No
STEPHANIE SCHROTER

📍 25500 MEDICAL CENTER
DR
MURRIETA, CA 92562
☎ Phone: (951) 696-6124
📞 After Hours Phone: (951)
696-6124

Provider Gender: Female

NPI: 1073951828

🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

SHETH, SARIKA

Provider ID: 248172

Board Certified Specialty: No
SARIKA K SHETH

📍 25500 MEDICAL CENTER
DR
MURRIETA, CA 92562
☎ Phone: (951) 696-6124
Fax: (951) 696-6293

📞 After Hours Phone: (951)
696-6124

Provider Gender: Female
NPI: 1336503234

🗣 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

SOUDER, CHRISTOPHER

Provider ID: 301634

Board Certified Specialty: Yes
CHRISTOPHER D SOUDER

📍 25170 HANCOCK AVE FL 1
MURRIETA, CA 92562
☎ Phone: (951) 600-1640
Fax: (951) 600-1760

📞 After Hours Phone: (951)
600-1640

Provider Gender: Male
NPI: 1851540199

🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSF
BENIOFF CHILDREN'S
HOSPITAL OAKLAND

Medi-Cal Open Panel: No
Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

TANG, ANDREW

Provider ID: 294678

Board Certified Specialty: No
ANDREW S TANG

📍 25500 MEDICAL CENTER
DR
MURRIETA, CA 92562
☎ Phone: (951) 696-6124
Fax: (951) 696-6293

D3. Directorio de proveedores especialistas

 After Hours Phone: (951) 696-6124

Provider Gender: Male

NPI: 1184071516


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


PEDIATRIC EMERGENCY MEDICINE


TRAN, THERESA

Provider ID: 301835



Board Certified Specialty: No
THERESA T TRAN

 25500 MEDICAL CENTER
DR
MURRIETA, CA 92562

 Phone: (951) 696-6124
Fax: (951) 696-6293

 After Hours Phone: (951)
696-6124

Provider Gender: Female
NPI: 1417496985

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish,
Vietnamese

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SOUTHWEST

HEALTHCARE RANCHO
SPRINGS HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PEDIATRIC EMERGENCY


MEDICINE

VEGA, CAROLINA

Provider ID: 309972


Board Certified Specialty: No
CAROLINA VEGA

 25500 MEDICAL CENTER
DR
MURRIETA, CA 92562

 Phone: (951) 696-6161
Fax: (951) 696-6293

 After Hours Phone: (951)
696-6161

Provider Gender: Female
NPI: 1427442086


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PEDIATRIC ENDOCRINOLOGY

SINGH, PUJA

Provider ID: 302819

Board Certified Specialty: No
PUJA SINGH

 25170 HANCOCK AVE FL 1
MURRIETA, CA 92562

 Phone: (951) 600-1640
Fax: (951) 600-1760

 After Hours Phone: (951)
600-1640

Provider Gender: Female
NPI: 1841721172


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC


GASTROENTEROLOGY

CHU, CHRISTOPHER

Provider ID: 301640



Board Certified Specialty: No
CHRISTOPHER CHU

 25170 HANCOCK AVE FL 1
MURRIETA, CA 92562




 Phone: (951) 600-1640
Fax: (951) 600-1760

 After Hours Phone: (951)
600-1640






Provider Gender: Male
NPI: 1912369273



 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish, Yue

D3. Directorio de proveedores especialistas




Chinese
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A



PEDIATRIC PULMONOLOGY **LENHART-PENDERGRASS,** **PATRICIA**




Provider ID: 294382
Board Certified Specialty: No
PATRICIA M
LENHART-PENDERGRASS
 25170 HANCOCK AVE FL 1
MURRIETA, CA 92562
 Phone: (951) 600-1640
Fax: (951) 600-1760
 After Hours Phone: (951)
600-1640
Provider Gender: Female
NPI: 1144615659
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PEDIATRIC PULMONOLOGY **RAO, APARNA**



Provider ID: 215528
Board Certified Specialty: No
APARNA R RAO
 25170 HANCOCK AVE
MURRIETA, CA 92562
 Phone: (951) 600-1640
Fax: (951) 600-1760
 After Hours Phone: (951)
600-1640







Provider Gender: Female
NPI: 1649222340
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Hindi

Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PEDIATRICS






LOPEZ, XIMENA

Provider ID: 302857
Board Certified Specialty: No
XIMENA LOPEZ
 25170 HANCOCK AVE FL 1
MURRIETA, CA 92562
 Phone: (951) 600-1640

Fax: (951) 600-1760
 After Hours Phone: (951)
600-1640
Provider Gender: Female
NPI: 1740316405
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PEDIATRICS

NGO, MAI

Provider ID: 302112
Board Certified Specialty: No
MAI P NGO
 25170 HANCOCK AVE STE 1
MURRIETA, CA 92562
 Phone: (951) 600-1640
Fax: (951) 600-1760
 After Hours Phone: (951)
600-1640
Provider Gender: Female
NPI: 1508910787
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: UCSF
BENIOFF CHILDREN'S
HOSPITAL OAKLAND, UCSF
MEDICAL CENTER, RADY
CHILDRENS HOSPITAL SAN
DIEGO


D3. Directorio de proveedores especialistas


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRICS


PATTERSON, MARY


Provider ID: 215677

Board Certified Specialty: No

MARY E PATTERSON

 25170 HANCOCK AVE
MURRIETA, CA 92562

 Phone: (951) 600-1640

 After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1912112020

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRICS


VARGASTRUJILLO, MARCELA


Provider ID: 215602

Board Certified Specialty: No

MARCELA VARGASTRUJILLO

 25170 HANCOCK AVE
MURRIETA, CA 92562

 Phone: (951) 600-1640

 After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1952534091

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, RADY

CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICAL MEDICINE /

REHABILITATION


ALGRA, JEFFREY

Provider ID: 215644


Board Certified Specialty: No

JEFFREY ALGRA

 25170 HANCOCK AVE
MURRIETA, CA 92562

 Phone: (951) 600-1640

Fax: (951) 600-1760

 After Hours Phone: (951)
600-1640

Provider Gender: Male

NPI: 1457664518

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICAL MEDICINE /

REHABILITATION


BIFFL, SUSAN

Provider ID: 283113

Board Certified Specialty: No

SUSAN E BIFFL

 25170 HANCOCK AVE
MURRIETA, CA 92562

 Phone: (951) 600-1640

Fax: (951) 600-1760

 After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1366589640

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICAL MEDICINE /

D3. Directorio de proveedores especialistas

REHABILITATION

DALAL, PRITHA

Provider ID: 215665

Board Certified Specialty: No
PRITHA B DALAL MD

25170 HANCOCK AVE
MURRIETA, CA 92562

Phone: (951) 600-1640

Fax: (951) 600-1760

After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1609017532

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICAL MEDICINE / REHABILITATION

RYAN, KYLE

Provider ID: 275662

Board Certified Specialty: No
KYLE J RYAN

25170 HANCOCK AVE FL 1
MURRIETA, CA 92562

Phone: (951) 600-1640

Fax: (951) 600-1760

After Hours Phone: (951)

600-1640

Provider Gender: Male

NPI: 1447645742

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICAL MEDICINE / REHABILITATION

SCOTT-WYARD, PHOEBE

Provider ID: 283086

Board Certified Specialty: No
PHOEBE R SCOTT-WYARD

25170 HANCOCK AVE
MURRIETA, CA 92562

Phone: (951) 600-1640

Fax: (951) 600-1760

After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1336356203

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:
CHILDRENS HOSP OF LOS
ANGELES, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICAL MEDICINE / REHABILITATION

SKALSKY, ANDREW

Provider ID: 215522

Board Certified Specialty: No
ANDREW J SKALSKY

25170 HANCOCK AVE
MURRIETA, CA 92562

Phone: (951) 600-1640

Fax: (951) 600-1760

After Hours Phone: (951)
600-1640

Provider Gender: Male

NPI: 1487635272

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

ANWAR, YASMIN

Provider ID: 300845

Board Certified Specialty: Yes

YASMIN ANWAR

25495 MEDICAL CENTER
DR STE 200
MURRIETA, CA 92562

Phone: (951) 304-7546

D3. Directorio de proveedores especialistas

Fax: (951) 696-5872

☎ After Hours Phone: (951)
304-7546

Provider Gender: Female

NPI: 1588602247

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Persian, Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PHYSICIANS ASSISTANT

RODRIGUES, ANNETTE

Provider ID: 302453

Board Certified Specialty: No

ANNETTE A RODRIGUES

📍 25170 HANCOCK AVE FL 1
MURRIETA, CA 92562

☎ Phone: (951) 600-1640

Fax: (951) 600-1760

☎ After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1205381845

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL, SHARP MEMORIAL
HOSPITAL

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL): ☎ After Hours Phone: (951)
677-1111

Provider Gender: Male

NPI: 1144615337

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PULMONARY DISEASES

KUMAR, AVNEE

Provider ID: 300014

Board Certified Specialty: No

AVNEE J KUMAR

📍 25500 MEDICAL CENTER
DR

MURRIETA, CA 92562

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1750745394

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

PULMONARY DISEASES

SURI, RAJAT

Provider ID: 283350

Board Certified Specialty: No

RAJAT SURI

📍 25500 MEDICAL CENTER
DR

MURRIETA, CA 92562

☎ Phone: (951) 677-1111

Fax: (951) 677-9757

SURGERY GENERAL

FAIRBANKS, TIMOTHY

Provider ID: 246979

Board Certified Specialty: No

TIMOTHY J FAIRBANKS

📍 25170 HANCOCK AVE FL 1
MURRIETA, CA 92562

☎ Phone: (951) 600-1640

☎ After Hours Phone: (951)
600-1640

Provider Gender: Male

NPI: 1407010556

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,

SHARP MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL

HOSPITAL, UCSF BENIOFF

CHILDREN'S HOSPITAL

OAKLAND

D3. Directorio de proveedores especialistas


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): **VASCULAR**

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY GENERAL


KLING, KAREN


Provider ID: 215583

Board Certified Specialty: No

KAREN M KLING

 25170 HANCOCK AVE
MURRIETA, CA 92562

 Phone: (951) 600-1640

 After Hours Phone: (951)
600-1640

Provider Gender: Female

NPI: 1982775144

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
SHARP MARY BIRCH HOSP
FOR WOMEN AND

NEWBORNS, NATIONAL
NAVAL MED CTR, SHARP
MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


SURGERY GENERAL


HOWE, STEVEN

Provider ID: 206761

Board Certified Specialty: No
STEVEN C HOWE

 28062 BAXTER RD
MURRIETA, CA 92563

 Phone: (877) 558-6248

 After Hours Phone: (877)
558-6248

Provider Gender: Male

NPI: 1497702740

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON, TRI
CITY MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY ORTHOPEDIC


CHENG, YU-TSUN

Provider ID: 301902

Board Certified Specialty: No

YU-TSUN CHENG

 25170 HANCOCK AVE
MURRIETA, CA 92562

 Phone: (951) 600-1640

Fax: (951) 600-1760

 After Hours Phone: (951)
600-1640

Provider Gender: Male

NPI: 1992982854

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SOUTHWEST
HEALTHCARE INLAND VALLEY

HOSPITAL, SOUTHWEST
HEALTHCARE RANCHO

SPRINGS HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY ORTHOPEDIC

UPASANI, VIDYADHAR

Provider ID: 283160

Board Certified Specialty: No
VIDYADHAR V UPASANI

 25170 HANCOCK AVE FL 1
MURRIETA, CA 92562

 Phone: (951) 600-1640

Fax: (951) 600-1760

 After Hours Phone: (951)
600-1640

Provider Gender: Male

NPI: 1548417652

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

D3. Directorio de proveedores especialistas

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A



SURGERY PEDIATRIC

THANGARAJAH, HARIHARAN

Provider ID: 215420

Board Certified Specialty: No
HARIHARAN THANGARAJAH

 25170 HANCOCK AVE
MURRIETA, CA 92562

 Phone: (951) 600-1640
 After Hours Phone: (951)
600-1640

Provider Gender: Male

NPI: 1598979593

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY THORACIC


HOWE, STEVEN

Provider ID: 210169

Board Certified Specialty: No
STEVEN C HOWE

 41011 CALIFORNIA OAKS
RD STE 104

MURRIETA, CA 92562

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1497702740

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON, TRI
CITY MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY THORACIC

POLLEMA, TRAVIS


Provider ID: 210577

Board Certified Specialty: No

TRAVIS L POLLEMA

 41011 CALIFORNIA OAKS
RD STE 104

MURRIETA, CA 92562

 Phone: (858) 657-7777
Fax: (888) 539-8781

 After Hours Phone: (858)
657-7777

Provider Gender: Male

NPI: 1871752956

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL

CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

NATIONAL CITY

CERTIFIED NURSE


PRACTITIONER

CUNNINGHAM, ISIS

Provider ID: 302115

Board Certified Specialty: No
ISIS Y CUNNINGHAM

 655 EUCLID AVE STE 205
NATIONAL CITY, CA 91950

 Phone: (619) 470-1945
Fax: (619) 475-5048

 After Hours Phone: (619)
470-1945

Provider Gender: Female

NPI: 1770124927

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

DE CASTRO, SHARLENE

D3. Directorio de proveedores especialistas

JOYCE

Provider ID: 299158

Board Certified Specialty: No
SHARLENE JOYCE J DE

CASTRO

2743 HIGHLAND AVE
NATIONAL CITY, CA 91950

Phone: (844) 200-2426

Fax: (619) 339-5657

After Hours Phone: (844)
200-2426

Provider Gender: Female

NPI: 1750019824

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
8:00AM-6:00PM
F 8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

DRISCOLL, SUSAN

Provider ID: 301775

Board Certified Specialty: No
SUSAN D DRISCOLL

330 E 8TH ST
NATIONAL CITY, CA 91950

Phone: (619) 662-4100

Fax: (619) 259-2807

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1477755684

Provider English Spoken: Y
Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 12\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: SU 10:00AM-4:00PM
M-F 8:30AM-5:30PM
SA 8:00AM-2:30PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

DRISCOLL, SUSAN

Provider ID: 301774

Board Certified Specialty: No
SUSAN D DRISCOLL

340 E 8TH ST
NATIONAL CITY, CA 91950

Phone: (619) 662-4100

Fax: (619) 259-2807

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1477755684

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 12\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: SU 10:00AM-4:00PM
M-F 8:30AM-5:30PM
SA 8:00AM-2:30PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

GULLY, MICHELLE

Provider ID: 299422

Board Certified Specialty: No
MICHELLE D GULLY

1428 HIGHLAND AVE
NATIONAL CITY, CA 91950

Phone: (844) 200-2426

Fax: (619) 434-1613

After Hours Phone: (844)
200-2426

Provider Gender: Female

NPI: 1801557947

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

LIM, IMELDA

Provider ID: 294308

Board Certified Specialty: No
IMELDA B LIM

2743 HIGHLAND AVE
NATIONAL CITY, CA 91950

Phone: (844) 200-2426

Fax: (619) 474-3919

After Hours Phone: (844)
200-2426

Provider Gender: Female

NPI: 1093130395

Provider English Spoken: Y
Provider Language(s)

D3. Directorio de proveedores especialistas

Spoken: Tagalog
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TU
8:30AM-5:30PM
W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

MIDORO, ABEGAILLE

Provider ID: 303830

Board Certified Specialty: No
ABEGAILLE A MIDORO



 2835 HIGHLAND AVE STE A
NATIONAL CITY, CA 91950

 Phone: (844) 200-2426
Fax: (619) 477-1286

 After Hours Phone: (844)
200-2426

Provider Gender: Female

NPI: 1952925851

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Tagalog


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TU
8:30AM-5:30PM
W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

MIDORO, ABEGAILLE

Provider ID: 303827

Board Certified Specialty: No
ABEGAILLE A MIDORO



 2835 HIGHLAND AVE STE B
NATIONAL CITY, CA 91950

 Phone: (844) 200-2426
Fax: (619) 477-2628

 After Hours Phone: (844)
200-2426

Provider Gender: Female

NPI: 1952925851

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TU
8:30AM-5:30PM
W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

NOVENO, HILARIO JR

Provider ID: 297836

Board Certified Specialty: No
HILARIO JR C NOVENO JR



 2743 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (844) 200-2426
Fax: (619) 474-4008

 After Hours Phone: (844)
200-2426

Provider Gender: Male

NPI: 1124486865


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, Spanish,
Tagalog


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-6:00PM

 Website: N/A


CHIROPRACTOR

GILIBERTO, JOSEPH

Provider ID: 291548

Board Certified Specialty: No
JOSEPH A GILIBERTO



 2835 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (844) 200-2426
Fax: (619) 399-5959

 After Hours Phone: (844)
200-2426

Provider Gender: Male

NPI: 1821463159

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N



Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

D3. Directorio de proveedores especialistas


 Hours: M-F
8:00AM-5:00PM
 Website: N/A


DERMATOLOGY

LIN, SHINKO



Provider ID: 308216
Board Certified Specialty: Yes
SHINKO K LIN

 655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950

 Phone: (619) 267-8303
Fax: (619) 267-4835

 After Hours Phone: (619)
267-8303

Provider Gender: Female
NPI: 1205130036

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation:


GROSSMONT HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:30AM-4:30PM


 Website: N/A

DERMATOLOGY

LIN, SHINKO



Provider ID: 306319
Board Certified Specialty: Yes
SHINKO K LIN

 655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950

 Phone: (619) 267-8303
Fax: (619) 267-4835

 After Hours Phone: (619)
267-8303

Provider Gender: Female
NPI: 1205130036

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:


GROSSMONT HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:30AM-4:30PM


 Website: N/A

FAMILY PRACTICE

NAVARRO, VANESSAMARIA



Provider ID: 301784
Board Certified Specialty: No
VANESSAMARIA M NAVARRO

 2400 E 8TH ST
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100
Fax: (619) 259-2807

 After Hours Phone: (619)
662-4100

Provider Gender: Female
NPI: 1952563421

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Filipino, Spanish,
Tagalog

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL CHULA

VISTA, SHARP CHULA VISTA

MED CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

FAMILY PRACTICE

ROBERTS, POMAI



Provider ID: 301278
Board Certified Specialty: No
POMAI ROBERTS

 1136 D AVE
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100
Fax: (619) 336-2323

 After Hours Phone: (619)
662-4100

Provider Gender: Female
NPI: 1023278314

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:30AM-5:30PM

SA 8:00AM-2:30PM

 Website: N/A

INTERVENTIONAL

CARDIOLOGY

D3. Directorio de proveedores especialistas

CAMACHO, BENJAMIN

Provider ID: 290137

Board Certified Specialty: No
BENJAMIN O CAMACHO

1615 SWEETWATER RD STE
D
NATIONAL CITY, CA 91950

Phone: (619) 474-2233

Fax: (619) 474-2211

After Hours Phone: (619)
474-2233

Provider Gender: Male

NPI: 1699759936

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
ALVARADO HOSPITAL LLC

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

INTERVENTIONAL CARDIOLOGY

CAMACHO, BENJAMIN

Provider ID: 35045

Board Certified Specialty: No
BENJAMIN O CAMACHO

1615 SWEETWATER RD
NATIONAL CITY, CA 91950

Phone: (619) 474-2233

Fax: (619) 474-2211

After Hours Phone: (619)
474-2233

Provider Gender: Male

NPI: 1699759936

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
ALVARADO HOSPITAL LLC

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-6:00PM

Website: N/A

Email:

BCAMACHOMD@SBCGLOBAL.NET

INTERVENTIONAL CARDIOLOGY

CAMACHO, BENJAMIN

Provider ID: 269129

Board Certified Specialty: No
BENJAMIN O CAMACHO

1615 SWEETWATER RD
NATIONAL CITY, CA 91950

Phone: (619) 474-2233

Fax: (619) 474-2211

After Hours Phone: (619)
474-2233

Provider Gender: Male

NPI: 1699759936

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,

ALVARADO HOSPITAL LLC

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-6:00PM

Website: N/A

Email:

BCAMACHOMD@SBCGLOBAL.NET

INTERVENTIONAL CARDIOLOGY

DAMANI, SAMIR

Provider ID: 303098

Board Certified Specialty: No
SAMIR B DAMANI

655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950

Phone: (858) 800-2480

Fax: (858) 216-1908

After Hours Phone: (858)
800-2480

Provider Gender: Male

NPI: 1457379372

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

SA 9:00AM-4:00PM

D3. Directorio de proveedores especialistas

 Website: N/A


INTERVENTIONAL CARDIOLOGY

PANDHI, JAY

Provider ID: 269087

Board Certified Specialty: No
JAY N PANDHI

 655 EUCLID AVE STE 208
NATIONAL CITY, CA 91950

 Phone: (619) 512-1915

Fax: (619) 512-1913

 After Hours Phone: (619)
512-1915

Provider Gender: Male

NPI: 1407997406

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PARADISE
VALLEY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SHARP CHULA VISTA
MED CTR, SCRIPPS MERCY
HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERVENTIONAL CARDIOLOGY


ROUGH, STEVEN

Provider ID: 302044


Board Certified Specialty: No
STEVEN J ROUGH

 1415 E 8TH ST STE 6

NATIONAL CITY, CA 91950


 Phone: (619) 434-4288

Fax: (619) 434-4315

 After Hours Phone: (619)
434-4288

Provider Gender: Male

NPI: 1386821460

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SHARP MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INTERVENTIONAL CARDIOLOGY

ROUGH, STEVEN

Provider ID: 302043

Board Certified Specialty: No
STEVEN J ROUGH

 1415 E 8TH ST STE 6
NATIONAL CITY, CA 91950


 Phone: (619) 434-4288

Fax: (619) 434-4315

 After Hours Phone: (619)
434-4288

Provider Gender: Male

NPI: 1386821460


 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INTERVENTIONAL CARDIOLOGY

ROUGH, STEVEN

Provider ID: 301320

Board Certified Specialty: No
STEVEN J ROUGH

 1415 E 8TH ST STE 6
NATIONAL CITY, CA 91950

 Phone: (619) 434-4288

Fax: (619) 434-4315

 After Hours Phone: (619)
434-4288

Provider Gender: Male

NPI: 1386821460

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SHARP MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

D3. Directorio de proveedores especialistas

8:00AM-5:00PM

 Website: N/A


NEPHROLOGY

COMUNALE, RODERICK

Provider ID: 290784

Board Certified Specialty: No
RODERICK A COMUNALE

 502 EUCLID AVE STE 205
NATIONAL CITY, CA 91950


 Phone: (858) 551-0276

Fax: (858) 454-8796

 After Hours Phone: (858)
551-0276

Provider Gender: Male

NPI: 1568462109

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, PARADISE

VALLEY HOSPITAL,

ALVARADO HOSPITAL LLC,

SCRIPPS MERCY HOSPITAL,

KINDRED HOSPITAL SAN

DIEGO, SELECT SPECIALTY

HOSPITAL SAN DIEGO, SELECT

SPECIALTY HOSPITAL SAN


DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 21\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A

OBSTETRICS / GYNECOLOGY


ASLIAN, AZITA

Provider ID: 301797

Board Certified Specialty: No

AZITA ASLIAN

 1136 D AVE
NATIONAL CITY, CA 91950


 Phone: (619) 662-4100


Fax: (619) 336-2323

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1851667661

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Faroese, Fataleka

Cultural Competency: N

Hospital Affiliation: Hemet

Global Medical Center, Menifee

Global Medical Center,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS MERCY

HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 10:00AM-4:00PM
M-F 8:30AM-5:30PM

SA 8:00AM-2:30PM

 Website: N/A

OBSTETRICS / GYNECOLOGY

DELROSARIO, GELEN


Provider ID: 206092

Board Certified Specialty: No

GELEN R DELROSARIO

 502 EUCLID AVE STE 300

NATIONAL CITY, CA 91950

 Phone: (619) 475-1261

Fax: (619) 475-1267

 After Hours Phone: (619)
475-1261

Provider Gender: Female

NPI: 1255643474

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,


PARADISE VALLEY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A

Email:

pquiroz_80@hotmail.com

OBSTETRICS / GYNECOLOGY


DELROSARIO, GELEN

Provider ID: 269247

Board Certified Specialty: No

GELEN R DELROSARIO

 502 EUCLID AVE STE 300
NATIONAL CITY, CA 91950

 Phone: (619) 475-1261


Fax: (619) 475-1267

 After Hours Phone: (619)
475-1261

Provider Gender: Female

NPI: 1255643474

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Tagalog

D3. Directorio de proveedores especialistas

Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
PARADISE VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

Email:

pquiroz_80@hotmail.com

OBSTETRICS / GYNECOLOGY

DELROSARIO, GELEN

Provider ID: 257478

Board Certified Specialty: No
GELEN R DELROSARIO

502 EUCLID AVE STE 300
NATIONAL CITY, CA 91950

Phone: (619) 475-1261

Fax: (619) 475-1267

After Hours Phone: (619)
475-1261

Provider Gender: Female

NPI: 1255643474

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
PARADISE VALLEY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

Email:

pquiroz_80@hotmail.com

OBSTETRICS / GYNECOLOGY

WINESBURG, JENNIFER

Provider ID: 302451

Board Certified Specialty: No
JENNIFER J WINESBURG

2400 E 8TH ST STE 8
NATIONAL CITY, CA 91950

Phone: (619) 662-4100

Fax: (619) 259-2807

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1811162456

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SHARP

CORONADO HOSP AND

HEALTHCARE CTR,

GROSSMONT HOSPITAL,

DESERT REGIONAL MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPHTHALMOLOGY

HAIGHT, BRUCE

Provider ID: 269113

Board Certified Specialty: No
BRUCE T HAIGHT

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

Phone: (800) 898-2020

Fax: (844) 897-3788

After Hours Phone: (800)
898-2020

Provider Gender: Male

NPI: 1427029628

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPTOMETRIST

AOTO, KIM

Provider ID: 268722

Board Certified Specialty: No
KIM N AOTO

2240 E PLAZA BLVD STE
F-G

NATIONAL CITY, CA 91950

Phone: (800) 898-2020

Fax: (844) 897-3788

After Hours Phone: (800)
898-2020




Provider Gender: Female

NPI: 1780935650

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese



D3. Directorio de proveedores especialistas


Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

OPTOMETRIST

KOO, ANITA

Provider ID: 306903
Board Certified Specialty: No
ANITA K KOO

 1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
 *Phone: (619) 425-7755*
Fax: (619) 425-2138
 *After Hours Phone: (619) 425-7755*

Provider Gender: Female
NPI: 1669825667
 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999



American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*



OPTOMETRIST

KOO, ANITA

Provider ID: 304538
Board Certified Specialty: No
ANITA K KOO

 1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
 *Phone: (619) 425-7755*
Fax: (619) 425-2138

 *After Hours Phone: (619) 425-7755*
Provider Gender: Female
NPI: 1669825667
 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999



American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*



OPTOMETRIST

KOO, ANITA

Provider ID: 307113
Board Certified Specialty: No
ANITA K KOO

 2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
 *Phone: (619) 474-2284*
Fax: (619) 474-3919

 *After Hours Phone: (619) 474-2284*
Provider Gender: Female
NPI: 1669825667
 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F*

8:00AM-5:00PM
 *Website: N/A*




OPTOMETRIST

KOO, ANITA

Provider ID: 307171
Board Certified Specialty: No
ANITA K KOO

 2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
 *Phone: (619) 474-2284*
Fax: (619) 474-3919



 *After Hours Phone: (619) 474-2284*
Provider Gender: Female
NPI: 1669825667
 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999



American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

PODIATRIST


ATMAR, AKMAL

Provider ID: 269784
Board Certified Specialty: No
AKMAL ATMAR

 2345 E 8TH ST STE 105
NATIONAL CITY, CA 91950
 *Phone: (929) 287-4511*
Fax: (877) 671-6835

 *After Hours Phone: (929) 287-4511*
Provider Gender: Male
NPI: 1558656637
 *Provider English Spoken: Y*





D3. Directorio de proveedores especialistas

 *Provider Language(s)*
Spoken: Farsi, Persian, Urdu
Cultural Competency: N
Hospital Affiliation: PARADISE VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999




American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F*
9:00AM-5:00PM
 *Website: N/A*

PODIATRIST

CAINE, SAMUEL






Provider ID: 308212
Board Certified Specialty: No
SAMUEL CAINE
 610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
 *Phone: (619) 292-2493*
Fax: (619) 618-0222
 *After Hours Phone: (619)*
292-2493
Provider Gender: Male
NPI: 1396230298
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: Sharp
Grossmont Hospital, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MERCY
HOSPITAL, SHARP MEMORIAL
HOSPITAL, SHARP CHULA
VISTA MED CTR, SHARP
CORONADO HOSP AND
HEALTHCARE CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*









PODIATRIST

CAINE, SAMUEL

Provider ID: 308637
Board Certified Specialty: No
SAMUEL CAINE
 610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
 *Phone: (619) 292-2493*
Fax: (619) 618-0222
 *After Hours Phone: (619)*
292-2493
Provider Gender: Male
NPI: 1396230298
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: Sharp
Grossmont Hospital, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MERCY
HOSPITAL, SHARP MEMORIAL
HOSPITAL, SHARP CHULA
VISTA MED CTR, SHARP
CORONADO HOSP AND
HEALTHCARE CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*



PODIATRIST

DAVIDSONIII, JOHN

Provider ID: 129542
Board Certified Specialty: No
JOHN A DAVIDSONIII III
 610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
 *Phone: (619) 427-3481*
Fax: (619) 420-7807
 *After Hours Phone: (619)*
427-3481
Provider Gender: Male
NPI: 1689069874
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SHARP CHULA VISTA
MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F*
9:00AM-4:30PM
 *Website: N/A*

PULMONARY DISEASES

LIM, ROSEMARIE

Provider ID: 262224
Board Certified Specialty: No
ROSEMARIE S LIM
 610 EUCLID AVE STE 202
NATIONAL CITY, CA 91950
 *Phone: (619) 472-4900*

D3. Directorio de proveedores especialistas

Fax: (619) 472-4910

☎ After Hours Phone: (619) 472-4900

Provider Gender: Female

NPI: 1841303419

☐ Provider English Spoken: Y
☐ Provider Language(s) Spoken: Chinese, Mandarin, Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,
SHARP MEMORIAL HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS MERCY
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:30AM-4:30PM

🌐 Website: N/A

REGISTERED PHYSICAL THERAPIST

CHENG, BRANDON

Provider ID: 304531

Board Certified Specialty: No
BRANDON G CHENG

📍 3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950

☎ Phone: (619) 482-3000
Fax: (619) 695-0050

☎ After Hours Phone: (619)
482-3000

Provider Gender: Male

NPI: 1336894724

☐ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-TH
7:00AM-7:00PM
F 7:00AM-5:00PM
SA 8:00AM-1:00PM

🌐 Website: N/A

REGISTERED PHYSICAL THERAPIST

JIMENEZ, ANDREA

Provider ID: 299888

Board Certified Specialty: No

ANDREA L JIMENEZ

📍 3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950

☎ Phone: (619) 482-3000
Fax: (619) 482-3001

☎ After Hours Phone: (619)
482-3000

Provider Gender: Female

NPI: 1407440670

☐ Provider English Spoken: Y
☐ Provider Language(s) Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F 7:00AM-7:00PM
🌐 Website: N/A

REGISTERED PHYSICAL THERAPIST

KARANDE, PRACHI

Provider ID: 287102

Board Certified Specialty: No

PRACHI KARANDE

📍 3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950

☎ Phone: (619) 482-3000
Fax: (619) 482-3001

☎ After Hours Phone: (619)
482-3000

Provider Gender: Female

NPI: 1699357525

☐ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
7:00AM-6:00PM

🌐 Website: N/A

REGISTERED PHYSICAL THERAPIST

NGUYEN, TIA

Provider ID: 305012

Board Certified Specialty: No

TIA NGUYEN

📍 3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950

☎ Phone: (619) 482-3000
Fax: (619) 695-0050

☎ After Hours Phone: (619)
482-3000

Provider Gender: Female

NPI: 1457136269


☐ Provider English Spoken: Y
Cultural Competency: N


D3. Directorio de proveedores especialistas

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH
7:00AM-7:00PM

F 7:00AM-4:00PM

 Website: N/A

REGISTERED PHYSICAL


THERAPIST

NGUYEN, TIA

Provider ID: 305011

Board Certified Specialty: No
TIA NGUYEN

 3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950

 Phone: (619) 482-3000

Fax: (619) 695-0050

 After Hours Phone: (619)
482-3000

Provider Gender: Female


NPI: 1457136269


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH
7:00AM-7:00PM

F 7:00AM-4:00PM

 Website: N/A

REGISTERED PHYSICAL


THERAPIST

NOVENCIDO, ANDREW

Provider ID: 301996

Board Certified Specialty: No
ANDREW NOVENCIDO

 3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950

 Phone: (619) 482-3000

Fax: (619) 695-0050

 After Hours Phone: (619)
482-3000

Provider Gender: Male

NPI: 1447723937


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

REGISTERED PHYSICAL


THERAPIST

NOVENCIDO, ANDREW

Provider ID: 286784

Board Certified Specialty: No
ANDREW NOVENCIDO

 3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950

 Phone: (619) 482-3000

Fax: (619) 695-0050

 After Hours Phone: (619)
482-3000

Provider Gender: Male

NPI: 1447723937


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

REGISTERED PHYSICAL


THERAPIST

SPARKS, TODD

Provider ID: 301110

Board Certified Specialty: No
TODD M SPARKS

 3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950

 Phone: (619) 482-3000


Fax: (619) 695-0050

 After Hours Phone: (619)
482-3000

Provider Gender: Male

NPI: 1265481139

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999


American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M 7:00AM-7:00PM
TU 7:00AM-0:00PM

W-TH 7:00AM-7:00PM

F 7:00AM-0:00PM

 Website: N/A

REGISTERED PHYSICAL

THERAPIST


SUGGS, SARAH

Provider ID: 298366

Board Certified Specialty: No
SARAH SUGGS

D3. Directorio de proveedores especialistas

 3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950

 Phone: (619) 482-3000
Fax: (619) 482-3001

 After Hours Phone: (619)
482-3000


Provider Gender: Female
NPI: 1083353650

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 7:00AM-7:00PM

 Website: N/A


REGISTERED PHYSICAL THERAPIST

SUGGS, SARAH

Provider ID: 301430

Board Certified Specialty: No
SARAH SUGGS

 3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950

 Phone: (619) 482-3000
Fax: (619) 482-3001


 After Hours Phone: (619)
482-3000


Provider Gender: Female
NPI: 1083353650

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 7:00AM-7:00PM

 Website: N/A


REGISTERED PHYSICAL THERAPIST

VILLANUEVA, GIOVANNI

Provider ID: 301533



Board Certified Specialty: No
GIOVANNI X VILLANUEVA

 3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950

 Phone: (619) 482-3000
Fax: (619) 695-0050

 After Hours Phone: (619)
482-3000

Provider Gender: Male
NPI: 1063046878


 Provider English Spoken: Y
 Provider Language(s)

Spoken: Spanish
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F 7:00AM-7:00PM

 Website: N/A

OCEANSIDE


ANESTHESIOLOGY PAIN MANAGEMENT

BROWNLOW, ROY


Provider ID: 308111

Board Certified Specialty: No
ROY C BROWNLOW

 2125 S EL CAMINO REAL
STE 103

OCEANSIDE, CA 92054
 Phone: (760) 610-0522

Fax: (760) 610-0523

 After Hours Phone: (760)
610-0522

Provider Gender: Male
NPI: 1205949914

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N
Hospital Affiliation:


GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,


SHARP CORONADO HOSP
AND HEALTHCARE CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


ANESTHESIOLOGY PAIN MANAGEMENT

BROWNLOW, ROY


Provider ID: 308400

Board Certified Specialty: No
ROY C BROWNLOW

 2125 S EL CAMINO REAL
STE 103

OCEANSIDE, CA 92054
 Phone: (760) 610-0522

Fax: (760) 610-0523

 After Hours Phone: (760)
610-0522

Provider Gender: Male
NPI: 1205949914

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

D3. Directorio de proveedores especialistas

Hospital Affiliation:


GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


ANESTHESIOLOGY PAIN MANAGEMENT


DAIRO, BRANDON

Provider ID: 299882

*Board Certified Specialty: No
BRANDON DAIRO*

 3231 WARING CT STE K
OCEANSIDE, CA 92056

 *Phone: (760) 607-5350*

 *After Hours Phone: (760)
607-5350*

Provider Gender: Male

NPI: 1689092470

 *Provider English Spoken: Y
Cultural Competency: N*


*Hospital Affiliation: TRI CITY
MEDICAL CTR, SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA*


Medi-Cal Open Panel: Yes


Min/Max Age: 18\100

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*


 *Website: N/A*

CERTIFIED ACUPUNCTURIST GONZALEZ, ANDRES

Provider ID: 308047

*Board Certified Specialty: No
ANDRES D GONZALEZ*

 3988 VISTA WAY STE G
OCEANSIDE, CA 92056


 *Phone: (760) 736-6767*


Fax: (760) 736-6744

 *After Hours Phone: (760)
736-6767*

Provider Gender: Male

NPI: 1841857729

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Chinese, Spanish*

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


CERTIFIED NURSE PRACTITIONER

APRIL, MONIQUE

Provider ID: 306979

*Board Certified Specialty: No
MONIQUE APRIL*

 818 PIER VIEW WAY
OCEANSIDE, CA 92054

 *Phone: (760) 631-5000*

Fax: (760) 414-3892

 *After Hours Phone: (760)*

631-5000

Provider Gender: Female

NPI: 1093288730

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


CERTIFIED NURSE PRACTITIONER

APRIL, MONIQUE

Provider ID: 306978

*Board Certified Specialty: No
MONIQUE APRIL*

 517 N HORNE ST
OCEANSIDE, CA 92054

 *Phone: (760) 631-5000*

Fax: (760) 414-3892

 *After Hours Phone: (760)
631-5000*

Provider Gender: Female

NPI: 1093288730

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*

D3. Directorio de proveedores especialistas

8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE

PRACTITIONER

BALDWIN, ANDREA

Provider ID: 294937

Board Certified Specialty: No

ANDREA M BALDWIN

818 PIER VIEW WAY
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1497202121

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 2\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TU
8:00AM-5:00PM
W 8:00AM-7:00PM
TH-F 8:00AM-5:00PM
SA 9:00AM-6:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

BINETTE, DONYA

Provider ID: 303861

Board Certified Specialty: No

DONYA L BINETTE

2210 MESA DR STE 300
OCEANSIDE, CA 92054

Phone: (760) 736-6767

Fax: (760) 736-8740

After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1427325166

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM
SA 8:00AM-4:30PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

CHILAKA, SAMUEL

Provider ID: 301315

Board Certified Specialty: No

SAMUEL U CHILAKA

517 N HORNE ST
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1679140644

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH

8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

CHILAKA, SAMUEL

Provider ID: 301313

Board Certified Specialty: No

SAMUEL U CHILAKA

818 PIER VIEW WAY
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1679140644

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

CHILAKA, SAMUEL

Provider ID: 301314

Board Certified Specialty: No

SAMUEL U CHILAKA

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

D3. Directorio de proveedores especialistas

Fax: (760) 414-3892

☎ After Hours Phone: (760) 631-5000

Provider Gender: Male

NPI: 1679140644

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-TH
8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

CHRISTY, TYLER

Provider ID: 303931

Board Certified Specialty: No
TYLER D CHRISTY

📍 4700 N RIVER RD
OCEANSIDE, CA 92057

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

☎ After Hours Phone: (760) 631-5000

Provider Gender: Male

NPI: 1689094971

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

CHRISTY, TYLER

Provider ID: 303930

Board Certified Specialty: No
TYLER D CHRISTY

📍 818 PIER VIEW WAY
OCEANSIDE, CA 92054

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

☎ After Hours Phone: (760) 631-5000

Provider Gender: Male

NPI: 1689094971

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

CHRISTY, TYLER

Provider ID: 307299

Board Certified Specialty: No
TYLER D CHRISTY

📍 818 PIER VIEW WAY
OCEANSIDE, CA 92054

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

☎ After Hours Phone: (760) 631-5000

Provider Gender: Male

NPI: 1689094971

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

CISZEK, ALEXANDRA

Provider ID: 306002

Board Certified Specialty: No
ALEXANDRA N CISZEK

📍 605 CROUCH ST
OCEANSIDE, CA 92054

☎ Phone: (760) 736-6767

Fax: (760) 736-6744

☎ After Hours Phone: (760) 736-6767

Provider Gender: Female

NPI: 1578220612

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 2\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

GENOVESE, KELLY

D3. Directorio de proveedores especialistas

Provider ID: 301304

Board Certified Specialty: No
KELLY K GENOVESE

2210 MESA DR STE 5
OCEANSIDE, CA 92054

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1326052457

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): JESSICA A HERNANDEZ

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

HEAD, KRISTIN

Provider ID: 268660

Board Certified Specialty: No
KRISTIN N HEAD

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

Phone: (760) 547-1020

Fax: (760) 547-1021

After Hours Phone: (760)
547-1020

Provider Gender: Female

NPI: 1699078923

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

HERNANDEZ, JESSICA

Provider ID: 304495

Board Certified Specialty: No

JESSICA A HERNANDEZ

517 N HORNE ST
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1013668680

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

HERNANDEZ, JESSICA

Provider ID: 304494

Board Certified Specialty: No

JESSICA A HERNANDEZ

818 PIER VIEW WAY
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1013668680

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

HERNANDEZ, JESSICA

Provider ID: 302300

Board Certified Specialty: No
JESSICA A HERNANDEZ

517 N HORNE ST
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1013668680

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT

D3. Directorio de proveedores especialistas

PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE

PRACTITIONER

HERNANDEZ, JESSICA

Provider ID: 302298
Board Certified Specialty: No
JESSICA A HERNANDEZ

818 PIER VIEW WAY
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1013668680

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

HERNANDEZ, JESSICA

Provider ID: 302299
Board Certified Specialty: No
JESSICA A HERNANDEZ

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)

631-5000
Provider Gender: Female
NPI: 1013668680
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

HUERTA, STEVEN

Provider ID: 307935
Board Certified Specialty: No
STEVEN T HUERTA

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1558607440

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

HUERTA, STEVEN

Provider ID: 307934
Board Certified Specialty: No
STEVEN T HUERTA

818 PIER VIEW WAY
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1558607440

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

HUERTA, STEVEN

Provider ID: 307932
Board Certified Specialty: No
STEVEN T HUERTA

517 N HORNE ST
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1558607440

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes


D3. Directorio de proveedores especialistas

Min/Max Age: 0\999

American Sign Language (ASL):  517 N HORNE ST

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


KELLEHER, BRIDGET


Provider ID: 298084

Board Certified Specialty: No

BRIDGET M KELLEHER


 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1245695006

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


KELLEHER, BRIDGET


Provider ID: 298081

Board Certified Specialty: No

BRIDGET M KELLEHER


 517 N HORNE ST
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1245695006

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


KELLEHER, BRIDGET


Provider ID: 298082

Board Certified Specialty: No

BRIDGET M KELLEHER


 818 PIER VIEW WAY
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1245695006

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


LANG, LESLIE


Provider ID: 308045

Board Certified Specialty: No

LESLIE A LANG

 818 PIER VIEW WAY
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

 Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1457366130

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

MONTGOMERY JR, KEITH


Provider ID: 295285

Board Certified Specialty: No

KEITH MONTGOMERY JR JR

D3. Directorio de proveedores especialistas

 517 N HORNE ST
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1790978617


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 6\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TU

8:00AM-5:00PM

W 10:00AM-7:00PM

TH-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


MONTGOMERY JR, KEITH

Provider ID: 295286

Board Certified Specialty: No

KEITH MONTGOMERY JR JR

 818 PIER VIEW WAY
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1790978617

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 6\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


 Hours: M-TU

8:00AM-5:00PM

W 10:00AM-7:00PM

TH-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


MONTGOMERY JR, KEITH

Provider ID: 295287

Board Certified Specialty: No

KEITH MONTGOMERY JR JR

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1790978617

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 6\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TU

8:00AM-5:00PM

W 10:00AM-7:00PM

TH-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


PRITZKER, JOELY

Provider ID: 239772

Board Certified Specialty: No

JOELY R PRITZKER

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1619384351

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 12\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

SA 9:00AM-4:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


RAYTA, NICOLE

Provider ID: 304682

Board Certified Specialty: No

NICOLE RAYTA

 517 N HORNE ST
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1689027542

 Provider English Spoken: Y
Cultural Competency: N


D3. Directorio de proveedores especialistas

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


**CERTIFIED NURSE
PRACTITIONER**

SANACORA, RACHEL

Provider ID: 297730

Board Certified Specialty: No
RACHEL SANACORA

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

 Phone: (760) 547-1000
Fax: (760) 547-1021

 After Hours Phone: (760)
547-1000

Provider Gender: Female

NPI: 1548987985


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

 Website: N/A


**CERTIFIED NURSE
PRACTITIONER**

SANTIAGO, AMANDA

Provider ID: 242607

Board Certified Specialty: No
AMANDA C SANTIAGO


 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1619488731

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM

 Website: N/A


**CERTIFIED NURSE
PRACTITIONER**

TAYLOR, CHRISTOPHER

Provider ID: 295506

Board Certified Specialty: No
CHRISTOPHER TAYLOR


 818 PIER VIEW WAY
OCEANSIDE, CA 92054

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1851747166

 Provider English Spoken: Y


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 12\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-2:00PM
SA 9:00AM-4:00PM

 Website: N/A


**CERTIFIED NURSE
PRACTITIONER**

TAYLOR, CHRISTOPHER

Provider ID: 295503

Board Certified Specialty: No
CHRISTOPHER TAYLOR

 517 N HORNE ST
OCEANSIDE, CA 92054

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1851747166

 Provider English Spoken: Y


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 12\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-2:00PM
SA 9:00AM-4:00PM

 Website: N/A

**CERTIFIED NURSE
PRACTITIONER**


TAYLOR, CHRISTOPHER

D3. Directorio de proveedores especialistas

Provider ID: 295505

Board Certified Specialty: No
CHRISTOPHER TAYLOR

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1851747166


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 12\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-2:00PM
SA 9:00AM-4:00PM

 Website: N/A

CERTIFIED REGISTERED


NURSE MIDWIFE

KELLY, KATHERINE

Provider ID: 290312

Board Certified Specialty: No
KATHERINE M KELLY

 2210 MESA DR STE 5
OCEANSIDE, CA 92054


 Phone: (760) 736-6767


Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1801134275

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED REGISTERED


NURSE MIDWIFE

PERLMAN, TAMARA

Provider ID: 290733

Board Certified Specialty: No
TAMARA L PERLMAN

 2210 MESA DR STE 5
OCEANSIDE, CA 92054


 Phone: (760) 736-6767


Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1730274374

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: TRI CITY
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CHIROPRACTOR

ANDREWS, BRAD

Provider ID: 290542

Board Certified Specialty: No
BRAD R ANDREWS

 619 CROUCH ST
OCEANSIDE, CA 92054

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

Provider Gender: Male

NPI: 1750791745

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


CHIROPRACTOR

JU, NATHANIEL

Provider ID: 290221

Board Certified Specialty: No
NATHANIEL JU

 517 N HORNE ST
OCEANSIDE, CA 92054

 Phone: (760) 631-5000


Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1972883882

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

D3. Directorio de proveedores especialistas

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


DERMATOLOGY

BROWN, REGINA

Provider ID: 309981

Board Certified Specialty: No
REGINA E BROWN

 3629 VISTA WAY
OCEANSIDE, CA 92056


 Phone: (760) 757-7546

Fax: (760) 828-9138

 After Hours Phone: (760)
757-7546

Provider Gender: Female

NPI: 1801424692

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


EMERGENCY MEDICINE

PHAM, LILY

Provider ID: 304934

Board Certified Specialty: No
LILY M PHAM

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056


 Phone: (760) 547-1000

Fax: (760) 547-1021

 After Hours Phone: (760)
547-1000

Provider Gender: Female

NPI: 1811423072

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

 Website: N/A


FAMILY PRACTICE

SALAMANCA, OMAR

Provider ID: 295469

Board Certified Specialty: No
OMAR SALAMANCA

 605 CROUCH ST
OCEANSIDE, CA 92054


 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

Provider Gender: Male

NPI: 1083000947

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: KERN

MEDICAL CENTER


Medi-Cal Open Panel: Yes

Min/Max Age: 14\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

SA 8:00AM-4:30PM


 Website: N/A


GASTROENTEROLOGY

NOVO, MEGAN

Provider ID: 308044

Board Certified Specialty: No
MEGAN E NOVO

 3923 WARING RD STE A
OCEANSIDE, CA 92056

 Phone: (760) 724-8782

Fax: (760) 842-7801

 After Hours Phone: (760)
724-8782

Provider Gender: Female

NPI: 1770961971

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL
ENCINITAS, UCSD LA JOLLA

JOHN SALLY THORNTON,
SCRIPPS MERCY HOSPITAL

CHULA VISTA, UNIVERSITY OF
CALIFORNIA IRVINE MED CTR,

UCSD MEDICAL CTR, SCRIPPS
MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH
8:00AM-4:30PM

D3. Directorio de proveedores especialistas

 Website: N/A

INTERNAL MEDICINE


SHABANIAN, LEILA

Provider ID: 307537

Board Certified Specialty: No

LEILA SHABANIAN

 517 N HORNE ST
OCEANSIDE, CA 92054


 Phone: (760) 631-5000


Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1013963073

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi, French,
Persian

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, TRI CITY MEDICAL CTR,

PALOMAR HEALTH, SCRIPPS

MERCY HOSPITAL, PALOMAR

MEDICAL CENTER


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERNAL MEDICINE


SHABANIAN, LEILA

Provider ID: 307215

Board Certified Specialty: No

LEILA SHABANIAN

 818 PIER VIEW WAY
OCEANSIDE, CA 92054


 Phone: (760) 631-5000


Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1013963073

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi, French,
Persian

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, TRI CITY MEDICAL CTR,

PALOMAR HEALTH, SCRIPPS

MERCY HOSPITAL, PALOMAR

MEDICAL CENTER

Medi-Cal Open Panel: Yes


Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Hours: M-TU
8:00AM-5:00PM
W 8:00AM-7:00PM
TH-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

 Website: N/A

MATERNAL AND FETAL MEDICINE


MELBER, DORA

Provider ID: 296991

Board Certified Specialty: No

DORA J MELBER

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

 Phone: (858) 966-6710


Fax: (858) 966-6711

 After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1124413026

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hungarian, Spanish
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, RADY CHILDRENS

HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

MATERNAL AND FETAL MEDICINE


REIMERS, REBECCA

Provider ID: 294651

Board Certified Specialty: No

REBECCA M REIMERS

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

 Phone: (858) 966-6710

Fax: (858) 966-6711

 After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1801207634

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

D3. Directorio de proveedores especialistas


DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


MATERNAL AND FETAL MEDICINE

RICHARDSON, ALVIE


Provider ID: 264686

Board Certified Specialty: No
ALVIE C RICHARDSON

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

 Phone: (858) 966-6710

Fax: (858) 966-6711

 After Hours Phone: (858)
966-6710

Provider Gender: Male

NPI: 1154305977

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, RADY
CHILDRENS HOSPITAL SAN
DIEGO, Sharp Grossmont
Hospital


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


MATERNAL AND FETAL MEDICINE

SCHWENDEMANN, WADE

Provider ID: 205437

Board Certified Specialty: No
WADE D SCHWENDEMANN

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

 Phone: (858) 966-6710

Fax: (858) 966-6711

 After Hours Phone: (858)
966-6710

Provider Gender: Male

NPI: 1477563302

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL, GROSSMONT
HOSPITAL, SHARP MEMORIAL
HOSPITAL, SHARP MARY
BIRCH HOSP FOR WOMEN
AND NEWBORNS, TRI CITY
MEDICAL CTR, Sharp


Grossmont Hospital, Sharp
Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


MATERNAL AND FETAL MEDICINE

WESTERMANN, MELISSA

Provider ID: 255793

Board Certified Specialty: No
MELISSA L WESTERMANN

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

 Phone: (858) 966-6710

Fax: (858) 966-6711

 After Hours Phone: (858)
966-6710

Provider Gender: Female


NPI: 1760730758

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,
EARL AND LORRAINE MILLER
CHILDRENS HSP, LONG
BEACH MEMORIAL MED CTR,
UNIVERSITY OF CALIFORNIA
IRVINE MED CTR, SHARP
MEMORIAL HOSPITAL,
GROSSMONT HOSPITAL,
Sharp Grossmont Hospital,
Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A







MATERNAL AND FETAL MEDICINE

WILLIAMS, KRISTIN

Provider ID: 206230

Board Certified Specialty: No
KRISTIN M WILLIAMS



D3. Directorio de proveedores especialistas







 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
 Phone: (858) 966-6710
Fax: (858) 966-6711
 After Hours Phone: (858)
966-6710
Provider Gender: Female
NPI: 1992847131
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Stanford
Health Care, LUCILE SALTER
PACKARD CHILDRENS HOSP,
SAN MATEO MEDICAL CTR,
SHARP MEMORIAL HOSPITAL,
SHARP MARY BIRCH HOSP
FOR WOMEN AND
NEWBORNS, TRI CITY
MEDICAL CTR, CALIFORNIA
PACIFIC MED CTR,
CALIFORNIA PACIFIC MED
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

NEPHROLOGY

LIU, ANDREW

Provider ID: 308522
Board Certified Specialty: No
ANDREW C LIU

 3300 VISTA WAY
OCEANSIDE, CA 92056
 Phone: (760) 967-9900




Fax: (760) 967-6769
 After Hours Phone: (760)
967-9900
Provider Gender: Male
NPI: 1710481866
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Chinese, Mandarin
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
9:00AM-5:00PM
 Website: N/A

NEPHROLOGY

LIU, ANDREW

Provider ID: 305443
Board Certified Specialty: No
ANDREW C LIU







 3300 VISTA WAY STE B
OCEANSIDE, CA 92056
 Phone: (760) 967-9900
Fax: (760) 967-6769
 After Hours Phone: (760)
967-9900
Provider Gender: Male
NPI: 1710481866
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Chinese, Mandarin
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
9:00AM-5:00PM
 Website: N/A

NEPHROLOGY

LIU, ANDREW

Provider ID: 301573
Board Certified Specialty: No
ANDREW C LIU

 3300 VISTA WAY
OCEANSIDE, CA 92056
 Phone: (760) 967-9900
Fax: (760) 967-6769
 After Hours Phone: (760)
967-9900
Provider Gender: Male
NPI: 1710481866
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Chinese, Mandarin
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
9:00AM-5:00PM
 Website: N/A

NEUROLOGY

JINDAL, ANUJA

D3. Directorio de proveedores especialistas

Provider ID: 206266

Board Certified Specialty: No
ANUJA V JINDAL

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

Phone: (760) 547-1020

Fax: (760) 547-1021

After Hours Phone: (760)
547-1020

Provider Gender: Female

NPI: 1194046581

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

NEUROLOGY CHILD

SAHAGIAN, MICHELLE

Provider ID: 206075

Board Certified Specialty: No
MICHELLE L SAHAGIAN

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

Phone: (760) 547-1020

Fax: (760) 547-1021

After Hours Phone: (760)
547-1020

Provider Gender: Female

NPI: 1275604035

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OBSTETRICS / GYNECOLOGY

BINDER, PRATIBHA

Provider ID: 273226

Board Certified Specialty: No
PRATIBHA S BINDER

4002 VISTA WAY
OCEANSIDE, CA 92056

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1174758031

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPHTHALMOLOGY

BANSAL, PREETI

Provider ID: 205619

Board Certified Specialty: No
PREETI BANSAL

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

Phone: (960) 547-1020

Fax: (760) 547-1021

After Hours Phone: (960)
547-1020

Provider Gender: Female

NPI: 1871664631

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

DIEGO, GROSSMONT
HOSPITAL, SHARP MARY

BIRCH HOSP FOR WOMEN

AND NEWBORNS, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MEMORIAL

HOSPITAL, TRI CITY MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A








OPHTHALMOLOGY

BHATIA, SHAGUN

Provider ID: 267318





Board Certified Specialty: No
SHAGUN K BHATIA




D3. Directorio de proveedores especialistas

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
 Phone: (760) 547-1020
Fax: (760) 547-1021
 After Hours Phone: (760)
547-1020
Provider Gender: Female
NPI: 1104237353
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

OPHTHALMOLOGY





HENNEIN, LAUREN




Provider ID: 297013
Board Certified Specialty: No
LAUREN M HENNEIN
 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
 Phone: (760) 547-1020
Fax: (760) 547-1021
 After Hours Phone: (760)
547-1020
Provider Gender: Female
NPI: 1699216010
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

OPHTHALMOLOGY


JACOBSEN, BRADLEY




Provider ID: 302868
Board Certified Specialty: Yes
BRADLEY H JACOBSEN
 3231 WARING CT STE S
OCEANSIDE, CA 92056
 Phone: (760) 631-6144
Fax: (760) 724-3920
 After Hours Phone: (760)
631-6144
Provider Gender: Male
NPI: 1760845184
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR, SHARP
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

OPHTHALMOLOGY




MOLL, ANGELA

Provider ID: 205509
Board Certified Specialty: No
ANGELA M MOLL
 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
 Phone: (760) 547-1020
Fax: (760) 547-1021
 After Hours Phone: (760)
547-1020
Provider Gender: Female
NPI: 1861648602

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT
HOSPITAL, SHARP MEMORIAL
HOSPITAL, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND, SCRIPPS MERCY
HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

OPHTHALMOLOGY

MOVAGHAR, MANSOOR

Provider ID: 216416
Board Certified Specialty: No
MANSOOR MOVAGHAR
 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
 Phone: (760) 547-1020
 After Hours Phone: (760)

D3. Directorio de proveedores especialistas

547-1020
Provider Gender: Male
NPI: 1497792220
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

OPHTHALMOLOGY

OHALLORAN, HENRY

Provider ID: 205887
Board Certified Specialty: No
HENRY S OHALLORAN
 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
 Phone: (760) 547-1020
Fax: (760) 547-1021
 After Hours Phone: (760)
547-1020
Provider Gender: Male
NPI: 1235287947
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Medi-Cal Open Panel: Yes

Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

OPHTHALMOLOGY

SHEILS, CATHERINE

Provider ID: 305308
Board Certified Specialty: No
CATHERINE R SHEILS
 3637 VISTA WAY
OCEANSIDE, CA 92056
 Phone: (760) 758-2008
Fax: (760) 758-2004
 After Hours Phone: (760)
758-2008

Provider Gender: Female
NPI: 1932605649
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

OPHTHALMOLOGY

SONG, DELU

Provider ID: 302871
Board Certified Specialty: No

DELU SONG
 3231 WARING CT STE S
OCEANSIDE, CA 92056
 Phone: (760) 631-6144
Fax: (760) 724-3920
 After Hours Phone: (760)
631-6144
Provider Gender: Male
NPI: 1437689536
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Chinese, Mandarin
Cultural Competency: N
Hospital Affiliation: TRI CITY
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A



OPTOMETRIST

GEE, JENNIFER

Provider ID: 290927
Board Certified Specialty: No
JENNIFER W GEE
 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000
Provider Gender: Female
NPI: 1336589332
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
COMMUNITY REGIONAL

D3. Directorio de proveedores especialistas




MEDICAL CENTER-FRESNO,
CALIFORNIA PACIFIC
MEDICAL CENTER - D P APH
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
 Website: N/A

OPTOMETRIST

GEE, JENNIFER

Provider ID: 290210
Board Certified Specialty: No
JENNIFER W GEE



 517 N HORNE ST
OCEANSIDE, CA 92054
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000

Provider Gender: Female
NPI: 1336589332

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:
COMMUNITY REGIONAL
MEDICAL CENTER-FRESNO,
CALIFORNIA PACIFIC
MEDICAL CENTER - D P APH
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999



American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
 Website: N/A

OPTOMETRIST

KIM, MICHAEL

Provider ID: 290904
Board Certified Specialty: No
MICHAEL S KIM

 517 N HORNE ST
OCEANSIDE, CA 92054
 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000


Provider Gender: Male
NPI: 1164546313

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER



 Hours: SU 8:00AM-5:00PM
M-F 8:00AM-5:00PM

 Website: N/A

OPTOMETRIST

KIM, MICHAEL

Provider ID: 290902
Board Certified Specialty: No
MICHAEL S KIM

 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
Fax: (760) 414-3892




 After Hours Phone: (760)
631-5000

Provider Gender: Male
NPI: 1164546313

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999



American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
 Hours: SU 8:00AM-5:00PM
M-F 8:00AM-5:00PM
 Website: N/A

OPTOMETRIST

MORA, WENDY

Provider ID: 290929
Board Certified Specialty: No
WENDY A MORA

 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female
NPI: 1376958389

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N



 Accessibility: CONTACT PROVIDER

 Website: N/A

OPTOMETRIST

MORA, WENDY

Provider ID: 290237
Board Certified Specialty: No
WENDY A MORA


 517 N HORNE ST
OCEANSIDE, CA 92054
 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

D3. Directorio de proveedores especialistas

Provider Gender: Female

NPI: 1376958389

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

OPTOMETRIST


RING, ROBERT

Provider ID: 269380


Board Certified Specialty: No

ROBERT A RING

 3998 VISTA WAY STE 204
OCEANSIDE, CA 92056


 Phone: (760) 726-9383

Fax: (760) 726-9897

 After Hours Phone: (760)
726-9383

Provider Gender: Male

NPI: 1336228840

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M 10:00AM-7:00PM
TU-TH 9:00AM-5:00PM
F 9:00AM-0:00PM

 Website: N/A


OPTOMETRIST

TAM, EMILY

Provider ID: 290318

Board Certified Specialty: No
EMILY TAM

 517 N HORNE ST
OCEANSIDE, CA 92054


 Phone: (760) 631-5000


Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1497161236

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese, Mandarin,
Yue Chinese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OPTOMETRIST

TAM, EMILY

Provider ID: 290317

Board Certified Specialty: No
EMILY TAM

 4700 N RIVER RD
OCEANSIDE, CA 92057


 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1497161236

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese, Mandarin,

Yue Chinese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OPTOMETRIST

TRAN, JESSICA

Provider ID: 303732

Board Certified Specialty: No
JESSICA A TRAN

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1457922957


 Provider English Spoken: Y


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 5\21

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OPTOMETRIST

TRAN, JESSICA

Provider ID: 304887

Board Certified Specialty: No
JESSICA A TRAN

 4700 N RIVER RD

D3. Directorio de proveedores especialistas

OCEANSIDE, CA 92057
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1457922957
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

OPTOMETRIST

TRAN, JESSICA

Provider ID: 303730
Board Certified Specialty: No
JESSICA A TRAN
818 PIER VIEW WAY
OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1457922957
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 5\21
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

Website: N/A

OPTOMETRIST

TRAN, JESSICA

Provider ID: 303731
Board Certified Specialty: No
JESSICA A TRAN
517 N HORNE ST
OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1457922957
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 5\21
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

OPTOMETRIST

TRAN, JESSICA

Provider ID: 304886
Board Certified Specialty: No
JESSICA A TRAN
517 N HORNE ST
OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1457922957
Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

OTOLARYNGOLOGY

BLISS, MORGAN

Provider ID: 206086
Board Certified Specialty: No
MORGAN R BLISS
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
Phone: (760) 547-1020
Fax: (760) 547-1021
After Hours Phone: (760) 547-1020
Provider Gender: Female
NPI: 1760707657
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

OTOLARYNGOLOGY

FRIESEN, TZYYNONG

Provider ID: 244899

D3. Directorio de proveedores especialistas

Board Certified Specialty: No
TZYYNONG L FRIESEN

📍 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
☎ Phone: (760) 547-1020
🕒 After Hours Phone: (760)
547-1020

Provider Gender: Female
NPI: 1952740177

🗨 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

OTOLARYNGOLOGY

LEUIN, SHELBY

Provider ID: 206111

Board Certified Specialty: No
SHELBY C LEUIN

📍 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
☎ Phone: (760) 547-1020
Fax: (760) 547-1021
🕒 After Hours Phone: (760)
547-1020

Provider Gender: Female
NPI: 1124230909

🗨 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND
Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

OTOLARYNGOLOGY

PATEL, VIJAY

Provider ID: 297036

Board Certified Specialty: No
VIJAY PATEL

📍 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
☎ Phone: (760) 547-1020
Fax: (760) 547-1021
🕒 After Hours Phone: (760)
547-1020

Provider Gender: Male
NPI: 1508250747

🗨 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, VALLEY CHILDRENS
HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

AGHILI, ROXANA

Provider ID: 303781

Board Certified Specialty: No
ROXANA AGHILI

📍 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
☎ Phone: (760) 547-1000
Fax: (760) 547-1021
🕒 After Hours Phone: (760)
547-1000

Provider Gender: Female
NPI: 1851927883

🗨 Provider English Spoken: Y
🗨 Provider Language(s)
Spoken: Farsi
Cultural Competency: N
Hospital Affiliation: KAISER
FOUNDATION HOSPITAL SAN
DIEGO, RADY CHILDRENS
HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
🌐 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

CHOO, SUN

Provider ID: 296537

Board Certified Specialty: No
SUN H CHOO

📍 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
☎ Phone: (760) 547-1000
Fax: (760) 547-1021
🕒 After Hours Phone: (760)
547-1000

D3. Directorio de proveedores especialistas

Provider Gender: Female
NPI: 1700047628
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: No
Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
🌐 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

GORHAM, LAURA

Provider ID: 275786
Board Certified Specialty: No
LAURA M GORHAM

📍 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
☎ Phone: (760) 547-1000
Fax: (760) 547-1021

🕒 After Hours Phone: (760)
547-1000

Provider Gender: Female
NPI: 1316162324

☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
🌐 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

GROSS, MATTHEW

Provider ID: 297175
Board Certified Specialty: No
MATTHEW F GROSS

📍 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
☎ Phone: (760) 547-1000
Fax: (760) 547-1021

🕒 After Hours Phone: (760)
547-1000

Provider Gender: Male
NPI: 1942223664

☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
🌐 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

KINGDON, JOANNA

Provider ID: 302319
Board Certified Specialty: No

JOANNA E KINGDON
📍 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
☎ Phone: (760) 547-1000
Fax: (760) 547-1021

🕒 After Hours Phone: (760)
547-1000

Provider Gender: Female
NPI: 1609495399

☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
🌐 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

PARK, RONALD

Provider ID: 295456
Board Certified Specialty: No
RONALD E PARK





📍 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
☎ Phone: (760) 547-1000
Fax: (760) 547-1021

🕒 After Hours Phone: (760)
547-1000

Provider Gender: Male
NPI: 1881695914



☐ Provider English Spoken: Y




D3. Directorio de proveedores especialistas

 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
*Hospital Affiliation: TRI CITY
MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO*
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL):
N
 *Accessibility: CONTACT
PROVIDER*
 *Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM*
 *Website: N/A*

PEDIATRIC EMERGENCY MEDICINE





PARKER, SHERINE


Provider ID: 205787
Board Certified Specialty: No
SHERINE B PARKER
 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
 *Phone: (760) 547-1020*
Fax: (760) 547-1021
 *After Hours Phone: (760)
547-1020*
Provider Gender: Female
NPI: 1477626513
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Arabic, Spanish
Cultural Competency: N
*Hospital Affiliation: GLENDALE
ADVENTIST MED CTR,
GLENDALE MEMORIAL HOSP
AND HEALTH CTR, TRI CITY
MEDICAL CTR, RADY*

*CHILDRENS HOSPITAL SAN
DIEGO, VALLEY CHILDRENS
HOSPITAL*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 *Accessibility: CONTACT
PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*

PEDIATRIC EMERGENCY MEDICINE




QUINONES-PEREZ, BIANCA


Provider ID: 206951
Board Certified Specialty: No
BIANCA N QUINONES-PEREZ
 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
 *Phone: (760) 547-1000*
Fax: (760) 547-1021
 *After Hours Phone: (760)
547-1000*
Provider Gender: Female
NPI: 1124360565
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 *Accessibility: CONTACT
PROVIDER*
 *Hours: SU 1:00PM-10:00PM*




M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
 *Website: N/A*

PEDIATRIC EMERGENCY MEDICINE

RUSSELL, SAMUEL

Provider ID: 301251
Board Certified Specialty: No
SAMUEL RUSSELL
 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
 *Phone: (760) 547-1000*
Fax: (760) 547-1021
 *After Hours Phone: (760)
547-1000*
Provider Gender: Male
NPI: 1215564265

 *Provider English Spoken: Y*
Cultural Competency: N
*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

 *Accessibility: CONTACT
PROVIDER*
 *Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM*
 *Website: N/A*

PEDIATRIC EMERGENCY MEDICINE

TODD, SARAH

Provider ID: 302801
Board Certified Specialty: No
SARAH C TODD
 3605 VISTA WAY STE 172

D3. Directorio de proveedores especialistas

OCEANSIDE, CA 92056
Phone: (760) 547-1000
Fax: (760) 547-1021
After Hours Phone: (760) 547-1000
Provider Gender: Female
NPI: 1407299787
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RONALD REAGAN UCLA MED CTR, SANTA MONICA UCLA MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
Website: N/A

PEDIATRIC EMERGENCY MEDICINE

VAIDYA, KAMALA

Provider ID: 205813
Board Certified Specialty: No
KAMALA VAIDYA
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
Phone: (760) 547-1000
Fax: (760) 547-1021
After Hours Phone: (760) 547-1000
Provider Gender: Female
NPI: 1083840920
Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
Website: N/A

PEDIATRIC EMERGENCY MEDICINE

VARGAS, JACLYN

Provider ID: 296485
Board Certified Specialty: No
JACLYN F VARGAS
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
Phone: (760) 547-1000
Fax: (760) 547-1021
After Hours Phone: (760) 547-1000
Provider Gender: Female
NPI: 1619359718
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, Los Angeles General Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 1:00PM-10:00PM

M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
Website: N/A

PEDIATRIC GASTROENTEROLOGY

CHU, CHRISTOPHER

Provider ID: 301642
Board Certified Specialty: No
CHRISTOPHER CHU

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
Phone: (760) 547-1020
Fax: (760) 547-1021

After Hours Phone: (760) 547-1020
Provider Gender: Male
NPI: 1912369273

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Yue Chinese
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PEDIATRIC PULMONOLOGY

LENHART-PENDERGRASS, PATRICIA

Provider ID: 294643
Board Certified Specialty: No
PATRICIA M

D3. Directorio de proveedores especialistas

LENHART-PENDERGRASS

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

Phone: (760) 547-1020

Fax: (760) 547-1021

After Hours Phone: (760)
547-1020

Provider Gender: Female

NPI: 1144615659

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICAL MEDICINE / REHABILITATION

RICHARDSON, HENRY

Provider ID: 295852

Board Certified Specialty: No

HENRY A RICHARDSON

3231 WARING CT STE K
OCEANSIDE, CA 92056

Phone: (760) 607-5350

Fax: (760) 607-5365

After Hours Phone: (760)
607-5350

Provider Gender: Male

NPI: 1407052459

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA
VISTA, PALOMAR MEDICAL
CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICAL MEDICINE / REHABILITATION

RYAN, KYLE

Provider ID: 275661

Board Certified Specialty: No

KYLE J RYAN

3605 VISTA WAY
OCEANSIDE, CA 92056

Phone: (760) 547-1020

Fax: (760) 547-1021

After Hours Phone: (760)
547-1020

Provider Gender: Male

NPI: 1447645742

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

RAMOS, ELENA

Provider ID: 301307

Board Certified Specialty: No
ELENA R RAMOS

605 CROUCH ST BLDG C
OCEANSIDE, CA 92054

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1306489570

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 2\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

RODRIGUES, ANNETTE

Provider ID: 302455

Board Certified Specialty: No

ANNETTE A RODRIGUES

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

Phone: (760) 547-1020

Fax: (760) 547-1021

After Hours Phone: (760)
547-1020

Provider Gender: Female

NPI: 1205381845

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

D3. Directorio de proveedores especialistas


DIEGO, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT

WRIGHT, DEREK

Provider ID: 305530

Board Certified Specialty: No
DEREK J WRIGHT

 3231 WARING CT STE K
OCEANSIDE, CA 92056

 Phone: (760) 607-5350

Fax: (760) 607-5365

 After Hours Phone: (760)
607-5350

Provider Gender: Male


NPI: 1629674858


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A


PSYCHOLOGIST

COOK, SHERYL

Provider ID: 304924

Board Certified Specialty: No
SHERYL G COOK

 619 CROUCH ST STE 100
OCEANSIDE, CA 92054

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1750420816


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M 9:00AM-6:15PM
W 9:00AM-6:00PM

 Website: N/A


PSYCHOLOGIST

JENSEN, BRIAN

Provider ID: 290775

Board Certified Specialty: No
BRIAN M JENSEN

 619 CROUCH ST
OCEANSIDE, CA 92054

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

Provider Gender: Male

NPI: 1518138049


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A


PSYCHOLOGIST

KRAPES, MICHAEL

Provider ID: 290097

Board Certified Specialty: No
MICHAEL B KRAPES

 2210 MESA DR STE 300
OCEANSIDE, CA 92054

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

Provider Gender: Male

NPI: 1215233028

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A


REGISTERED PHYSICAL THERAPIST

FARRAR, COURTNEY

Provider ID: 295874

Board Certified Specialty: No
COURTNEY L FARRAR

 3231 WARING CT STE K
OCEANSIDE, CA 92056

 Phone: (760) 607-5350

Fax: (760) 607-5365

 After Hours Phone: (760)
607-5350

Provider Gender: Male


NPI: 1124577952

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes


D3. Directorio de proveedores especialistas

Min/Max Age: 13\999

American Sign Language (ASL):  After Hours Phone: (760) 547-1020

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY ORTHOPEDIC

CIDAMBI, EMILY

Provider ID: 246469

Board Certified Specialty: No
EMILY O CIDAMBI

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

 Phone: (858) 966-6789

Fax: (858) 966-8519

 After Hours Phone: (858)
966-6789

Provider Gender: Female

NPI: 1659634699

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY ORTHOPEDIC

PRUSS, ERIKA

Provider ID: 303798

Board Certified Specialty: No
ERIKA L PRUSS

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

 Phone: (760) 547-1020

Fax: (760) 547-1021

Provider Gender: Female

NPI: 1538402441

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY ORTHOPEDIC

UPASANI, VIDYADHAR


Provider ID: 260954

Board Certified Specialty: No
VIDYADHAR V UPASANI

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

 Phone: (760) 547-1020

Fax: (760) 547-1021

 After Hours Phone: (760)
547-1020

Provider Gender: Male

NPI: 1548417652

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

SURGERY PEDIATRIC **FAIRBANKS, TIMOTHY**


Provider ID: 205498

Board Certified Specialty: No
TIMOTHY J FAIRBANKS

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056


 Phone: (760) 547-1020

Fax: (760) 547-1021

 After Hours Phone: (760)
547-1020

Provider Gender: Male

NPI: 1407010556

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
SHARP MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL

HOSPITAL, UCSF BENIOFF
CHILDREN'S HOSPITAL

OAKLAND


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY PEDIATRIC

D3. Directorio de proveedores especialistas

KLING, KAREN

Provider ID: 206129

Board Certified Specialty: No
KAREN M KLING

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

Phone: (760) 547-1020

Fax: (760) 547-1021

After Hours Phone: (760)
547-1020

Provider Gender: Female

NPI: 1982775144

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
SHARP MARY BIRCH HOSP
FOR WOMEN AND

NEWBORNS, NATIONAL
NAVAL MED CTR, SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PERRIS

CERTIFIED NURSE PRACTITIONER

BLAND, JACELIS

Provider ID: 296767

Board Certified Specialty: No
JACELIS BLAND

1675 N PERRIS BLVD STE G1

PERRIS, CA 92571

Phone: (760) 736-7676

Fax: (760) 736-6744

After Hours Phone: (760)
736-7676

Provider Gender: Female

NPI: 1801522859

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

SA 8:00AM-4:30PM

Website: N/A

POWAY

ANESTHESIOLOGY PAIN MANAGEMENT

BROWNLOW, ROY

Provider ID: 308402

Board Certified Specialty: No
ROY C BROWNLOW

15725 POMERADO RD STE
201

POWAY, CA 92064

Phone: (760) 610-0522

Fax: (760) 610-0523

After Hours Phone: (760)
610-0522

Provider Gender: Male

NPI: 1205949914

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

ANESTHESIOLOGY PAIN MANAGEMENT

BROWNLOW, ROY

Provider ID: 308113

Board Certified Specialty: No
ROY C BROWNLOW

15725 POMERADO RD STE
201

POWAY, CA 92064

Phone: (760) 610-0522

Fax: (760) 610-0523

After Hours Phone: (760)
610-0522

Provider Gender: Male

NPI: 1205949914

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR

Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

D3. Directorio de proveedores especialistas

American Sign Language (ASL): AMANDA S WOLFE

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

JOHNSON, CHRISTINE

Provider ID: 295458

Board Certified Specialty: No
CHRISTINE JOHNSON

 13010 POWAY RD
POWAY, CA 92064

 Phone: (858) 218-3000
Fax: (360) 462-2742

 After Hours Phone: (858)
218-3000

Provider Gender: Female

NPI: 1295049229

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PARADISE
VALLEY HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 13\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


WOLFE, AMANDA


Provider ID: 243582

Board Certified Specialty: No

 15525 POMERADO RD STE
B1


POWAY, CA 92064


 Phone: (858) 457-8333

 After Hours Phone: (858)
457-8333

Provider Gender: Female

NPI: 1063813475

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Russian, Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


WRIGHT, KIMBERLY

Provider ID: 256378


Board Certified Specialty: No
KIMBERLY D WRIGHT

 15611 POMERADO RD STE
400

POWAY, CA 92064


 Phone: (858) 675-3200

Fax: (858) 673-1587

 After Hours Phone: (858)
675-3200

Provider Gender: Female

NPI: 1811400708

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

DERMATOLOGY


LIN, SHINKO

Provider ID: 308217

Board Certified Specialty: No
SHINKO K LIN

 15725 POMERADO RD STE
102

POWAY, CA 92064

 Phone: (619) 267-8303


Fax: (619) 267-4835

 After Hours Phone: (619)
267-8303

Provider Gender: Female

NPI: 1205130036

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation:
GROSSMONT HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:30AM-4:30PM

 Website: N/A

DERMATOLOGY

D3. Directorio de proveedores especialistas

LIN, SHINKO

Provider ID: 306320

Board Certified Specialty: No
SHINKO K LIN

15725 POMERADO RD STE
102
POWAY, CA 92064

Phone: (619) 267-8303

Fax: (619) 267-4835

After Hours Phone: (619)
267-8303

Provider Gender: Female

NPI: 1205130036

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-4:30PM

Website: N/A

FAMILY PRACTICE

FLINN, SCOTT

Provider ID: 270054

Board Certified Specialty: Yes
SCOTT D FLINN

15611 POMERADO RD STE
400
POWAY, CA 92064

Phone: (858) 675-3100

Fax: (858) 613-2938

After Hours Phone: (858)
675-3100

Provider Gender: Male

NPI: 1184694598

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR
HEALTH

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

FAMILY PRACTICE

NAJAND, SADAF

Provider ID: 270055

Board Certified Specialty: No

SADAF NAJAND

15611 POMERADO RD STE
400
POWAY, CA 92064

Phone: (858) 675-3200

Fax: (858) 613-2938

After Hours Phone: (858)
675-3200

Provider Gender: Female

NPI: 1669769717

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

FAMILY PRACTICE

WHITE, KERI

Provider ID: 269491

Board Certified Specialty: No
KERI L WHITE

15611 POMERADO RD STE
400
POWAY, CA 92064

Phone: (858) 675-3200

Fax: (858) 613-2938

After Hours Phone: (858)
675-3200

Provider Gender: Female

NPI: 1295701159

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

INTERNAL MEDICINE

CHEN, ANDREW

Provider ID: 269315

Board Certified Specialty: No
ANDREW K CHEN

15611 POMERADO RD STE
400
POWAY, CA 92064

Phone: (858) 675-3100

Fax: (858) 613-2937

After Hours Phone: (858)
675-3100

Provider Gender: Male

D3. Directorio de proveedores especialistas

NPI: 1134357007

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, PALOMAR
HEALTH, PALOMAR MEDICAL
CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

INTERNAL MEDICINE

THAPER, MOHINDERPAL

Provider ID: 270016

Board Certified Specialty: No
MOHINDERPAL S THAPER

15611 POMERADO RD STE
575
POWAY, CA 92064

Phone: (760) 489-1458

Fax: (760) 489-1246

After Hours Phone: (760)
489-1458

Provider Gender: Male

NPI: 1295795037

Provider English Spoken: Y

Provider Language(s)
Spoken: Hindi, Punjabi

Cultural Competency: N

Hospital Affiliation: PALOMAR
HEALTH, PALOMAR MEDICAL
CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INTERVENTIONAL

CARDIOLOGY

BAYAT, HAMED

Provider ID: 269450

Board Certified Specialty: No
HAMED BAYAT

15611 POMERADO RD STE
400
POWAY, CA 92064

Phone: (858) 675-3110

Fax: (858) 675-3110

After Hours Phone: (858)
675-3110

Provider Gender: Male

NPI: 1356344196

Provider English Spoken: Y

Provider Language(s)
Spoken: Farsi

Cultural Competency: N

Hospital Affiliation: PALOMAR
HEALTH, PALOMAR MEDICAL
CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

NEONATAL / PERINATAL MEDICINE

SAUER, CHARLES

Provider ID: 206164

Board Certified Specialty: No
CHARLES W SAUER

15615 POMERADO RD
POWAY, CA 92064

Phone: (858) 613-4143

Fax: (858) 613-4539

After Hours Phone: (858)
613-4143

Provider Gender: Male

NPI: 1538388988

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
PALOMAR MEDICAL CENTER,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, PALOMAR
HEALTH, SCRIPPS MEMORIAL
HOSPITAL, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

NEONATAL / PERINATAL MEDICINE

WEST, JULIE

D3. Directorio de proveedores especialistas

Provider ID: 297072

Board Certified Specialty: No
JULIE E WEST

15615 POMERADO RD
POWAY, CA 92064

Phone: (858) 613-4143
Fax: (858) 613-4539

After Hours Phone: (858)
613-4143

Provider Gender: Female

NPI: 1811151848

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OBSTETRICS / GYNECOLOGY

COBB, DAMON

Provider ID: 206030

Board Certified Specialty: No
DAMON C COBB

15706 POMERADO RD STE
110

POWAY, CA 92064

Phone: (858) 485-0130
Fax: (858) 485-9424

After Hours Phone: (858)
485-0130

Provider Gender: Male

NPI: 1851435598

Provider English Spoken: Y
Provider Language(s)

Spoken: Spanish
Cultural Competency: N

Hospital Affiliation: PALOMAR
HEALTH, SCRIPPS MEMORIAL
HOSPITAL, GROSSMONT
HOSPITAL, SHARP MEMORIAL
HOSPITAL, PALOMAR

MEDICAL CENTER, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
9:00AM-4:30PM
F 9:00AM-1:00PM

Website: N/A

OPHTHALMOLOGY

LOZIER, JEFFREY

Provider ID: 270187

Board Certified Specialty: Yes

JEFFREY R LOZIER

15611 POMERADO RD STE
400

POWAY, CA 92064

Phone: (858) 675-3100
Fax: (858) 618-1523

After Hours Phone: (858)
675-3100

Provider Gender: Male

NPI: 1225004450

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PALOMAR
HEALTH

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

OPTOMETRIST

KIM, MICHELLE

Provider ID: 270014

Board Certified Specialty: No
MICHELLE KIM

15611 POMERADO RD STE
400

POWAY, CA 92064

Phone: (858) 675-3140
Fax: (858) 613-2936

After Hours Phone: (858)
675-3140

Provider Gender: Female

NPI: 1457328825

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

CHATFIELD, ALEXANDRA

Provider ID: 276715

Board Certified Specialty: No
ALEXANDRA J CHATFIELD

15611 POMERADO RD STE

D3. Directorio de proveedores especialistas

525
POWAY, CA 92064
☎ Phone: (858) 485-0050
Fax: (858) 673-5187
🕒 After Hours Phone: (858) 485-0050
Provider Gender: Female
NPI: 1215584628
🗣 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

PODIATRIST

BRAZIER, SETH

Provider ID: 306398
Board Certified Specialty: No
SETH J BRAZIER
📍 15706 POMERADO RD STE
102
POWAY, CA 92064
☎ Phone: (858) 485-1494
Fax: (858) 485-1515
🕒 After Hours Phone: (858) 485-1494
Provider Gender: Male
NPI: 1033554324
🗣 Provider English Spoken: Y
🗣 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: KAWEAH
DELTA DISTRICT HOSP, SELMA
COMMUNITY HOSPITAL,
ADVENTIST MEDICAL CENTER,

ADVENTIST MED CTR
REEDLEY
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
9:00AM-5:00PM
🌐 Website: N/A

PODIATRIST

HAN, KYOUNG

Provider ID: 296326
Board Certified Specialty: No
KYOUNG M HAN
📍 15706 POMERADO RD STE
102
POWAY, CA 92064
☎ Phone: (858) 485-1494
Fax: (858) 485-1515
🕒 After Hours Phone: (858) 485-1494
Provider Gender: Female
NPI: 1083954671
🗣 Provider English Spoken: Y
🗣 Provider Language(s)
Spoken: Japanese, Korean
Cultural Competency: N
Hospital Affiliation:
SADDLEBACK MEMORIAL
MED CTR, PALOMAR HEALTH,
PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
9:00AM-5:00PM

🌐 Website: N/A

PODIATRIST

READ, TRENTON

Provider ID: 296656
Board Certified Specialty: No
TRENTON READ
📍 15706 POMERADO RD STE
102
POWAY, CA 92064
☎ Phone: (858) 485-1494
Fax: (858) 485-1515
🕒 After Hours Phone: (858) 485-1494
Provider Gender: Male
NPI: 1952963431
🗣 Provider English Spoken: Y
🗣 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
9:00AM-5:00PM
🌐 Website: N/A


PSYCHOLOGIST


VALLEZ-BARLAM, ANDREA

Provider ID: 290629
Board Certified Specialty: No
ANDREA VALLEZ-BARLAM
📍 13010 POWAY RD
POWAY, CA 92064
☎ Phone: (858) 218-3000
Fax: (858) 633-4688
🕒 After Hours Phone: (858) 218-3000
Provider Gender: Female

D3. Directorio de proveedores especialistas

NPI: 1710902143

 Provider English Spoken: Y

 Provider Language(s)
Spoken: German, Spanish


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM


 Website: N/A


RHEUMATOLOGY

RAO, SOUMYA

Provider ID: 46060

Board Certified Specialty: No
SOUMYA G RAO

 15611 POMERADO RD STE
400
POWAY, CA 92064


 Phone: (858) 675-3150


Fax: (858) 924-1775

 After Hours Phone: (858)
675-3150

Provider Gender: Female

NPI: 1033388616

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hindi, Kannada,
Russian, Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP
CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes


Min/Max Age: 18\150


American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

RHEUMATOLOGY


REDDY, SMITHA

Provider ID: 269402

Board Certified Specialty: No
SMITHA C REDDY

 15725 POMERADO RD STE
117

POWAY, CA 92064


 Phone: (858) 312-1717


Fax: (858) 435-0207

 After Hours Phone: (858)
312-1717

Provider Gender: Female

NPI: 1750534715

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hindi, Kannada,
Telugu

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, PALOMAR
HEALTH, SCRIPPS MERCY
HOSPITAL CHULA VISTA,
SCRIPPS GREEN HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH
8:00AM-4:00PM

 Website: N/A


SURGERY GENERAL

GROVE, JAY

Provider ID: 305851

Board Certified Specialty: No
JAY R GROVE

 15611 POMERADO RD
POWAY, CA 92064

 Phone: (858) 675-3100

Fax: (858) 673-5187

 After Hours Phone: (858)
675-3100

Provider Gender: Male

NPI: 1912971334

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: PALOMAR
HEALTH, PALOMAR MEDICAL
CENTER, TRI CITY MEDICAL
CTR, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS MERCY
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

SURGERY ORTHOPEDIC


BALIKIAN, PHILIP

Provider ID: 257485

Board Certified Specialty: Yes
PHILIP BALIKIAN

 15611 POMERADO RD STE
400

POWAY, CA 92064

 Phone: (858) 613-8900

D3. Directorio de proveedores especialistas

Fax: (858) 618-1523

☎ After Hours Phone: (858) 613-8900

Provider Gender: Male

NPI: 1407803687

☑ Provider English Spoken: Y

☑ Provider Language(s)

Spoken: Armenian, Italian, Spanish, Vietnamese

Cultural Competency: N

Hospital Affiliation: PALOMAR

HEALTH

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8:30AM-5:00PM

🌐 Website: N/A

SURGERY ORTHOPEDIC

BALIKIAN, PHILIP

Provider ID: 119552

Board Certified Specialty: Yes

PHILIP BALIKIAN

📍 15611 POMERADO RD STE 400

POWAY, CA 92064

☎ Phone: (858) 613-8900

Fax: (858) 618-1523

☎ After Hours Phone: (858) 613-8900

Provider Gender: Male

NPI: 1407803687

☑ Provider English Spoken: Y

☑ Provider Language(s)

Spoken: Armenian, Italian, Spanish, Vietnamese

Cultural Competency: N

Hospital Affiliation: PALOMAR

HEALTH

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8:30AM-5:00PM

🌐 Website: N/A

SURGERY ORTHOPEDIC

BRIED, JAMES

Provider ID: 269500

Board Certified Specialty: No

JAMES M BRIED

📍 15611 POMERADO RD STE 525

POWAY, CA 92064

☎ Phone: (858) 485-0050

Fax: (858) 485-5071

☎ After Hours Phone: (858) 485-0050

Provider Gender: Male

NPI: 1891809257

☑ Provider English Spoken: Y

☑ Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR

HEALTH

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

SALAS, JESSICA

Provider ID: 269344

Board Certified Specialty: No

JESSICA M SALAS

📍 211 13TH ST

RAMONA, CA 92065

☎ Phone: (760) 789-5160

Fax: (760) 788-7962

☎ After Hours Phone: (760) 789-5160

Provider Gender: Female

NPI: 1356817431

☑ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

CHIROPRACTOR

JIMENEZ, CLARIBEL

Provider ID: 307942

Board Certified Specialty: No

CLARIBEL JIMENEZ

📍 220 ROTANZI ST

RAMONA, CA 92065

☎ Phone: (760) 736-6767

Fax: (760) 736-8740

☎ After Hours Phone: (760) 736-6767

Provider Gender: Female

NPI: 1801255484

☑ Provider English Spoken: Y

☑ Provider Language(s)

Spoken: Spanish


Cultural Competency: N

RAMONA


D3. Directorio de proveedores especialistas

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):  8110 BIRMINGHAM WAY FL
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

FAMILY PRACTICE


WELLS, TODD

Provider ID: 299118

Board Certified Specialty: No

TODD D WELLS

 211 13TH ST
RAMONA, CA 92065


 Phone: (760) 789-5160

Fax: (760) 722-5292

 After Hours Phone: (760)
789-5160

Provider Gender: Male

NPI: 1952377806

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish, Tagalog


Cultural Competency: N


Hospital Affiliation: PALOMAR
HEALTH

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):  8899 UNIVERSITY CENTER
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

SAN DIEGO

ADOLESCENT MEDICINE

CHELVAKUMAR, GAYATHRI


Provider ID: 296674

Board Certified Specialty: No

GAYATHRI CHELVAKUMAR

 8110 BIRMINGHAM WAY FL
2

SAN DIEGO, CA 92123


 Phone: (858) 966-8493

Fax: (858) 966-8818

 After Hours Phone: (858)
966-8493

Provider Gender: Female

NPI: 1447473848

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN


DIEGO, UCSD MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

ALLERGY IMMUNOLOGY

JAMES, CHRISTINE


Provider ID: 284917

Board Certified Specialty: No

CHRISTINE JAMES

 8899 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1144589979

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

ALLERGY IMMUNOLOGY

RIEDL, MARC


Provider ID: 255768


Board Certified Specialty: Yes

MARC A RIEDL

 8899 UNIVERSITY CENTER
LN STE 230

SAN DIEGO, CA 92122

 Phone: (858) 657-5350

 After Hours Phone: (858)
657-5350

Provider Gender: Male

NPI: 1285654889

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

D3. Directorio de proveedores especialistas

ANESTHESIOLOGY

ALEXANDER, BRENTON

Provider ID: 242303

Board Certified Specialty: No

BRENTON S ALEXANDER

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1811366644

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

ANESTHESIOLOGY

BECERRA SONGOLO, TOSHA

Provider ID: 300068

Board Certified Specialty: No

TOSHA D BECERRA SONGOLO

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1265938724

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

ANESTHESIOLOGY

BRUNO, KELLY

Provider ID: 238903

Board Certified Specialty: No

KELLY A BRUNO

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1891130993

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

ANESTHESIOLOGY

CANO, SARAH

Provider ID: 200959

Board Certified Specialty: No

SARAH J CANO

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1750517306

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,
SCRIPPS MEMORIAL
HOSPITAL, SCRIPPS MERCY
HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA,
SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,
SCRIPPS GREEN HOSPITAL,
SCRIPPS GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

ANESTHESIOLOGY

CHAN, CHI-BEW

Provider ID: 310044

Board Certified Specialty: No
CHI-BEW CHAN

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

D3. Directorio de proveedores especialistas

926-8273
Provider Gender: Male
NPI: 1205966264
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, TRI CITY MEDICAL CTR, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, DAMERON HOSPITAL ASSOC, DAMERON HOSPITAL ASSOC, SHARP CHULA VISTA MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

ANESTHESIOLOGY

CHAN, CHI-BEW

Provider ID: 310043
Board Certified Specialty: No
CHI-BEW CHAN
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male

NPI: 1205966264
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, TRI CITY MEDICAL CTR, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, DAMERON HOSPITAL ASSOC, DAMERON HOSPITAL ASSOC, SHARP CHULA VISTA MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

ANESTHESIOLOGY

CURRAN, BRIAN

Provider ID: 239002
Board Certified Specialty: No
BRIAN P CURRAN
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1710373642
Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

ANESTHESIOLOGY

FEJLEH, ASHLEY

Provider ID: 269502
Board Certified Specialty: No
ASHLEY N FEJLEH
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1609353465

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

ANESTHESIOLOGY

FUNDINGSLAND, BRENT

Provider ID: 280468

D3. Directorio de proveedores especialistas

Board Certified Specialty: No
BRENT W FUNDINGSLAND

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1831166560

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, SADDLEBACK
MEMORIAL MED CTR, UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

ANESTHESIOLOGY

HYLTON, DIANA

Provider ID: 241735

Board Certified Specialty: Yes

DIANA J HYLTON

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1932527751

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL

CTR, SOUTHWEST
HEALTHCARE INLAND VALLEY
HOSPITAL, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

ANESTHESIOLOGY

MEYER, MEGAN

Provider ID: 239607

Board Certified Specialty: No

MEGAN S MEYER

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1720473044

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

ANESTHESIOLOGY

MILLAR, MELISSA

Provider ID: 201308

Board Certified Specialty: No
MELISSA B MILLAR

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (619) 543-5754

After Hours Phone: (619)
543-5754

Provider Gender: Female

NPI: 1417361981

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON,
SCRIPPS MEMORIAL

HOSPITAL, SCRIPPS MERCY
HOSPITAL, SCRIPPS MERCY

HOSPITAL CHULA VISTA,
SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,
SCRIPPS GREEN HOSPITAL,

SCRIPPS GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

ANESTHESIOLOGY

NGUYEN, QUOC SY

D3. Directorio de proveedores especialistas

Provider ID: 242188

Board Certified Specialty: No
QUOC-SY NGUYEN

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1871911644

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

ANESTHESIOLOGY

OSWALD, JESSICA

Provider ID: 239600

Board Certified Specialty: No
JESSICA C OSWALD

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1427315118

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

ANESTHESIOLOGY

SHAW, SUSANNA

Provider ID: 255316

Board Certified Specialty: No
SUSANNA J SHAW

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1063685477

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

ANESTHESIOLOGY

SORIA, CLAIRE

Provider ID: 243294

Board Certified Specialty: No
CLAIRE S SORIA

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1447516414

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

ANESTHESIOLOGY

SREJIC, UNA

Provider ID: 206383

Board Certified Specialty: Yes
UNA SREJIC

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273




After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1588723860

D3. Directorio de proveedores especialistas




 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: Stanford
Health Care, UCSF Medical
Center At Mission Bay, UCSF
MEDICAL CENTER AT MOUNT
ZION, UCSF MEDICAL CENTER,
UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*



ANESTHESIOLOGY

SUYDAM, STEVEN

Provider ID: 286569
Board Certified Specialty: No
STEPHEN M SUYDAM




 200 W ARBOR DR
SAN DIEGO, CA 92103
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800)*
926-8273

Provider Gender: Male
NPI: 1386856821

 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
GROSSMONT HOSPITAL,
SHARP MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
TRI CITY MEDICAL CTR, SHARP

MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,
SHARP CHULA VISTA MED
CTR, SHARP CHULA VISTA
MED CTR, SHARP CORONADO
HOSP AND HEALTHCARE CTR,
RADY CHILDRENS HOSPITAL
SAN DIEGO, SCRIPPS GREEN
HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*


ANESTHESIOLOGY




TRIVEDI, SURAJ

Provider ID: 246749
Board Certified Specialty: No
SURAJ S TRIVEDI

 200 W ARBOR DR
SAN DIEGO, CA 92103
 *Phone: (800) 926-8273*
 *After Hours Phone: (800)*
926-8273

Provider Gender: Male
NPI: 1699057885




 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N


 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

ANESTHESIOLOGY




TSUDA, PAIGE

Provider ID: 271682
Board Certified Specialty: No
PAIGE S TSUDA

 200 W ARBOR DR
SAN DIEGO, CA 92103
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800)*
926-8273
Provider Gender: Female
NPI: 1003261595

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*


ANESTHESIOLOGY

TULLY, JEFFREY

Provider ID: 283689
Board Certified Specialty: No
JEFFREY L TULLY

 200 W ARBOR DR
SAN DIEGO, CA 92103

D3. Directorio de proveedores especialistas

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1871912493

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UC DAVIS
MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON,
UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


ANESTHESIOLOGY

TZENG, ERIC

Provider ID: 284577

Board Certified Specialty: No
ERIC TZENG

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1801258264

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


ANESTHESIOLOGY

YODER, ANDREA


Provider ID: 272804

Board Certified Specialty: No
ANDREA R YODER

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1629463104

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

ANESTHESIOLOGY


YOUNAN, LAWRENCE


Provider ID: 240870

Board Certified Specialty: No

LAWRENCE J YOUNAN

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1922432475

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

ANESTHESIOLOGY PAIN


MANAGEMENT


CASTELLANOS, JOEL

Provider ID: 243553

Board Certified Specialty: No
JOEL P CASTELLANOS

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1700296514

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes


D3. Directorio de proveedores especialistas


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

ANESTHESIOLOGY PAIN


MANAGEMENT

DAIRO, BRANDON


Provider ID: 299880

Board Certified Specialty: No
BRANDON DAIRO

 3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110

 Phone: (619) 325-1161

Fax: (619) 325-1717

 After Hours Phone: (619)
325-1161

Provider Gender: Male

NPI: 1689092470

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, SCRIPPS

MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA


VISTA


Medi-Cal Open Panel: Yes

Min/Max Age: 18\100

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

ANESTHESIOLOGY PAIN


MANAGEMENT

DAIRO, BRANDON

Provider ID: 300089

Board Certified Specialty: No
BRANDON DAIRO

 3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110

 Phone: (619) 325-1161

Fax: (619) 325-1717

 After Hours Phone: (619)
325-1161

Provider Gender: Male

NPI: 1689092470

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, SCRIPPS

MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA

VISTA


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CARDIOVASCULAR DISEASE

ALANI, ANAS


Provider ID: 201252

Board Certified Specialty: Yes
ANAS A ALANI

 4168 FRONT ST
SAN DIEGO, CA 92103


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1154633709

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, ARROWHEAD REGIONAL

MEDICAL CENTER, LOMA

LINDA UNIVERSITY MED CTR,

RIVERSIDE COUNTY

REGIONAL MED CTR, LAC

RANCHO LOS AMIGOS

NATIONAL REHAB CENTER,

LOS ANGELES COUNTY

HARBOR UCLA MEDICAL

CENTER, LOS ANGELES

COUNTY HARBOR UCLA

MEDICAL CENTER


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CARDIOVASCULAR DISEASE

CASTELLANOS, LUIS

Provider ID: 211764

Board Certified Specialty: No
LUIS R CASTELLANOS

 330 LEWIS ST FL 3
SAN DIEGO, CA 92103



 Phone: (858) 657-8530

Fax: (619) 543-2287

 After Hours Phone: (858)




D3. Directorio de proveedores especialistas

657-8530
Provider Gender: Male
NPI: 1013059286

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, PIONEERS MEMORIAL
HOSPITAL, EL CENTRO
REGIONAL MEDICAL CENTER



Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

CARDIOVASCULAR DISEASE

CASTELLANOS, LUIS



Provider ID: 211765
Board Certified Specialty: No
LUIS R CASTELLANOS

 16950 VIA TAZON
SAN DIEGO, CA 92127
 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1013059286


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR, PIONEERS MEMORIAL
HOSPITAL, EL CENTRO
REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

CARDIOVASCULAR DISEASE

LERNER, JONATHAN

Provider ID: 309267
Board Certified Specialty: No
JONATHAN H LERNER



 412 WASHINGTON ST
SAN DIEGO, CA 92103

 Phone: (619) 616-2100
Fax: (619) 616-2104

 After Hours Phone: (619)
616-2100

Provider Gender: Male

NPI: 1962899823


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

CARDIOVASCULAR DISEASE

LERNER, JONATHAN

Provider ID: 303447
Board Certified Specialty: No
JONATHAN H LERNER



 292 EUCLID AVE STE 210
SAN DIEGO, CA 92114

 Phone: (619) 616-2100
Fax: (619) 616-2104

 After Hours Phone: (619)
616-2100

Provider Gender: Male

NPI: 1962899823

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM



 Website: N/A

CARDIOVASCULAR DISEASE

MIZZELL, ANNA

Provider ID: 214020
Board Certified Specialty: No
ANNA M MIZZELL

 16950 VIA TAZON
SAN DIEGO, CA 92127





 Phone: (800) 926-8273
 After Hours Phone: (800)

926-8273








Provider Gender: Female

NPI: 1851561021




D3. Directorio de proveedores especialistas


 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*



CARDIOVASCULAR DISEASE **PHREANER, NICHOLAS**

Provider ID: 239946
Board Certified Specialty: No
NICHOLAS J PHREANER
 16950 VIA TAZON
SAN DIEGO, CA 92127
 *Phone: (800) 926-8273*
 *After Hours Phone: (800)*
926-8273
Provider Gender: Male
NPI: 1023373040
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

CARDIOVASCULAR DISEASE **PROHASKA, THOMAS**

Provider ID: 299912
Board Certified Specialty: No
THOMAS A PROHASKA
 200 W ARBOR DR
SAN DIEGO, CA 92103
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800)*
926-8273
Provider Gender: Male
NPI: 1861889644




 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Website: N/A*






CARDIOVASCULAR DISEASE **SHEREV, DIMITRI**

Provider ID: 301306
Board Certified Specialty: No
DIMITRI A SHEREV
 6402 EL CAJON BLVD STE
100
SAN DIEGO, CA 92115
 *Phone: (619) 582-4490*
Fax: (519) 582-4737
 *After Hours Phone: (619)*
582-4490
Provider Gender: Male
NPI: 1154323996
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Bulgarian, Russian,
Spanish
Cultural Competency: N




Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,
GROSSMONT HOSPITAL,
SHARP MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL, ALVARADO
HOSPITAL LLC, SHARP CHULA
VISTA MED CTR, TRI CITY
MEDICAL CTR, TRI CITY
MEDICAL CTR, SCRIPPS
MERCY HOSPITAL CHULA
VISTA, Sharp Grossmont
Hospital, SHARP CORONADO
HOSP AND HEALTHCARE CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999

American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

CARDIOVASCULAR DISEASE **YEANG, CALVIN**

Provider ID: 238822
Board Certified Specialty: No
CALVIN YEANG
 16950 VIA TAZON
SAN DIEGO, CA 92127
 *Phone: (858) 657-8530*
 *After Hours Phone: (858)*
657-8530
Provider Gender: Male
NPI: 1598011058
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Mandarin
Cultural Competency: N
Hospital Affiliation: UCSD LA

D3. Directorio de proveedores especialistas



JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

CERTIFIED ACUPUNCTURIST



ARELLANO, JACQUELINE

Provider ID: 304138
Board Certified Specialty: No
JACQUELINE ARELLANO
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1104129485

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Website: N/A



CERTIFIED ACUPUNCTURIST

ARELLANO, JACQUELINE




Provider ID: 277966

Board Certified Specialty: No
JACQUELINE ARELLANO
 330 LEWIS ST
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1104129485

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N



 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

CERTIFIED ACUPUNCTURIST



ARELLANO, JACQUELINE

Provider ID: 304137
Board Certified Specialty: No
JACQUELINE ARELLANO
 4910 DIRECTORS PL
SAN DIEGO, CA 92121
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1104129485

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Medi-Cal Open Panel: Yes



Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

CERTIFIED ACUPUNCTURIST




ARELLANO, JACQUELINE

Provider ID: 277967
Board Certified Specialty: No
JACQUELINE ARELLANO
 9333 GENESEE AVE STE
200
SAN DIEGO, CA 92121
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1104129485

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

CERTIFIED ACUPUNCTURIST

ARELLANO, JACQUELINE

Provider ID: 277968
Board Certified Specialty: No
JACQUELINE ARELLANO
 9909 MIRA MESA BLVD
STE 200

D3. Directorio de proveedores especialistas

SAN DIEGO, CA 92131
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1104129485
☐ Provider English Spoken: Y
☐ Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

CERTIFIED ACUPUNCTURIST **CRAFT, KEVIN**

Provider ID: 290942
Board Certified Specialty: No
KEVIN E CRAFT
📍 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
☎ Phone: (858) 279-0925
Fax: (858) 633-4680
📞 After Hours Phone: (858) 279-0925
Provider Gender: Male
NPI: 1659745610
☐ Provider English Spoken: Y
☐ Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:30AM-5:30PM SA 9:00AM-4:00PM
🌐 Website: N/A

CERTIFIED ACUPUNCTURIST **JULIAN, FIDES**

Provider ID: 304132
Board Certified Specialty: No
FIDES Q JULIAN
📍 200 W ARBOR DR
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1407401128
☐ Provider English Spoken: Y
☐ Provider Language(s) Spoken: Tagalog
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🌐 Website: N/A

CERTIFIED ACUPUNCTURIST **JULIAN, FIDES**

Provider ID: 277699
Board Certified Specialty: No
FIDES Q JULIAN
📍 330 LEWIS ST
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1407401128
☐ Provider English Spoken: Y
☐ Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

CERTIFIED ACUPUNCTURIST **JULIAN, FIDES**

Provider ID: 277700
Board Certified Specialty: No
FIDES Q JULIAN
📍 9333 GENESEE AVE STE 200
SAN DIEGO, CA 92121
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1407401128
☐ Provider English Spoken: Y
☐ Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Hospital Affiliation: UCSD

D3. Directorio de proveedores especialistas

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): Board Certified Specialty: No
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


CERTIFIED ACUPUNCTURIST

JULIAN, FIDES

Provider ID: 277701

Board Certified Specialty: No
FIDES Q JULIAN

 9909 MIRA MESA BLVD
STE 200
SAN DIEGO, CA 92131

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1407401128

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED ACUPUNCTURIST

JULIAN, FIDES

Provider ID: 304131

FIDES Q JULIAN

 4910 DIRECTORS PL
SAN DIEGO, CA 92121


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1407401128

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


CERTIFIED ACUPUNCTURIST

LAM, KHANH


Provider ID: 295380

Board Certified Specialty: No
KHANH M LAM

 3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110

 Phone: (619) 325-1161

Fax: (619) 325-1717

 After Hours Phone: (619)
325-1161

Provider Gender: Male

NPI: 1649594979

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese, French,
Vietnamese


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


CERTIFIED ACUPUNCTURIST

SEITZ, GRETCHEN

Provider ID: 246474

Board Certified Specialty: No
GRETCHEN E SEITZ

 9995 CARMEL MOUNTAIN
RD STE B10-B11
SAN DIEGO, CA 92129

 Phone: (844) 200-2426


Fax: (858) 240-6470

 After Hours Phone: (844)
200-2426

Provider Gender: Female

NPI: 1396876959

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999


American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TU
8:30AM-5:30PM

D3. Directorio de proveedores especialistas

W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM

 Website: N/A


CERTIFIED NURSE PRACTITIONER

AGUILA, YESENIA


Provider ID: 304624

Board Certified Specialty: No
YESENIA C AGUILA

 292 EUCLID AVE STE 115
SAN DIEGO, CA 92114


 Phone: (619) 266-3332


Fax: (619) 266-6000

 After Hours Phone: (619)
266-3332

Provider Gender: Female

NPI: 1245966092

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE PRACTITIONER

ALSTEEN, STEPHANIE

Provider ID: 291389

Board Certified Specialty: No
STEPHANIE D ALSTEEN

 200 W ARBOR DR
SAN DIEGO, CA 92103


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1013680982

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED NURSE PRACTITIONER

AMOS, MARIA

Provider ID: 291439

Board Certified Specialty: No
MARIA AMOS

 200 W ARBOR DR
SAN DIEGO, CA 92103


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1235891953

 Provider English Spoken: Y


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED NURSE PRACTITIONER


ARVIZU, MARGARITA

Provider ID: 307976

Board Certified Specialty: No
MARGARITA ARVIZU

 10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

 Phone: (844) 200-2426

Fax: (619) 474-4008

 After Hours Phone: (844)
200-2426

Provider Gender: Female

NPI: 1558058636


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-6:00PM

 Website: N/A


CERTIFIED NURSE PRACTITIONER


BAKER, TANYA

Provider ID: 255625

Board Certified Specialty: No
TANYA E BAKER

 4510 EXECUTIVE DR
SAN DIEGO, CA 92121

 Phone: (858) 534-8019

 After Hours Phone: (858)
534-8019

Provider Gender: Female

NPI: 1699184259

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

D3. Directorio de proveedores especialistas


CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE PRACTITIONER

BENARD, ROBERT

Provider ID: 268229

Board Certified Specialty: No
ROBERT A BENARD

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1184027724

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, Highland Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

BILOTTA, NATALIE

Provider ID: 291418

Board Certified Specialty: No
NATALIE J BILOTTA

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1144809393

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RIVERSIDE
COMMUNITY HOSP

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A



CERTIFIED NURSE PRACTITIONER

BROWN, VICTORIA

Provider ID: 307669

Board Certified Specialty: No
VICTORIA R BROWN

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1750033890

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A



CERTIFIED NURSE PRACTITIONER

BROWN, VICTORIA

Provider ID: 307668

Board Certified Specialty: No
VICTORIA R BROWN

 350 DICKINSON ST
SAN DIEGO, CA 92103

 Phone: (800) 922-6827
 After Hours Phone: (800)
922-6827

Provider Gender: Female

NPI: 1750033890

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A



CERTIFIED NURSE PRACTITIONER

BUENROSTRO, CHRISTINA

Provider ID: 243718

Board Certified Specialty: No
CHRISTINA BUENROSTRO


 4168 FRONT ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

Provider Gender: Female

D3. Directorio de proveedores especialistas

NPI: 1851749253

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE PRACTITIONER


BUI, ANH

Provider ID: 304273

Board Certified Specialty: No

ANH T BUI

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111


 Phone: (858) 279-0925

Fax: (858) 633-4680

 After Hours Phone: (858)
279-0925

Provider Gender: Male

NPI: 1184309684

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Vietnamese


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 14\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE PRACTITIONER


BUI, ANH

Provider ID: 304272

Board Certified Specialty: No

ANH T BUI

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111


 Phone: (858) 810-8700

Fax: (858) 633-4680

 After Hours Phone: (858)
810-8700

Provider Gender: Male

NPI: 1184309684

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 14\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE PRACTITIONER

**CAMARGO-LOWTHERS,
ANGELICA**


Provider ID: 307993

Board Certified Specialty: No

ANGELICA M

CAMARGO-LOWTHERS

 8010 FROST ST STE 100
SAN DIEGO, CA 92123


 Phone: (858) 640-5000


Fax: (858) 636-2903

 After Hours Phone: (858)
640-5000

Provider Gender: Female

NPI: 1912982539

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED NURSE PRACTITIONER

**CAMARGO-LOWTHERS,
ANGELICA**


Provider ID: 54944

Board Certified Specialty: No

ANGELICA M

CAMARGO-LOWTHERS

 8010 FROST ST STE 510
SAN DIEGO, CA 92123

 Phone: (858) 637-4700


Fax: (858) 637-4701

 After Hours Phone: (858)
637-4700

Provider Gender: Female

NPI: 1912982539

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish




Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\150

American Sign Language (ASL):
N

D3. Directorio de proveedores especialistas

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F
9:00AM-5:00PM*
 *Website: N/A*

CERTIFIED NURSE


PRACTITIONER

CAMARGO-LOWTHERS, ANGELICA

Provider ID: 295914
Board Certified Specialty: No
ANGELICA M

CAMARGO-LOWTHERS


 8010 FROST ST STE 220
SAN DIEGO, CA 92123

 *Phone: (858) 650-5000*
Fax: (858) 636-2903

 *After Hours Phone: (858)
650-5000*

Provider Gender: Female

NPI: 1912982539

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*



CERTIFIED NURSE

PRACTITIONER

CAPOZZI, JENNIFER


Provider ID: 241031
Board Certified Specialty: No
JENNIFER E CAPOZZI


 200 W ARBOR DR
SAN DIEGO, CA 92103

 *Phone: (800) 926-8273*
 *After Hours Phone: (800)
926-8273*

Provider Gender: Female

NPI: 1336258276

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Tagalog*

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


CERTIFIED NURSE

PRACTITIONER

CHANTALA, ELIZABETH

Provider ID: 291305
Board Certified Specialty: No
ELIZABETH A CHANTALA


 200 W ARBOR DR
SAN DIEGO, CA 92103

 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Female

NPI: 1942430442



 *Provider English Spoken: Y*

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*



CERTIFIED NURSE

PRACTITIONER

CHAVEZ, ALEXANDRIA

Provider ID: 243357
Board Certified Specialty: No
ALEXANDRIA D CHAVEZ

 4510 EXECUTIVE DR STE 7
SAN DIEGO, CA 92121

 *Phone: (800) 926-8273*
 *After Hours Phone: (800)
926-8273*

Provider Gender: Female

NPI: 1811543622


 *Provider English Spoken: Y*


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


CERTIFIED NURSE

PRACTITIONER

CHEATHAM, BRITTANY

Provider ID: 291461
Board Certified Specialty: No
BRITTANY L CHEATHAM

 200 W ARBOR DR
SAN DIEGO, CA 92103

 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Female

D3. Directorio de proveedores especialistas

NPI: 1184111684

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

CHOATE, BERNADETTE

Provider ID: 286369

Board Certified Specialty: No
BERNADETTE R CHOATE

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1104173558

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE


PRACTITIONER

CHOATE, BERNADETTE

Provider ID: 286368

Board Certified Specialty: No
BERNADETTE R CHOATE

 4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1104173558

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


COLEMAN, PAGE

Provider ID: 304288

Board Certified Specialty: No
PAGE COLEMAN

 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

 Phone: (619) 280-2058

Fax: (858) 633-4682

 After Hours Phone: (619)
280-2058

Provider Gender: Female

NPI: 1871365312


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-2:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

CONNER, PAMELA

Provider ID: 299930

Board Certified Specialty: No
PAMELA M CONNER

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1770558967

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT

D3. Directorio de proveedores especialistas

 PROVIDER
 Website: N/A


CERTIFIED NURSE

PRACTITIONER

CONNOR, CAROLINE

Provider ID: 279835
Board Certified Specialty: No
CAROLINE L CONNOR

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1609081710

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE

PRACTITIONER

CONNOR, CAROLINE

Provider ID: 279836
Board Certified Specialty: No
CAROLINE L CONNOR

 6030 VILLAGE WAY
SAN DIEGO, CA 92130

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1609081710

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A



CERTIFIED NURSE

PRACTITIONER

COSINO, ANJELICA

Provider ID: 201309
Board Certified Specialty: No
ANJELICA T COSINO

 200 W ARBOR DR FL 1
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
 After Hours Phone: (800)

926-8273

Provider Gender: Female
NPI: 1295238749


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE


PRACTITIONER

DAVIES, SUMMER

Provider ID: 253692
Board Certified Specialty: No
SUMMER R DAVIES

 8899 UNIVERSITY CENTER
LN STE 220
SAN DIEGO, CA 92122

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1679850671

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

D3. Directorio de proveedores especialistas

PRACTITIONER

DAVIS, JANET

Provider ID: 255796

Board Certified Specialty: No

JANET M DAVIS

330 LEWIS ST
SAN DIEGO, CA 92103

Phone: (619) 471-9250

Fax: (619) 471-9275

After Hours Phone: (619)
471-9250

Provider Gender: Female

NPI: 1164616280

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

DE DIOS, SARAH JANE

Provider ID: 300051

Board Certified Specialty: No

SARAH JANE J DE DIOS

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1528632742

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED NURSE

PRACTITIONER

DEL VECCHIO, MEGAN

Provider ID: 301725

Board Certified Specialty: No
MEGAN J DEL VECCHIO

4510 EXECUTIVE DR
SAN DIEGO, CA 92121

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1437662863

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED NURSE

PRACTITIONER

DEL VECCHIO, MEGAN

Provider ID: 301726

Board Certified Specialty: No
MEGAN J DEL VECCHIO

4520 EXECUTIVE DR
SAN DIEGO, CA 92121

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1437662863

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED NURSE

PRACTITIONER

DEUTSCH, KAREN

Provider ID: 247980

Board Certified Specialty: No
KAREN G DEUTSCH

4168 FRONT ST FL 3
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1740517127

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

D3. Directorio de proveedores especialistas

 Hours: M-F
8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE


PRACTITIONER

DEUTSCH, KAREN


Provider ID: 247981
Board Certified Specialty: No
KAREN G DEUTSCH


 330 LEWIS ST
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273


Provider Gender: Female
NPI: 1740517127

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE

PRACTITIONER

DOAN, ANGELA


Provider ID: 291425
Board Certified Specialty: No
ANGELA Q DOAN

 4168 FRONT ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1639638968

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER



 Website: N/A


CERTIFIED NURSE


PRACTITIONER

DOAN, ANGELA

Provider ID: 291426
Board Certified Specialty: No
ANGELA Q DOAN


 4510 EXECUTIVE DR
SAN DIEGO, CA 92121
 Phone: (800) 926-8372
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8372
Provider Gender: Female
NPI: 1639638968

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Website: N/A


CERTIFIED NURSE

PRACTITIONER

DRISCOLL, KARRIE


Provider ID: 286345
Board Certified Specialty: No
KARRIE A DRISCOLL

 4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122

 Phone: (800) 926-8273
Fax: (888) 539-8781


 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1396085098

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


CERTIFIED NURSE

PRACTITIONER

DRISCOLL, SUSAN

Provider ID: 298968
Board Certified Specialty: No
SUSAN D DRISCOLL

 1666 PRECISION PARK LN
SAN DIEGO, CA 92173

 Phone: (619) 662-4100
Fax: (619) 758-3384

 After Hours Phone: (619)
662-4100


Provider Gender: Female
NPI: 1477755684


 Provider English Spoken: Y
 Provider Language(s)

D3. Directorio de proveedores especialistas

Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 12\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

 *Hours: SU 10:00AM-4:00PM*
M-F 8:30AM-5:30PM
SA 8:00AM-2:30PM



 *Website: N/A*

CERTIFIED NURSE

PRACTITIONER


DWYER, ERIN

Provider ID: 269863
Board Certified Specialty: No
ERIN DWYER

 4060 4TH AVE STE 310
SAN DIEGO, CA 92103
 *Phone: (619) 297-4707*
Fax: (858) 429-7927


 *After Hours Phone: (619)*
297-4707


Provider Gender: Female
NPI: 1003260894

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*
8:00AM-5:00PM


 *Website: N/A*


CERTIFIED NURSE

PRACTITIONER

ECLARINO, GALELEO

Provider ID: 296764
Board Certified Specialty: No

 9995 CARMEL MOUNTAIN
RD STE B1011
SAN DIEGO, CA 92129

 *Phone: (844) 200-2426*
Fax: (858) 240-6470

 *After Hours Phone: (844)*
200-2426


Provider Gender: Female
NPI: 1518687748

 *Provider English Spoken: Y*
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*
8:00AM-5:00PM

 *Website: N/A*


CERTIFIED NURSE

PRACTITIONER

EDNACOT, KARYNNE

Provider ID: 309725
Board Certified Specialty: No
KARYNNE F EDNACOT

 8010 FROST ST STE 100
SAN DIEGO, CA 92123
 *Phone: (858) 650-5000*
Fax: (858) 636-2903


 *After Hours Phone: (858)*
650-5000

Provider Gender: Female
NPI: 1548027964

 *Provider English Spoken: Y*
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*
9:00AM-5:00PM

 *Website: N/A*

CERTIFIED NURSE

PRACTITIONER

EDNACOT, KARYNNE

Provider ID: 309540
Board Certified Specialty: No
KARYNNE F EDNACOT

 8010 FROST ST STE 100
SAN DIEGO, CA 92123
 *Phone: (858) 650-5000*
Fax: (858) 636-2903

 *After Hours Phone: (858)*
650-5000


Provider Gender: Female
NPI: 1548027964

 *Provider English Spoken: Y*
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 18\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*
9:00AM-5:00PM

 *Website: N/A*

CERTIFIED NURSE

PRACTITIONER

ERICKSON, LISA

Provider ID: 278982
Board Certified Specialty: No

D3. Directorio de proveedores especialistas

LISA K ERICKSON

200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1669442182

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

ERICKSON, LISA

Provider ID: 287444

Board Certified Specialty: No

LISA K ERICKSON

4168 FRONT ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1669442182

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

FELD, KEREN

Provider ID: 297672

Board Certified Specialty: No

KEREN E FELD

4290 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 563-0250
Fax: (858) 633-4681

After Hours Phone: (619)
563-0250

Provider Gender: Female

NPI: 1730835083

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM
SA 8:00AM-2:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

FISHER, SLOANE

Provider ID: 301585

Board Certified Specialty: No
SLOANE FISHER

3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1538807003

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, CHILDRENS HOSP OF
LOS ANGELES

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED NURSE

PRACTITIONER

GARTH, MELISSA

Provider ID: 274053

Board Certified Specialty: No

MELISSA A GARTH

200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1689232977

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

D3. Directorio de proveedores especialistas


THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

GIORGI, ASHLEY

Provider ID: 304877

Board Certified Specialty: No
ASHLEY G GIORGI

 4290 POLK AVE
SAN DIEGO, CA 92105

 Phone: (619) 563-0250

Fax: (858) 633-4681

 After Hours Phone: (619)
563-0250

Provider Gender: Female


NPI: 1952174203


Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-2:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


GOMEZ, LESLIE

Provider ID: 299468

Board Certified Specialty: No

LESLIE N GOMEZ

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1528578713

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

GOMEZ, LESLIE


Provider ID: 299466

Board Certified Specialty: No
LESLIE N GOMEZ

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1528578713

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

GOMEZ, LESLIE

Provider ID: 299467

Board Certified Specialty: No
LESLIE N GOMEZ

 8899 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1528578713

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

HA, THU

Provider ID: 293261

Board Certified Specialty: No
THU T HA

 7011 LINDA VISTA RD

D3. Directorio de proveedores especialistas

SAN DIEGO, CA 92111
☎ Phone: (858) 810-8700
Fax: (858) 633-4680
📞 After Hours Phone: (858) 810-8700
Provider Gender: Female
NPI: 1346443983
📄 Provider English Spoken: Y
📄 Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

HA, THU
Provider ID: 293260
Board Certified Specialty: No
THU T HA
📍 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
☎ Phone: (858) 279-0925
Fax: (858) 633-4680
📞 After Hours Phone: (858) 279-0925
Provider Gender: Female
NPI: 1346443983
📄 Provider English Spoken: Y
📄 Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT

PROVIDER
🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

HARKNESS, RUMIKO
Provider ID: 208841
Board Certified Specialty: No
RUMIKO HARKNESS
📍 4168 FRONT ST
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
📞 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1487785093
📄 Provider English Spoken: Y
📄 Provider Language(s) Spoken: Japanese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

HARROUSH, GAL
Provider ID: 302475
Board Certified Specialty: No
GAL HARROUSH
📍 4973 LINDA VISTA RD
SAN DIEGO, CA 92111
☎ Phone: (858) 279-0925
Fax: (858) 633-4680
📞 After Hours Phone: (858) 279-0925

Provider Gender: Female
NPI: 1992461230
📄 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

HART, BECKY
Provider ID: 305337
Board Certified Specialty: No
BECKY M HART
📍 1501 IMPERIAL AVE
SAN DIEGO, CA 92101
☎ Phone: (619) 233-8500
Fax: (619) 687-1067
📞 After Hours Phone: (619) 233-8500
Provider Gender: Female
NPI: 1316626344
📄 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

D3. Directorio de proveedores especialistas

HEAD, KRISTIN

Provider ID: 268656

Board Certified Specialty: No
KRISTIN N HEAD

7920 FROST ST STE 200
SAN DIEGO, CA 92123

Phone: (858) 966-7484

Fax: (858) 966-4064

After Hours Phone: (858)
966-7484

Provider Gender: Female

NPI: 1699078923

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

HEFNER, ANNA

Provider ID: 308420

Board Certified Specialty: No
ANNA M HEFNER

10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

Phone: (844) 200-2426

Fax: (619) 434-1613

After Hours Phone: (844)
200-2426

Provider Gender: Female

NPI: 1588913537

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
CORONADO HOSP AND
HEALTHCARE CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-6:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

HILL, GENIELYN

Provider ID: 299144

Board Certified Specialty: No
GENIELYN M HILL

10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

Phone: (844) 200-2426

Fax: (619) 434-1613

After Hours Phone: (844)
200-2426

Provider Gender: Female

NPI: 1710632435

Provider English Spoken: Y
Provider Language(s)

Spoken: Tagalog

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

HILLIARD, THESALONICA

Provider ID: 284022

Board Certified Specialty: No
THESALONICA P HILLIARD

10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

Phone: (844) 200-2426

Fax: (858) 578-4417

After Hours Phone: (844)
200-2426

Provider Gender: Female

NPI: 1861956724

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TU
8:30AM-5:30PM
W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

HOOPER, BONNIE


Provider ID: 275254


Board Certified Specialty: No
BONNIE J HOOPER

9339 GENESEE AVE STE
350

SAN DIEGO, CA 92121

D3. Directorio de proveedores especialistas


 Phone: (858) 454-4300

 Fax: (858) 454-5088

 After Hours Phone: (858) 454-4300

Provider Gender: Female

NPI: 1821062878

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

HOOPER, BONNIE


Provider ID: 307208


Board Certified Specialty: No

BONNIE J HOOPER

 9095 RIO SAN DIEGO DR
STE 300

SAN DIEGO, CA 92108


 Phone: (619) 298-9809

 Fax: (619) 298-9823

 After Hours Phone: (619) 298-9809

Provider Gender: Female

NPI: 1821062878

 Provider English Spoken: Y


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999


American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


IBARRA, MARTHA


Provider ID: 295392

Board Certified Specialty: No

MARTHA A IBARRA

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111


 Phone: (858) 279-0925


 Fax: (858) 633-4680

 After Hours Phone: (858) 279-0925

Provider Gender: Female

NPI: 1114957289

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA


Medi-Cal Open Panel: Yes

Min/Max Age: 14\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M 8:30AM-5:30PM

TU 8:30AM-8:30PM

W 8:30AM-5:30PM

TH 8:30AM-8:30PM

F 8:30AM-5:30PM

SA 9:00AM-4:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


IBARRA, MARTHA


Provider ID: 295393

Board Certified Specialty: No

MARTHA A IBARRA

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 Fax: (858) 633-4680

 After Hours Phone: (858) 810-8700

Provider Gender: Female

NPI: 1114957289

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA


Medi-Cal Open Panel: Yes

Min/Max Age: 14\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M 8:30AM-5:30PM

TU 8:30AM-8:30PM

W 8:30AM-5:30PM

TH 8:30AM-8:30PM

F 8:30AM-5:30PM

SA 9:00AM-4:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

JONES, CHRISTA

Provider ID: 275563

Board Certified Specialty: No

CHRISTA E JONES

 200 W ARBOR DR

SAN DIEGO, CA 92103

 Phone: (800) 926-8273

D3. Directorio de proveedores especialistas

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1396371431

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

KEMP, KATHRINE

Provider ID: 301276

Board Certified Specialty: No
KATHRINE E KEMP

📍 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

☎ Phone: (619) 645-6405
Fax: (619) 687-1067

☎ After Hours Phone: (619)
645-6405

Provider Gender: Female

NPI: 1316615313

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:30AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

KI, TRISH

Provider ID: 293293

Board Certified Specialty: No
TRISH H KI

📍 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

☎ Phone: (858) 279-0925
Fax: (858) 633-4680

☎ After Hours Phone: (858)
279-0925

Provider Gender: Female

NPI: 1376840199

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

KI, TRISH

Provider ID: 293294

Board Certified Specialty: No
TRISH H KI

📍 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

☎ Phone: (858) 810-8700
Fax: (858) 633-4680

☎ After Hours Phone: (858)
810-8700

Provider Gender: Female

NPI: 1376840199

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

KIDANE, ZINNIA

Provider ID: 302426

Board Certified Specialty: No
ZINNIA A KIDANE

📍 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

☎ Phone: (858) 279-0925
Fax: (858) 633-4680

☎ After Hours Phone: (858)
279-0925

Provider Gender: Female

NPI: 1780334110

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

D3. Directorio de proveedores especialistas

 Website: N/A


CERTIFIED NURSE
PRACTITIONER

KIDANE, ZINNIA

Provider ID: 302427

Board Certified Specialty: No
ZINNIA A KIDANE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111


 Phone: (858) 810-8700

Fax: (858) 633-4680

 After Hours Phone: (858)
810-8700

Provider Gender: Female

NPI: 1780334110

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE
PRACTITIONER

LAFORTEZA, JOZELLE


Provider ID: 202666

Board Certified Specialty: No
JOZELLE B LAFORTEZA

 9333 GENESEE AVE STE
200


SAN DIEGO, CA 92121


 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1538578307

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE
PRACTITIONER


LANE, KIMBERLY

Provider ID: 301600


Board Certified Specialty: No
KIMBERLY A LANE

 3444 KEARNY VILLA RD
STE 201

SAN DIEGO, CA 92123


 Phone: (858) 430-1101

Fax: (858) 221-5049

 After Hours Phone: (858)
430-1101

Provider Gender: Female

NPI: 1457670119

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

CERTIFIED NURSE
PRACTITIONER


LANE, KIMBERLY

Provider ID: 301601

Board Certified Specialty: No
KIMBERLY A LANE

 3444 KEARNY VILLA RD
STE 202

SAN DIEGO, CA 92123


 Phone: (858) 430-1101

Fax: (858) 429-7929

 After Hours Phone: (858)
430-1101

Provider Gender: Female

NPI: 1457670119

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE
PRACTITIONER


LANE, KIMBERLY

Provider ID: 301597

Board Certified Specialty: No
KIMBERLY A LANE

 11770 BERNARDO PLAZA
CT STE 270

SAN DIEGO, CA 92128

 Phone: (858) 485-0554

Fax: (858) 429-7933

 After Hours Phone: (858)
485-0554

D3. Directorio de proveedores especialistas

Provider Gender: Female


NPI: 1457670119


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

LANE, KIMBERLY

Provider ID: 301603

Board Certified Specialty: No
KIMBERLY A LANE

 4060 4TH AVE STE 310
SAN DIEGO, CA 92103

 Phone: (619) 297-4707
Fax: (858) 429-7927

 After Hours Phone: (619)
297-4707

Provider Gender: Female


NPI: 1457670119


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

MANRIQUEZ, LISETTE

Provider ID: 307103

Board Certified Specialty: No
LISETTE MANRIQUEZ



 286 EUCLID AVE STE 302
SAN DIEGO, CA 92114

 Phone: (619) 662-4100
Fax: (619) 428-7952

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1760058911

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

MANZO, CORINA

Provider ID: 304481

Board Certified Specialty: No
CORINA L MANZO

 2630 1ST AVE
SAN DIEGO, CA 92103

 Phone: (619) 234-2158
Fax: (619) 234-0206

 After Hours Phone: (619)
234-2158

Provider Gender: Female

NPI: 1669087326

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

MARTINEZ, CAROLYN

Provider ID: 293345

Board Certified Specialty: No
CAROLYN M MARTINEZ

 1016 OUTER RD
SAN DIEGO, CA 92154

 Phone: (619) 429-3733
Fax: (619) 628-5550

 After Hours Phone: (619)
429-3733

Provider Gender: Female

NPI: 1609101997

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

D3. Directorio de proveedores especialistas

CERTIFIED NURSE PRACTITIONER

MEDINA, RUBELETA

Provider ID: 296673

Board Certified Specialty: No
RUBELETA S MEDINA

📍 9995 CARMEL MOUNTAIN
RD STE B1011

SAN DIEGO, CA 92129

☎ Phone: (844) 200-2426

Fax: (858) 240-6470

🕒 After Hours Phone: (844)
200-2426

Provider Gender: Female

NPI: 1881153963

🗣 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

MENDOZA, GRETTEL MARIE

Provider ID: 303202

Board Certified Specialty: No
GRETTEL MARIE G MENDOZA

📍 10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

☎ Phone: (844) 200-2426

Fax: (858) 578-4417

🕒 After Hours Phone: (844)
200-2426

Provider Gender: Female

NPI: 1245652387

🗣 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-TH
8:00AM-6:00PM
F 8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

MICK, SHARON

Provider ID: 299647

Board Certified Specialty: No
SHARON L MICK

📍 16950 VIA TAZON
SAN DIEGO, CA 92127

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1891061966

🗣 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

MICK, SHARON

Provider ID: 299648

Board Certified Specialty: No
SHARON L MICK

📍 8899 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1891061966

🗣 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

MICK, SHARON

Provider ID: 299649

Board Certified Specialty: No
SHARON L MICK

📍 200 W ARBOR DR

SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)

D3. Directorio de proveedores especialistas

926-8273
Provider Gender: Female
NPI: 1891061966
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

MIDORO, ABEGAILLE

Provider ID: 303828
Board Certified Specialty: No
ABEGAILLE A MIDORO
📍 9855 ERMA RD STE 105
SAN DIEGO, CA 92131
☎ Phone: (844) 200-2426
Fax: (858) 536-8034
🕒 After Hours Phone: (844)
200-2426
Provider Gender: Female
NPI: 1952925851
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Tagalog
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-TU
8:30AM-5:30PM
W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM
🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

MIDORO, ABEGAILLE

Provider ID: 303829
Board Certified Specialty: No
ABEGAILLE A MIDORO
📍 10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126
☎ Phone: (844) 200-2426
Fax: (858) 578-4417
🕒 After Hours Phone: (844)
200-2426

Provider Gender: Female
NPI: 1952925851

☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Tagalog
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-TU
8:30AM-5:30PM
W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM
🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

MILLER, EVA

Provider ID: 255833
Board Certified Specialty: No

EVA M MILLER
📍 330 LEWIS ST
SAN DIEGO, CA 92103
☎ Phone: (619) 471-9210
🕒 After Hours Phone: (619)
471-9210
Provider Gender: Female
NPI: 1043492523
☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

MOHEBBI, ATHENA


Provider ID: 201325
Board Certified Specialty: No
ATHENA MOHEBBI
📍 4520 EXECUTIVE DR STE
P2
SAN DIEGO, CA 92121
☎ Phone: (800) 926-8273
🕒 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1952627176
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Farsi
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

D3. Directorio de proveedores especialistas

American Sign Language (ASL):  Phone: (800) 926-8273

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

MORAN, TIFFANY

Provider ID: 304275

Board Certified Specialty: No
TIFFANY T MORAN

 2630 1ST AVE
SAN DIEGO, CA 92103

 Phone: (619) 234-2158

Fax: (619) 234-0206

 After Hours Phone: (619)
234-2158

Provider Gender: Female

NPI: 1730730649

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

MULVEY, CAOILFHIONN

Provider ID: 291419

Board Certified Specialty: No
CAOILFHIONN M MULVEY

 200 W ARBOR DR
SAN DIEGO, CA 92103

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1184386864

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


NEJATI, FRESHTA

Provider ID: 214112

Board Certified Specialty: No
FRESHTA NEJATI


 9909 MIRA MESA BLVD
STE 200
SAN DIEGO, CA 92131

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1831598119


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER

NETZEL, JENNIFER


Provider ID: 291347

Board Certified Specialty: No
JENNIFER J NETZEL

 9909 MIRA MESA BLVD
STE 200
SAN DIEGO, CA 92131


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1336896232


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

NETZEL, JENNIFER

Provider ID: 291346

Board Certified Specialty: No
JENNIFER J NETZEL

 9333 GENESEE AVE
SAN DIEGO, CA 92121


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1336896232

 Provider English Spoken: Y
Cultural Competency: N

D3. Directorio de proveedores especialistas


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

CERTIFIED NURSE PRACTITIONER

NETZEL, JENNIFER


Provider ID: 291348

Board Certified Specialty: No

JENNIFER J NETZEL

 8899 UNIVERSITY CENTER LN

SAN DIEGO, CA 92122

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1336896232


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

CERTIFIED NURSE PRACTITIONER

NOVENO, HILARIO JR


Provider ID: 286911

Board Certified Specialty: No

HILARIO JR C NOVENO JR

 4520 EXECUTIVE DR STE P2

SAN DIEGO, CA 92121


 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1124486865

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, Spanish,
Tagalog

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE PRACTITIONER

NOVENO, HILARIO JR

Provider ID: 286912

Board Certified Specialty: No

HILARIO JR C NOVENO JR

 4168 FRONT ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1124486865

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, Spanish,
Tagalog

Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE PRACTITIONER


O'CONNELL, STEFANY

Provider ID: 296846

Board Certified Specialty: No

STEFANY I O'CONNELL

 1016 OUTER RD
SAN DIEGO, CA 92154

 Phone: (619) 429-3733

Fax: (619) 628-5550

 After Hours Phone: (619) 429-3733

Provider Gender: Female

NPI: 1386378479

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE PRACTITIONER

OREJEL, EDITH

Provider ID: 296715

Board Certified Specialty: No

D3. Directorio de proveedores especialistas

EDITH G OREJEL

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 810-8700

Fax: (858) 633-4680

After Hours Phone: (858)
810-8700

Provider Gender: Female

NPI: 1073278180

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM

TU 5:30PM-8:30PM

W 8:30AM-5:30PM

TH 5:30PM-8:30PM

F 8:30AM-5:30PM

SA 9:00AM-4:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

OREJEL, EDITH

Provider ID: 296716

Board Certified Specialty: No

EDITH G OREJEL

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 279-0925

Fax: (858) 633-4680

After Hours Phone: (858)
279-0925

Provider Gender: Female

NPI: 1073278180

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M 8:30AM-5:30PM

TU 5:30PM-8:30PM

W 8:30AM-5:30PM

TH 5:30PM-8:30PM

F 8:30AM-5:30PM

SA 9:00AM-4:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

PACE, RACHELLE

Provider ID: 309961

Board Certified Specialty: No

RACHELLE PACE

6655 ALVARADO RD
SAN DIEGO, CA 92120

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1588334973

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED NURSE

PRACTITIONER

PAI, SARAH

Provider ID: 276870

Board Certified Specialty: No

SARAH A PAI

350 DICKINSON ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1255762167

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

PATIAG, DANIEL

Provider ID: 293249

Board Certified Specialty: No

DANIEL B PATIAG

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 810-8700

Fax: (858) 633-4680

After Hours Phone: (858)
810-8700

Provider Gender: Male

NPI: 1073169769

D3. Directorio de proveedores especialistas

Provider English Spoken: Y
 Provider Language(s)
Spoken: Tagalog
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 14\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE PRACTITIONER

PATIAG, DANIEL

Provider ID: 293248
Board Certified Specialty: No
DANIEL B PATIAG

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
Fax: (858) 633-4680
 After Hours Phone: (858)
279-0925
Provider Gender: Male
NPI: 1073169769

Provider English Spoken: Y
 Provider Language(s)
Spoken: Tagalog
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 14\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE

PRACTITIONER

PEREZ, ALLYSSA

Provider ID: 286223
Board Certified Specialty: No
ALLYSSA M PEREZ

200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1497358915

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE

PRACTITIONER

PEREZ, ALLYSSA

Provider ID: 304162
Board Certified Specialty: No
ALLYSSA M PEREZ

6655 ALVARADO RD
SAN DIEGO, CA 92120
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)

926-8273

Provider Gender: Female
NPI: 1497358915

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
 Website: N/A

CERTIFIED NURSE

PRACTITIONER

PEREZ, ALLYSSA




Provider ID: 286222
Board Certified Specialty: No
ALLYSSA M PEREZ

4510 EXECUTIVE DR
SAN DIEGO, CA 92121
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1497358915

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N




D3. Directorio de proveedores especialistas

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*

CERTIFIED NURSE PRACTITIONER

PETTIS, BETH




*Provider ID: 286878
Board Certified Specialty: No
BETH S PETTIS*

 200 W ARBOR DR
SAN DIEGO, CA 92103
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800)
926-8273*

*Provider Gender: Female
NPI: 1326638958*

 *Provider English Spoken: Y*
Cultural Competency: N
*Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*



CERTIFIED NURSE PRACTITIONER

RAJAEI, NILOUFAR

*Provider ID: 291437
Board Certified Specialty: No
NILOUFAR RAJAEI*

 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800)
926-8273*

*Provider Gender: Female
NPI: 1275904047*

 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Persian*

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
*American Sign Language (ASL):
N*




 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*


CERTIFIED NURSE PRACTITIONER

RANDLE, CARRIE

*Provider ID: 299296
Board Certified Specialty: No
CARRIE A RANDLE*



 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 *Phone: (858) 966-8800*
 *After Hours Phone: (858)
966-8800*

*Provider Gender: Female
NPI: 1558557348*

 *Provider English Spoken: Y*
Cultural Competency: N
*Hospital Affiliation: NAVAL
MEDICAL CTR SD RBE, RADY
CHILDRENS HOSPITAL SAN
DIEGO*

Medi-Cal Open Panel: No
Min/Max Age: 0\19

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*


CERTIFIED NURSE PRACTITIONER

RIEGO, SUZANNE

*Provider ID: 214477
Board Certified Specialty: No
SUZANNE N RIEGO*



 3750 CONVOY ST STE 312
SAN DIEGO, CA 92111
 *Phone: (858) 292-7200*
 *After Hours Phone: (858)
292-7200*

*Provider Gender: Female
NPI: 1144453754*

 *Provider English Spoken: Y*
Cultural Competency: N
*Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*

CERTIFIED NURSE PRACTITIONER

ROBERTSON, RACHAEL

*Provider ID: 286940
Board Certified Specialty: No
RACHAEL A ROBERTSON*

 200 W ARBOR DR

D3. Directorio de proveedores especialistas

SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800) 926-8273

Provider Gender: Female
NPI: 1659912327

🗨 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

RODENMEYER, EVE

Provider ID: 295956
Board Certified Specialty: No
EVE RODENMEYER

📍 4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
☎ Phone: (619) 280-2058
Fax: (858) 633-4682
📞 After Hours Phone: (619) 280-2058

Provider Gender: Female
NPI: 1225782022

🗨 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):

N
♿ Accessibility: CONTACT PROVIDER
🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

ROSCOE, SYDNEY

Provider ID: 305039
Board Certified Specialty: No
SYDNEY R ROSCOE

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
📞 After Hours Phone: (800) 926-8273

Provider Gender: Female
NPI: 1992448864
🗨 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER
🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

ROSCOE, SYDNEY

Provider ID: 305038
Board Certified Specialty: No
SYDNEY R ROSCOE

📍 350 DICKINSON ST
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
📞 After Hours Phone: (800) 926-8273

Provider Gender: Female
NPI: 1992448864
🗨 Provider English Spoken: Y

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER
🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

ROSCOE, SYDNEY

Provider ID: 305037
Board Certified Specialty: No
SYDNEY R ROSCOE

📍 4510 EXECUTIVE DR
SAN DIEGO, CA 92121
☎ Phone: (800) 926-8273
📞 After Hours Phone: (800) 926-8273

Provider Gender: Female
NPI: 1992448864
🗨 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER
🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

ROSS, CRYSTAL

Provider ID: 287763
Board Certified Specialty: No
CRYSTAL H ROSS

📍 350 DICKINSON ST
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273

D3. Directorio de proveedores especialistas

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1548683378

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON,
GROSSMONT HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

ROSS, CRYSTAL

Provider ID: 302559

Board Certified Specialty: No
CRYSTAL H ROSS

📍 4290 POLK AVE
SAN DIEGO, CA 92105

☎ Phone: (619) 563-0250
Fax: (858) 633-4681

☎ After Hours Phone: (619) 563-0250

Provider Gender: Female

NPI: 1548683378

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON,
GROSSMONT HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-2:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

ROSSI, CATHERINE

Provider ID: 291445

Board Certified Specialty: No
CATHERINE R ROSSI

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273
Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1649934126

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

ROZO, JOSE

Provider ID: 300037

Board Certified Specialty: No
JOSE A ROZO

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273
Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1528787132

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

SABIN, NANCY

Provider ID: 293288

Board Certified Specialty: No
NANCY J SABIN

📍 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

☎ Phone: (858) 810-8700
Fax: (858) 633-4680

☎ After Hours Phone: (858) 810-8700

Provider Gender: Female

NPI: 1285732586

☑ Provider English Spoken: Y
☑ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

D3. Directorio de proveedores especialistas

 Website: N/A


CERTIFIED NURSE
PRACTITIONER

SABIN, NANCY

Provider ID: 293287

Board Certified Specialty: No
NANCY J SABIN

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

Fax: (858) 633-4680

 After Hours Phone: (858)
279-0925

Provider Gender: Female

NPI: 1285732586

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


CERTIFIED NURSE
PRACTITIONER


SANACORA, RACHEL

Provider ID: 297728

Board Certified Specialty: No
RACHEL SANACORA

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1548987985

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED NURSE
PRACTITIONER


SANACORA, RACHEL

Provider ID: 297729

Board Certified Specialty: No
RACHEL SANACORA

 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

 Phone: (619) 280-2905

Fax: (619) 283-1614

 After Hours Phone: (619)
280-2905

Provider Gender: Female

NPI: 1548987985

Provider English Spoken: Y

Cultural Competency: N


Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

 Website: N/A


CERTIFIED NURSE
PRACTITIONER

SANTANGELO, JOANNE

Provider ID: 293285

Board Certified Specialty: No
JOANNE SANTANGELO

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

Fax: (858) 633-4680

 After Hours Phone: (858)
279-0925

Provider Gender: Female

NPI: 1619370475

Provider English Spoken: Y


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


CERTIFIED NURSE
PRACTITIONER

SANTANGELO, JOANNE

Provider ID: 293286

Board Certified Specialty: No
JOANNE SANTANGELO

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

Fax: (858) 633-4680

 After Hours Phone: (858)
810-8700

Provider Gender: Female

NPI: 1619370475

Provider English Spoken: Y

D3. Directorio de proveedores especialistas

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*



CERTIFIED NURSE PRACTITIONER



SATTERWHITE, MAURINE

Provider ID: 293258
Board Certified Specialty: No
MAURINE C SATTERWHITE

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 *Phone: (858) 279-0925*
Fax: (858) 633-4680
 *After Hours Phone: (858) 279-0925*

Provider Gender: Female
NPI: 1225012842

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*



CERTIFIED NURSE PRACTITIONER

SATTERWHITE, MAURINE



Provider ID: 293259
Board Certified Specialty: No
MAURINE C SATTERWHITE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 *Phone: (858) 810-8700*
Fax: (858) 633-4680
 *After Hours Phone: (858) 810-8700*

Provider Gender: Female
NPI: 1225012842

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*


CERTIFIED NURSE PRACTITIONER

SEARS-WILEY, ELIZABETH

Provider ID: 276851
Board Certified Specialty: No
ELIZABETH SEARS-WILEY

 350 DICKINSON ST
SAN DIEGO, CA 92103
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800) 926-8273*

Provider Gender: Female
NPI: 1215394382

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

CERTIFIED NURSE

PRACTITIONER

SELBY, BLAKE

Provider ID: 246423
Board Certified Specialty: No
BLAKE A SELBY




 4510 EXECUTIVE DR
SAN DIEGO, CA 92121
 *Phone: (800) 926-8273*
 *After Hours Phone: (800) 926-8273*

Provider Gender: Female
NPI: 1417194358

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

CERTIFIED NURSE

PRACTITIONER

SELBY, BLAKE

D3. Directorio de proveedores especialistas

Provider ID: 256646

Board Certified Specialty: No
BLAKE A SELBY

4520 EXECUTIVE DR
SAN DIEGO, CA 92121

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1417194358

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

UNIVERSITY OF CALIFORNIA
IRVINE MED CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE PRACTITIONER

SENA, TIFFANY

Provider ID: 300229

Board Certified Specialty: No
TIFFANY C SENA

550 WASHINGTON ST STE
300

SAN DIEGO, CA 92103

Phone: (619) 297-5437

Fax: (619) 297-4567

After Hours Phone: (619)
297-5437

Provider Gender: Female

NPI: 1710539523

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
8:00AM-8:00PM
F 8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE PRACTITIONER

SWARTZ, ERIN

Provider ID: 255787

Board Certified Specialty: No
ERIN SWARTZ

330 LEWIS ST
SAN DIEGO, CA 92103

Phone: (858) 657-8530

After Hours Phone: (858)
657-8530

Provider Gender: Female

NPI: 1639571292

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE PRACTITIONER

TAING, JENNIFER

Provider ID: 201573

Board Certified Specialty: No
JENNIFER S TAING

4168 FRONT ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1649528357

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

UNIVERSITY OF CALIFORNIA
IRVINE MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE PRACTITIONER

TALBOT, ADRIANNE

Provider ID: 278183

Board Certified Specialty: No
ADRIANNE V TALBOT

4168 FRONT ST STE 1A
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

D3. Directorio de proveedores especialistas

Provider Gender: Female

NPI: 1992048557


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE PRACTITIONER


TOPPEN, LAURA

Provider ID: 215477

Board Certified Specialty: No
LAURA TOPPEN

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female


NPI: 1326563495


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE PRACTITIONER


TREJO, ANA

Provider ID: 307672

Board Certified Specialty: No
ANA C TREJO

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1033717194

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


CERTIFIED NURSE PRACTITIONER


TUCKER, LANIKA

Provider ID: 307659

Board Certified Specialty: No
LANIKA A TUCKER

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1477325181

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


CERTIFIED NURSE PRACTITIONER


TUCKER, LANIKA

Provider ID: 307657

Board Certified Specialty: No
LANIKA A TUCKER

 6655 ALVARADO RD
SAN DIEGO, CA 92120

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1477325181

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED NURSE PRACTITIONER


VIBAL-POASTER, MARIA

Provider ID: 205651

Board Certified Specialty: No
MARIA K VIBAL-POASTER

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

D3. Directorio de proveedores especialistas

NPI: 1376046680


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): Provider ID: 306075

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

WALDRUP, LARHONDA

Provider ID: 299260

Board Certified Specialty: No
LARHONDA M WALDRUP

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5888
Fax: (858) 966-7483

 After Hours Phone: (858)
966-5888

Provider Gender: Female

NPI: 1831627181

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: PALOMAR
MEDICAL CENTER, RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE

PRACTITIONER

WHITEHURST, UNIQUE

Board Certified Specialty: No
UNIQUE D WHITEHURST

 286 EUCLID AVE STE 302
SAN DIEGO, CA 92114

 Phone: (619) 662-4100
Fax: (619) 428-7952

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1124800214


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE


PRACTITIONER

WOO, ANDY

Provider ID: 299916

Board Certified Specialty: No
ANDY B WOO


 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1609450550

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED REGISTERED



NURSE ANESTHETIST

ALFONSO, ALVIN

Provider ID: 256374

Board Certified Specialty: No
ALVIN M ALFONSO

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
 After Hours Phone: (800)

926-8273
Provider Gender: Male

NPI: 1952653404


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED REGISTERED

NURSE ANESTHETIST

APPLEGET, JOSEPH

D3. Directorio de proveedores especialistas

Provider ID: 239602

Board Certified Specialty: No
JOSEPH M APPEGET

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1568980472

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RIVERSIDE
COMMUNITY HOSP

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED REGISTERED

NURSE ANESTHETIST

BARBA, ARNEL

Provider ID: 262186

Board Certified Specialty: No
ARNEL J BARBA

286 EUCLID AVE STE 109
SAN DIEGO, CA 92114

Phone: (619) 564-8249

After Hours Phone: (619)
564-8249

Provider Gender: Male

NPI: 1750366928

Provider English Spoken: Y

Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED REGISTERED

NURSE ANESTHETIST

BAYLIS, CHRISTOPHER

Provider ID: 240763

Board Certified Specialty: No
CHRISTOPHER M BAYLIS

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1174893358

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED REGISTERED

NURSE ANESTHETIST

BILLINGTON, KATHERINE

Provider ID: 262246

Board Certified Specialty: No
KATHERINE S BILLINGTON

286 EUCLID AVE STE 109
SAN DIEGO, CA 92114

Phone: (619) 564-8249

After Hours Phone: (619)
564-8249

Provider Gender: Female

NPI: 1962787366

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED REGISTERED

NURSE ANESTHETIST

BOEING, KRISTINA

Provider ID: 274397

Board Certified Specialty: No
KRISTINA K BOEING

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1205134301

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR



Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER


D3. Directorio de proveedores especialistas

 Hours: M-F
8:00AM-5:00PM
 Website: N/A

**CERTIFIED REGISTERED
NURSE ANESTHETIST**
BURROWS, TERENCE

Provider ID: 256694
Board Certified Specialty: No
TERENCE J BURROWS

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781


 After Hours Phone: (800)
926-8273


Provider Gender: Male
NPI: 1023194560

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Hours: M-F
8:00AM-5:00PM


 Website: N/A

**CERTIFIED REGISTERED
NURSE ANESTHETIST**
DOLLAND, STEVEN

Provider ID: 280552
Board Certified Specialty: No
STEVEN C DOLLAND

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1982059044


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: KERN
MEDICAL CENTER, UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Hours: M-F
8:00AM-5:00PM

 Website: N/A

**CERTIFIED REGISTERED
NURSE ANESTHETIST**
FERRITER, STACY


Provider ID: 265295
Board Certified Specialty: No
STACY K FERRITER

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273


Provider Gender: Female
NPI: 1780725556

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Hours: M-F
8:00AM-5:00PM

 Website: N/A

**CERTIFIED REGISTERED
NURSE ANESTHETIST**
GARCIA, CALVIN

Provider ID: 217365
Board Certified Specialty: No
CALVIN J GARCIA

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781


 After Hours Phone: (800)
926-8273


Provider Gender: Male
NPI: 1427419944

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Hours: M-F
8:00AM-5:00PM

 Website: N/A

**CERTIFIED REGISTERED
NURSE ANESTHETIST**
GONZALEZ, LISA

Provider ID: 299905
Board Certified Specialty: No
LISA A GONZALEZ

 200 W ARBOR DR
SAN DIEGO, CA 92103


 Phone: (800) 926-8273
Fax: (888) 539-8781

D3. Directorio de proveedores especialistas

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1083254205

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:

UNIVERSITY OF CALIFORNIA
IRVINE MED CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED REGISTERED

NURSE ANESTHETIST


POLIKOWSKI, SAMANTHA

Provider ID: 291444

Board Certified Specialty: No

SAMANTHA E POLIKOWSKI

 200 W ARBOR DR
SAN DIEGO, CA 92103


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1194134114

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: KAISER
FOUNDATION HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED REGISTERED

NURSE ANESTHETIST


RAMIREZ, NICOLE

Provider ID: 291404

Board Certified Specialty: No

NICOLE A RAMIREZ

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1487213500


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED REGISTERED

NURSE ANESTHETIST


SACKS, BRENT

Provider ID: 278003

Board Certified Specialty: No

BRENT A SACKS

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1982133591

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED REGISTERED

NURSE ANESTHETIST

VINCENT, BERLIN

Provider ID: 291454

Board Certified Specialty: No

BERLIN VINCENT

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1144987801

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

D3. Directorio de proveedores especialistas

CERTIFIED REGISTERED

NURSE MIDWIFE

CHOI, NATHALIE

Provider ID: 301715

Board Certified Specialty: No

NATHALIE L CHOI

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1073241618

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER,

SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED REGISTERED

NURSE MIDWIFE

CHOI, NATHALIE

Provider ID: 301714

Board Certified Specialty: No

NATHALIE L CHOI

4168 FRONT ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1073241618

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER,

SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED REGISTERED

NURSE MIDWIFE

EKHOLM, JANNA

Provider ID: 290584

Board Certified Specialty: No

JANNA L EKHOLM

4290 POLK AVE
SAN DIEGO, CA 92105

Phone: (619) 563-0250

Fax: (858) 633-4681

After Hours Phone: (619)
563-0250

Provider Gender: Female

NPI: 1588977151

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

CERTIFIED REGISTERED

NURSE MIDWIFE

GOODWIN, RACHEL

Provider ID: 210018

Board Certified Specialty: No

RACHEL K GOODWIN

4168 FRONT ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1518274919

Provider English Spoken: Y
Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED REGISTERED

NURSE MIDWIFE

GOODWIN, RACHEL

Provider ID: 210019

Board Certified Specialty: No

RACHEL K GOODWIN

16950 VIA TAZON
SAN DIEGO, CA 92127


Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

D3. Directorio de proveedores especialistas

Provider Gender: Female

NPI: 1518274919

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED REGISTERED

NURSE MIDWIFE


GREAR MANN, MELISSA

Provider ID: 210053

Board Certified Specialty: No
MELISSA P GREAR MANN

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female


NPI: 1255384475


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED REGISTERED


NURSE MIDWIFE


GREAR MANN, MELISSA

Provider ID: 210052

Board Certified Specialty: No
MELISSA P GREAR MANN

 4168 FRONT ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1255384475


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED REGISTERED

NURSE MIDWIFE


GUNTHER, HOPE

Provider ID: 210041

Board Certified Specialty: No
HOPE R GUNTHER

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female


NPI: 1285667741


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED REGISTERED

NURSE MIDWIFE


HIRSCH, JENNIFER

Provider ID: 210058

Board Certified Specialty: No
JENNIFER S HIRSCH

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1891752069

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED REGISTERED

NURSE MIDWIFE

HIRSCH, JENNIFER

D3. Directorio de proveedores especialistas

Provider ID: 210055
Board Certified Specialty: No
JENNIFER S HIRSCH

📍 4168 FRONT ST
SAN DIEGO, CA 92103
☎ Phone: (619) 543-7878
🕒 After Hours Phone: (619)
543-7878

Provider Gender: Female
NPI: 1891752069

🗨 Provider English Spoken: Y
🗨 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED REGISTERED NURSE MIDWIFE

HIRSCH, JENNIFER

Provider ID: 210054
Board Certified Specialty: No
JENNIFER S HIRSCH

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
☎ Phone: (619) 543-7878
🕒 After Hours Phone: (619)
543-7878

Provider Gender: Female
NPI: 1891752069

🗨 Provider English Spoken: Y
🗨 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Medi-Cal Open Panel: Yes

Min/Max Age: 0\999
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

CERTIFIED REGISTERED NURSE MIDWIFE

NATHAN, CARLY

Provider ID: 301048
Board Certified Specialty: No
CARLY NATHAN

📍 3750 CONVOY ST STE 312
SAN DIEGO, CA 92111

☎ Phone: (800) 926-8273
Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1235670977

🗨 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

CERTIFIED REGISTERED NURSE MIDWIFE

NATHAN, CARLY

Provider ID: 301047
Board Certified Specialty: No
CARLY NATHAN

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273
Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1235670977

🗨 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

CHIROPRACTOR

BUI, MAI

Provider ID: 289496
Board Certified Specialty: No
MAI T BUI

📍 10717 CAMINO RUIZ STE 137
SAN DIEGO, CA 92126

☎ Phone: (619) 692-3211
Fax: (619) 640-3211

🕒 After Hours Phone: (619)
692-3211

Provider Gender: Female
NPI: 1780901264

🗨 Provider English Spoken: Y
🗨 Provider Language(s)

Spoken: Vietnamese
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M 9:00AM-6:00PM
W 9:00AM-6:00PM
F 9:00AM-2:00PM

🌐 Website: N/A

D3. Directorio de proveedores especialistas

CHIROPRACTOR

BUI, MAI

Provider ID: 295791

Board Certified Specialty: No

MAI T BUI

5354 UNIVERSITY AVE STE 3

SAN DIEGO, CA 92105

Phone: (619) 692-3211

Fax: (619) 640-3211

After Hours Phone: (619) 692-3211

Provider Gender: Female

NPI: 1780901264

Provider English Spoken: Y

Provider Language(s) Spoken: Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 9:00AM-5:00PM

Website: N/A

CHIROPRACTOR

BUI, MAI

Provider ID: 125052

Board Certified Specialty: No

MAI T BUI

5354 UNIVERSITY AVE STE 3

SAN DIEGO, CA 92105

Phone: (619) 692-3211

Fax: (619) 640-3211

After Hours Phone: (619) 692-3211

Provider Gender: Female

NPI: 1780901264

Provider English Spoken: Y

Provider Language(s) Spoken: Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 9:00AM-5:00PM

Website: N/A

CHIROPRACTOR

GILIBERTO, JOSEPH

Provider ID: 291547

Board Certified Specialty: No

JOSEPH A GILIBERTO

10737 CAMINO RUIZ STE 235

SAN DIEGO, CA 92126

Phone: (844) 200-2426

Fax: (619) 399-5959

After Hours Phone: (844) 200-2426

Provider Gender: Male

NPI: 1821463159

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

Website: N/A

CHIROPRACTOR

GILIBERTO, JOSEPH

Provider ID: 291546

Board Certified Specialty: No

JOSEPH A GILIBERTO

9995 CARMEL MOUNTAIN RD STE D

SAN DIEGO, CA 92129

Phone: (844) 200-2426

Fax: (619) 399-5959

After Hours Phone: (844) 200-2426

Provider Gender: Male

NPI: 1821463159

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

Website: N/A

CHIROPRACTOR

LUU, DANIEL

Provider ID: 269883

Board Certified Specialty: No

DANIEL Q LUU

4419 EUCLID AVE STE 105

SAN DIEGO, CA 92115

Phone: (619) 287-1235

Fax: (619) 255-6406

After Hours Phone: (619) 287-1235

Provider Gender: Male

NPI: 1225108269



Provider English Spoken: Y

D3. Directorio de proveedores especialistas

 *Provider Language(s)*
Spoken: Vietnamese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M 10:00AM-6:00PM*
TU 10:00AM-2:00PM
W 10:00AM-6:00PM
TH 10:00AM-2:00PM
F 10:00AM-6:00PM
 *Website: N/A*








CHIROPRACTOR

MONTANE, RUBEN

Provider ID: 309694
Board Certified Specialty: No
RUBEN A MONTANE
 1016 OUTER RD
SAN DIEGO, CA 92154
 *Phone: (619) 429-3733*
Fax: (619) 628-5550
 *After Hours Phone: (619) 429-3733*
Provider Gender: Male
NPI: 1346725769
 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

CHIROPRACTOR

ROBINSON, DEAN




Provider ID: 300847
Board Certified Specialty: No
DEAN A ROBINSON
 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 *Phone: (858) 279-0925*
Fax: (858) 633-4680
 *After Hours Phone: (858) 279-0925*
Provider Gender: Male
NPI: 1851320337
 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F*
8:30AM-5:30PM
 *Website: N/A*

CHIROPRACTOR

ROBINSON, DEAN


Provider ID: 300848
Board Certified Specialty: No
DEAN A ROBINSON
 4290 POLK AVE
SAN DIEGO, CA 92105
 *Phone: (619) 563-0250*
Fax: (858) 633-4681
 *After Hours Phone: (619) 563-0250*
Provider Gender: Male
NPI: 1851320337
 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):



N




 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F*
8:30AM-5:30PM
 *Website: N/A*

DERMATOLOGY

CALAME, ANTOANELLA

Provider ID: 290301
Board Certified Specialty: No
ANTOANELLA CALAME
 6605 NANCY RIDGE DR
SAN DIEGO, CA 92121
 *Phone: (858) 750-2983*
Fax: (858) 750-2984
 *After Hours Phone: (858) 750-2983*
Provider Gender: Female
NPI: 1285817569

 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Romanian
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, YUMA REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

DERMATOLOGY

DANG, TIMOTHY

D3. Directorio de proveedores especialistas

Provider ID: 309721

Board Certified Specialty: No
TIMOTHY M DANG

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1518427913

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

DERMATOLOGY

KANNAN, SWATI

Provider ID: 286287

Board Certified Specialty: No
SWATI V KANNAN

8899 UNIVERSITY CENTER
LN STE 350
SAN DIEGO, CA 92122

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1508155227

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RONALD
REAGAN UCLA MED CTR,
SANTA MONICA UCLA MED
CTR, UCSD MEDICAL CTR,

UCSD LA JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

DERMATOLOGY

KAUNITZ, GENEVIEVE

Provider ID: 285011

Board Certified Specialty: No
GENEVIEVE J KAUNITZ

8899 UNIVERSITY CENTER
LN STE 350
SAN DIEGO, CA 92122

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1053734905

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

DERMATOLOGY

KOZMA, BONITA

Provider ID: 269301

Board Certified Specialty: No
BONITA D KOZMA

8899 UNIVERSITY CENTER
LN STE 350
SAN DIEGO, CA 92122

Phone: (858) 657-8322
Fax: (888) 539-8781

After Hours Phone: (858)
657-8322

Provider Gender: Female
NPI: 1659654598

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:

PROVIDENCE SAINT JOHNS
HEALTH CENTER, SANTA
MONICA UCLA MED CTR,
RONALD REAGAN UCLA MED
CTR, UCSD MEDICAL CTR,
UCSD LA JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

DERMATOLOGY








LIN, SHINKO

Provider ID: 308915

Board Certified Specialty: No
SHINKO K LIN

5222 BALBOA AVE FL 5
SAN DIEGO, CA 92117

D3. Directorio de proveedores especialistas

 Phone: (619) 267-8303
Fax: (619) 267-4835
 After Hours Phone: (619) 267-8303
Provider Gender: Female
NPI: 1205130036
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:30AM-4:30PM
 Website: N/A

DERMATOLOGY



LIN, SHINKO

Provider ID: 308736
Board Certified Specialty: No
SHINKO K LIN
 5222 BALBOA AVE FL 5
SAN DIEGO, CA 92117
 Phone: (619) 267-8303
Fax: (619) 267-4835
 After Hours Phone: (619) 267-8303
Provider Gender: Female
NPI: 1205130036
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL
Medi-Cal Open Panel: Yes

Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:30AM-4:30PM
 Website: N/A



DERMATOLOGY

LIU, YUJIE

Provider ID: 308315
Board Certified Specialty: No
YUJIE L LIU
 8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1750944450
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

DERMATOLOGY



SHI, VERONICA

Provider ID: 286335
Board Certified Specialty: No
VERONICA J SHI
 16950 VIA TAZON
SAN DIEGO, CA 92127
 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1366897464
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

DERMATOLOGY

SHI, VERONICA


Provider ID: 271713
Board Certified Specialty: No
VERONICA J SHI
 8899 UNIVERSITY CENTER LN STE 350
SAN DIEGO, CA 92122
 Phone: (858) 657-8322
Fax: (888) 539-8781
 After Hours Phone: (858) 657-8322
Provider Gender: Female
NPI: 1366897464
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes


D3. Directorio de proveedores especialistas

Min/Max Age: 0\999

American Sign Language (ASL): MARLEIGH J STERN

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


DERMATOLOGY

SINGH, GAURAV

Provider ID: 272612

Board Certified Specialty: No
GAURAV SINGH


 8899 UNIVERSITY CENTER
LN STE 350
SAN DIEGO, CA 92122

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1184073801


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


DERMATOLOGY


STERN, MARLEIGH

Provider ID: 306888

Board Certified Specialty: No

MARLEIGH J STERN


 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female


NPI: 1710447883

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


 Website: N/A


DERMATOLOGY

ZUBAIR, RAHEEL

Provider ID: 306520

Board Certified Specialty: No
RAHEEL A ZUBAIR

 9339 GENESEE AVE STE
350
SAN DIEGO, CA 92121

 Phone: (858) 454-4300
Fax: (858) 454-5088

 After Hours Phone: (858)
454-4300

Provider Gender: Male

NPI: 1326493024

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


EMERGENCY MEDICINE

AMANN, CHRISTOPHER

Provider ID: 270913

Board Certified Specialty: No
CHRISTOPHER J AMANN


 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1134326895

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON, USC
KENNETH NORRIS JR CANCER
HOSPITAL, KECK HOSPITAL OF
USC, USC VERDUGO HILLS
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

EMERGENCY MEDICINE

AUSTIN, ANDREA

Provider ID: 269291

Board Certified Specialty: No

D3. Directorio de proveedores especialistas

ANDREA L AUSTIN

200 W ARBOR DR

SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1811289093

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,

GROSSMONT HOSPITAL, Los

Angeles General Medical

Center, TEMECULA VALLEY

HOSPITAL INC

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

EMERGENCY MEDICINE

BAGBY, JESSICA

Provider ID: 271136

Board Certified Specialty: No

JESSICA A BAGBY

200 W ARBOR DR

SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1093161473

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

EMERGENCY MEDICINE

BARRY, JEFFREY

Provider ID: 271130

Board Certified Specialty: No

JEFFREY R BARRY

4168 FRONT ST

SAN DIEGO, CA 92103

Phone: (855) 535-5864

Fax: (888) 539-8781

After Hours Phone: (855)
535-5864

Provider Gender: Male

NPI: 1801207006

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

EMERGENCY MEDICINE

BARRY, JEFFREY

Provider ID: 271132

Board Certified Specialty: No

JEFFREY R BARRY

200 W ARBOR DR

SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1801207006

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

EMERGENCY MEDICINE

BARRY, JEFFREY

Provider ID: 271129

Board Certified Specialty: No

JEFFREY R BARRY

4520 EXECUTIVE DR STE

P2

SAN DIEGO, CA 92121

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

D3. Directorio de proveedores especialistas

926-8273
Provider Gender: Male
NPI: 1801207006
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

EMERGENCY MEDICINE

BELLINGHAUSEN, AMY

Provider ID: 270333
Board Certified Specialty: No
AMY BELLINGHAUSEN
4520 EXECUTIVE DR STE
P2
SAN DIEGO, CA 92121
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1801206354

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
CORONADO HOSP AND
HEALTHCARE CTR, SHARP
MEMORIAL HOSPITAL, UCSD
LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

EMERGENCY MEDICINE

BELLINGHAUSEN, AMY

Provider ID: 270334
Board Certified Specialty: No
AMY BELLINGHAUSEN
4168 FRONT ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1801206354

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
CORONADO HOSP AND
HEALTHCARE CTR, SHARP
MEMORIAL HOSPITAL, UCSD
LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

EMERGENCY MEDICINE

BELLINGHAUSEN, AMY

Provider ID: 270336
Board Certified Specialty: No
AMY BELLINGHAUSEN
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1801206354

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
CORONADO HOSP AND
HEALTHCARE CTR, SHARP
MEMORIAL HOSPITAL, UCSD
LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

EMERGENCY MEDICINE

CASTELLANO, TIFFANY

Provider ID: 301706
Board Certified Specialty: No
TIFFANY M CASTELLANO
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273

D3. Directorio de proveedores especialistas

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1063893063

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

EMERGENCY MEDICINE

CASTELLANO, TIFFANY

Provider ID: 279314

Board Certified Specialty: No
TIFFANY M CASTELLANO

📍 16950 VIA TAZON
SAN DIEGO, CA 92127

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1063893063

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

EMERGENCY MEDICINE

CHEN, ALICE

Provider ID: 287430

Board Certified Specialty: No
ALICE Y CHEN

📍 16950 VIA TAZON
SAN DIEGO, CA 92127

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1427476597

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Mandarin

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

EMERGENCY MEDICINE

CHEN, ALICE

Provider ID: 287428

Board Certified Specialty: No
ALICE Y CHEN

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1427476597

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Mandarin

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

EMERGENCY MEDICINE

COYNE, CHRISTOPHER

Provider ID: 303036

Board Certified Specialty: No
CHRISTOPHER J COYNE

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (619) 543-7051

Fax: (619) 543-3115

☎ After Hours Phone: (619) 543-7051

Provider Gender: Male

NPI: 1043590169

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,

RADY CHILDRENS HOSPITAL

SAN DIEGO, EL CENTRO




REGIONAL MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

D3. Directorio de proveedores especialistas

 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A


EMERGENCY MEDICINE


GUITTARD, JESSE

Provider ID: 239879

Board Certified Specialty: No
JESSE A GUITTARD


 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (619) 543-6400

 After Hours Phone: (619)
543-6400

Provider Gender: Male

NPI: 1770979890

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: EL CENTRO
REGIONAL MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


EMERGENCY MEDICINE

HERNANDEZ, CRISTINA

Provider ID: 242544

Board Certified Specialty: No
CRISTINA T HERNANDEZ


 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1164765046

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


EMERGENCY MEDICINE

HOGUE, BRENN A

Provider ID: 301711

Board Certified Specialty: No
BRENN A L HOGUE

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1043705296

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PIONEERS
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

EMERGENCY MEDICINE


HORNBEAK, KIRSTEN

Provider ID: 240022

Board Certified Specialty: No
KIRSTEN B HORNBEAK

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1205214442

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


EMERGENCY MEDICINE

KUTZ, CRAIG

Provider ID: 283845

Board Certified Specialty: No
KUTZ CRAIG MD

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

D3. Directorio de proveedores especialistas

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1598295925

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR, TRI CITY MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


EMERGENCY MEDICINE

LIOTTA, BENJAMIN

Provider ID: 285630

Board Certified Specialty: No
BENJAMIN I LIOTTA



 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1396270278

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Chinese

Cultural Competency: N


Hospital Affiliation: SHARP
CHULA VISTA MED CTR, UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-8:00PM

 Website: N/A


EMERGENCY MEDICINE


MCDANIEL, MICHELE

Provider ID: 246901

Board Certified Specialty: No
MICHELE A MCDANIEL

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1366761959

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
RADY CHILDRENS HOSPITAL
SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


EMERGENCY MEDICINE


NOSTE, ERIN

Provider ID: 239797

Board Certified Specialty: No
ERIN E NOSTE


 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (619) 543-6400

 After Hours Phone: (619)
543-6400

Provider Gender: Female

NPI: 1871732214

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR, RADY CHILDRENS


HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


EMERGENCY MEDICINE


NOSTE, ERIN

Provider ID: 239798

Board Certified Specialty: No
ERIN E NOSTE

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (858) 605-4441

 After Hours Phone: (858)
605-4441

Provider Gender: Female

D3. Directorio de proveedores especialistas

NPI: 1871732214

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL


CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: SU
8:00AM-10:00PM
M-F 8:00AM-5:00PM
SA 8:00AM-10:00PM

 Website: N/A


EMERGENCY MEDICINE

PARK, JAY

Provider ID: 285607

Board Certified Specialty: No
JAY H PARK

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1366478372

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


EMERGENCY MEDICINE


PHAM, LILY

Provider ID: 304937

Board Certified Specialty: No
LILY M PHAM


 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1811423072

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


 Website: N/A


EMERGENCY MEDICINE

PHAM, LILY

Provider ID: 304933

Board Certified Specialty: No
LILY M PHAM


 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105


 Phone: (619) 280-2905
Fax: (619) 283-1614

 After Hours Phone: (619)
280-2905

Provider Gender: Female

NPI: 1811423072

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 1:00PM-10:00PM

M-F 4:00PM-10:00PM

SA 1:00PM-10:00PM

 Website: N/A

EMERGENCY MEDICINE


RUDOLF, FRANCES


Provider ID: 240159

Board Certified Specialty: No

FRANCES E RUDOLPH

 200 W ARBOR DR
SAN DIEGO, CA 92103


 Phone: (858) 657-7000

 After Hours Phone: (858)
657-7000

Provider Gender: Female

NPI: 1821487430

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

D3. Directorio de proveedores especialistas

American Sign Language (ASL): CHRISTIAN M SLOANE

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


EMERGENCY MEDICINE

SABHA, MAHMOUD

Provider ID: 243441

Board Certified Specialty: No
MAHMOUD SABHA

 16950 VIA TAZON
SAN DIEGO, CA 92127


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1457747883

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

EMERGENCY MEDICINE


SLOANE, CHRISTIAN

Provider ID: 209518

Board Certified Specialty: No


 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1841233145

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, EL CENTRO

REGIONAL MEDICAL CENTER,

RADY CHILDRENS HOSPITAL

SAN DIEGO, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

EMERGENCY MEDICINE


TANAKA, HIDEAKI


Provider ID: 240124

Board Certified Specialty: No

HIDEAKI L TANAKA


 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1124280730

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: EL CENTRO

REGIONAL MEDICAL CENTER,

Sharp Grossmont Hospital


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: SU 8:00AM-8:00PM
M-F 8:00AM-5:00PM

SA 8:00AM-8:00PM

 Website: N/A

EMERGENCY MEDICINE

YOU, ALAN

Provider ID: 269936

Board Certified Specialty: No

ALAN X YOU

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1225425697

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL


CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

EMERGENCY MEDICINE

D3. Directorio de proveedores especialistas

YU, ELAINE

Provider ID: 301708

Board Certified Specialty: No

ELAINE YU

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1528564150

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

ENDOCRINOLOGY

METABOLISM DIABETES

EKANAYAKE, PREETHIKA

Provider ID: 284813

Board Certified Specialty: No

PREETHIKA S EKANAYAKE

4168 FRONT ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1083922462

Provider English Spoken: Y

Provider Language(s)

Spoken: Sinhala, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

ENDOCRINOLOGY

METABOLISM DIABETES

EKANAYAKE, PREETHIKA

Provider ID: 284812

Board Certified Specialty: No

PREETHIKA S EKANAYAKE

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1083922462

Provider English Spoken: Y

Provider Language(s)

Spoken: Sinhala, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

ENDOCRINOLOGY

METABOLISM DIABETES

JUANG, PATRICIA

Provider ID: 255605

Board Certified Specialty: No

PATRICIA S JUANG

4168 FRONT ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (858) 657-7298

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1265695795

Provider English Spoken: Y

Provider Language(s)
Spoken: Mandarin

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

ENDOCRINOLOGY

METABOLISM DIABETES

KULASA, KRISTEN

Provider ID: 255622

Board Certified Specialty: No

KRISTEN M KULASA

4168 FRONT ST

D3. Directorio de proveedores especialistas

SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
Fax: (619) 543-6500
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1932324175

☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):

N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

ENDOCRINOLOGY METABOLISM DIABETES **NAGELBERG, JODI**

Provider ID: 287781
Board Certified Specialty: No
JODI B NAGELBERG

📍 4168 FRONT ST
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273

Provider Gender: Female
NPI: 1720474141
☑ Provider English Spoken: Y
☑ Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):

N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

ENDOCRINOLOGY METABOLISM DIABETES **NAGELBERG, JODI**

Provider ID: 287780
Board Certified Specialty: No
JODI B NAGELBERG

📍 330 LEWIS ST
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1720474141

☑ Provider English Spoken: Y
☑ Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):

N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

ENDOCRINOLOGY METABOLISM DIABETES **NAGELBERG, JODI**

Provider ID: 287779
Board Certified Specialty: No
JODI B NAGELBERG

📍 8899 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1720474141

☑ Provider English Spoken: Y
☑ Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):

N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

ENDOCRINOLOGY METABOLISM DIABETES **NAGELBERG, JODI**

Provider ID: 287782
Board Certified Specialty: No
JODI B NAGELBERG

📍 9909 MIRA MESA BLVD
STE 200
SAN DIEGO, CA 92131
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273


Provider Gender: Female
NPI: 1720474141
☑ Provider English Spoken: Y
☑ Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999

D3. Directorio de proveedores especialistas

American Sign Language (ASL): LALITA K TANTISIRA

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

ENDOCRINOLOGY

METABOLISM DIABETES

SANTOS CAVAIOLA, TRICIA

Provider ID: 256091

Board Certified Specialty: No
TRICIA SANTOS CAVAIOLA

 4168 FRONT ST
SAN DIEGO, CA 92103


 Phone: (800) 926-8273

Fax: (858) 657-7298

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1518163799

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


ENDOCRINOLOGY

METABOLISM DIABETES

TANTISIRA, LALITA

Provider ID: 286323

Board Certified Specialty: No

 4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122


 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1508874298

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Thai

Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

ENDOCRINOLOGY

METABOLISM DIABETES

VALDEZ, KRISTAL ANGELI


Provider ID: 299743

Board Certified Specialty: No

KRISTAL ANGELI A VALDEZ

 10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126


 Phone: (844) 200-2426


Fax: (619) 474-4008

 After Hours Phone: (844)
200-2426

Provider Gender: Female

NPI: 1629480272

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: TWIN

CITIES COMMUNITY

HOSPITAL, SIERRA VISTA

REGIONAL MED CTR,


PARADISE VALLEY HOSPITAL


Medi-Cal Open Panel: Yes


Min/Max Age: 18\100

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

ENDOCRINOLOGY

METABOLISM DIABETES

VALDEZ, KRISTAL ANGELI


Provider ID: 299363

Board Certified Specialty: No


KRISTAL ANGELI A VALDEZ

 10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

 Phone: (844) 200-2426


Fax: (619) 474-4008

 After Hours Phone: (844)
200-2426

Provider Gender: Female

NPI: 1629480272

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: TWIN

CITIES COMMUNITY

HOSPITAL, SIERRA VISTA

REGIONAL MED CTR,

PARADISE VALLEY HOSPITAL


Medi-Cal Open Panel: Yes


D3. Directorio de proveedores especialistas

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


FAMILY PRACTICE

ALVAREZ-ESTRADA, MIGUEL

Provider ID: 301761

Board Certified Specialty: No
MIGUEL ALVAREZ-ESTRADA

 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113


 Phone: (619) 662-4100

Fax: (619) 595-0258

 After Hours Phone: (619)
662-4100

Provider Gender: Male

NPI: 1588197826

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL, PARADISE VALLEY

HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: SU 10:00AM-4:00PM

M-F 8:30AM-5:30PM

SA 8:00AM-2:30PM

 Website: N/A


FAMILY PRACTICE

BELL, TRACY

Provider ID: 304813

Board Certified Specialty: No
TRACY L BELL

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

Fax: (858) 633-4680

 After Hours Phone: (858)
279-0925

Provider Gender: Female

NPI: 1497821318


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 14\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:30AM-5:30PM

 Website: N/A


FAMILY PRACTICE

BELL, TRACY

Provider ID: 304814

Board Certified Specialty: No
TRACY L BELL

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

Fax: (858) 633-4680

 After Hours Phone: (858)
810-8700

Provider Gender: Female

NPI: 1497821318


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 14\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:30AM-5:30PM

 Website: N/A

FAMILY PRACTICE


BERNADETT, ALEX

Provider ID: 296739

Board Certified Specialty: No
ALEX M BERNADETT

 6699 ALVARADO RD STE
2100

SAN DIEGO, CA 92120

 Phone: (619) 229-3909

Fax: (619) 229-3902

 After Hours Phone: (619)
229-3909

Provider Gender: Male

NPI: 1215382841

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 0\99

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

FAMILY PRACTICE







BERNADETT, ALEX

Provider ID: 296740

Board Certified Specialty: No
ALEX M BERNADETT






 10505 SORRENTO VALLEY


D3. Directorio de proveedores especialistas

RD STE 200
SAN DIEGO, CA 92121
 Phone: (858) 793-7860
Fax: (858) 436-1289
 After Hours Phone: (858)
793-7860
Provider Gender: Male
NPI: 1215382841
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\99
American Sign Language (ASL): ALICE I CHEN
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

FAMILY PRACTICE

CAMPBELL, BRIANNA





Provider ID: 298950
Board Certified Specialty: No
BRIANNA N CAMPBELL
 950 S EUCLID AVE
SAN DIEGO, CA 92114
 Phone: (619) 662-4100
Fax: (619) 662-4158
 After Hours Phone: (619)
662-4100
Provider Gender: Female
NPI: 1316479892
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: CHULA
VISTA COMM HOSP
Medi-Cal Open Panel: Yes

Min/Max Age: 0\999
American Sign Language (ASL): ALICE I CHEN
N
 Accessibility: CONTACT
PROVIDER
 Hours: SU 10:00AM-4:00PM
M-F 8:30AM-5:30PM
SA 8:00AM-2:30PM
 Website: N/A

FAMILY PRACTICE

CHEN, ALICE

Provider ID: 207164
Board Certified Specialty: No
ALICE I CHEN
 330 LEWIS ST
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1265810337

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Chinese
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): ALICE I CHEN
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

FAMILY PRACTICE

CHEN, ALICE






Provider ID: 207167

Board Certified Specialty: No




ALICE I CHEN
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1265810337
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Chinese
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

FAMILY PRACTICE

CHEN, ALICE


Provider ID: 207163
Board Certified Specialty: No
ALICE I CHEN
 9333 GENESEE AVE STE
200
SAN DIEGO, CA 92121
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1265810337
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Chinese

D3. Directorio de proveedores especialistas

Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility:* CONTACT
PROVIDER
 *Hours:* M-F
8:00AM-5:00PM
 *Website:* N/A








FAMILY PRACTICE

DANG, LAUREL

Provider ID: 309605
Board Certified Specialty: No
LAUREL K DANG
 9909 MIRA MESA BLVD
STE 200
SAN DIEGO, CA 92131
 *Phone:* (800) 926-8273
Fax: (888) 539-8781
 *After Hours Phone:* (800)
926-8273
Provider Gender: Female
NPI: 1396366050
 *Provider English Spoken:* Y
 *Provider Language(s)*
Spoken: Vietnamese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility:* CONTACT
PROVIDER
 *Website:* N/A

FAMILY PRACTICE

HILL, LINDA

Provider ID: 293211
Board Certified Specialty: No
LINDA L HILL
 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 *Phone:* (858) 810-8700
Fax: (858) 633-4680
 *After Hours Phone:* (858)
810-8700
Provider Gender: Female
NPI: 1467434811
 *Provider English Spoken:* Y
 *Provider Language(s)*
Spoken: French, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility:* CONTACT
PROVIDER
 *Website:* N/A

FAMILY PRACTICE


HILL, LINDA

Provider ID: 293210
Board Certified Specialty: No
LINDA L HILL
 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 *Phone:* (858) 279-0925
Fax: (858) 633-4680
 *After Hours Phone:* (858)
279-0925
Provider Gender: Female
NPI: 1467434811
 *Provider English Spoken:* Y
 *Provider Language(s)*
Spoken: French, Spanish
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility:* CONTACT
PROVIDER
 *Hours:* M-F
8:30AM-5:30PM
 *Website:* N/A

FAMILY PRACTICE

JOHN, TANNER

Provider ID: 303515
Board Certified Specialty: No
TANNER T JOHN
 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
 *Phone:* (619) 662-4100
Fax: (619) 595-0258
 *After Hours Phone:* (619)
662-4100
Provider Gender: Male
NPI: 1043707326
 *Provider English Spoken:* Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility:* CONTACT
PROVIDER
 *Hours:* M-F
8:00AM-5:00PM
 *Website:* N/A

FAMILY PRACTICE

JOLICOEUR, MEGAN

D3. Directorio de proveedores especialistas

Provider ID: 300060

Board Certified Specialty: No
MEGAN E JOLICOEUR

📍 330 LEWIS ST
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1114366192

🗨 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

FAMILY PRACTICE

JOLICOEUR, MEGAN

Provider ID: 300059

Board Certified Specialty: No
MEGAN E JOLICOEUR

📍 9909 MIRA MESA BLVD
STE 200
SAN DIEGO, CA 92131
☎ Phone: (800) 926-8273
🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1114366192

🗨 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

FAMILY PRACTICE

JOLICOEUR, MEGAN

Provider ID: 300057

Board Certified Specialty: No
MEGAN E JOLICOEUR

📍 8899 UNIVERSITY CENTER
LN STE 350
SAN DIEGO, CA 92122
☎ Phone: (858) 249-6890
🕒 After Hours Phone: (858)
249-6890

Provider Gender: Female

NPI: 1114366192

🗨 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

FAMILY PRACTICE

JOLICOEUR, MEGAN

Provider ID: 300058

Board Certified Specialty: No
MEGAN E JOLICOEUR

📍 9333 GENESEE AVE
SAN DIEGO, CA 92121
☎ Phone: (800) 926-8273
🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1114366192

🗨 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

FAMILY PRACTICE

KUROSAKA, MOMO

Provider ID: 291447

Board Certified Specialty: No
MOMO C KUROSAKA

📍 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
☎ Phone: (800) 926-8273
📠 Fax: (888) 539-8781
🕒 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1205848363

🗨 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

FAMILY PRACTICE

KUROSAKA, MOMO

Provider ID: 291448

Board Certified Specialty: No
MOMO C KUROSAKA

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
📠 Fax: (888) 539-8781
🕒 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1205848363

D3. Directorio de proveedores especialistas

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

FAMILY PRACTICE

MCLAUGHLIN, ERIK

Provider ID: 303847
Board Certified Specialty: No
ERIK J MCLAUGHLIN

2630 1ST AVE
SAN DIEGO, CA 92103
 Phone: (619) 234-2158
Fax: (619) 234-0505
 After Hours Phone: (619)
234-2158
Provider Gender: Male
NPI: 1861637217

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

FAMILY PRACTICE

PERESS, LILIA

Provider ID: 304276
Board Certified Specialty: No
LILIA PERESS

7011 LINDA VISTA RD

SAN DIEGO, CA 92111
 Phone: (858) 810-8700
Fax: (858) 633-4680
 After Hours Phone: (858)
810-8700
Provider Gender: Female
NPI: 1275945446
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Ukrainian

Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

FAMILY PRACTICE

PERESS, LILIA

Provider ID: 304277
Board Certified Specialty: No
LILIA PERESS

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
Fax: (858) 633-4680
 After Hours Phone: (858)
279-0925
Provider Gender: Female
NPI: 1275945446

Provider English Spoken: Y
 Provider Language(s)
Spoken: Ukrainian
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

FAMILY PRACTICE

RISSER, JOSEPH

Provider ID: 293217
Board Certified Specialty: No
JOSEPH A RISSER

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
Fax: (858) 633-4680
 After Hours Phone: (858)
810-8700
Provider Gender: Male
NPI: 1952386765

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A


FAMILY PRACTICE

RISSER, JOSEPH

Provider ID: 293216
Board Certified Specialty: Yes
JOSEPH A RISSER

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
Fax: (858) 633-4680

D3. Directorio de proveedores especialistas

 After Hours Phone: (858) 279-0925

Provider Gender: Male


NPI: 1952386765

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A


FAMILY PRACTICE

ROSADO, IVAN

Provider ID: 299244

Board Certified Specialty: No
IVAN H ROSADO

 316 25TH ST
SAN DIEGO, CA 92102

 Phone: (619) 662-4100

Fax: (619) 238-3807

 After Hours Phone: (619) 662-4100

Provider Gender: Male

NPI: 1316479603


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: SU 8:30AM-5:30PM
M-F 8:30AM-5:30PM
SA 8:30AM-2:30PM

 Website: N/A


FAMILY PRACTICE

SCOTT, LAGINA

Provider ID: 302648

Board Certified Specialty: No
LAGINA R SCOTT

 292 EUCLID AVE STE 210
SAN DIEGO, CA 92114

 Phone: (619) 662-4100

Fax: (619) 263-9601

 After Hours Phone: (619) 662-4100

Provider Gender: Female

NPI: 1558897009


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

FAMILY PRACTICE


SUMMERS-DAY, COURTNEY

Provider ID: 290976

Board Certified Specialty: Yes

COURTNEY A SUMMERS-DAY

 1016 OUTER RD
SAN DIEGO, CA 92154



 Phone: (619) 429-3733

Fax: (619) 628-5550

 After Hours Phone: (619) 429-3733

Provider Gender: Female

NPI: 1124288873

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA
VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A


FAMILY PRACTICE

VAN PRATT LEVIN, BENJAMIN

Provider ID: 302531

Board Certified Specialty: No
BENJAMIN A VAN PRATT
LEVIN

 1016 OUTER RD
SAN DIEGO, CA 92154

 Phone: (619) 429-3733

Fax: (619) 628-5550

 After Hours Phone: (619) 429-3733

Provider Gender: Male

NPI: 1619438330

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: PIONEERS
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

FAMILY PRACTICE

D3. Directorio de proveedores especialistas

VO, PHULUONG

Provider ID: 303332

Board Certified Specialty: No
PHULUONG T VO

4690 EL CAJON BLVD
SAN DIEGO, CA 92115

Phone: (619) 662-4100
Fax: (619) 205-6305

After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1043849177

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish,
Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

FAMILY PRACTICE GERIATRIC MEDICINE

MILLER, SCOTT

Provider ID: 271539

Board Certified Specialty: No
SCOTT B MILLER

9878 CARMEL MOUNTAIN
RD STE B
SAN DIEGO, CA 92129

Phone: (858) 312-1440
Fax: (760) 788-7983

After Hours Phone: (858)
312-1440

Provider Gender: Male

NPI: 1104845536

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

GASTROENTEROLOGY

ANAND, GOBIND

Provider ID: 304187

Board Certified Specialty: No
GOBIND S ANAND

6655 ALVARADO RD
SAN DIEGO, CA 92120

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1861626814

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

GASTROENTEROLOGY

ANAND, GOBIND

Provider ID: 272837

Board Certified Specialty: No

GOBIND S ANAND

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (619) 543-2347
Fax: (858) 657-7259

After Hours Phone: (619)
543-2347

Provider Gender: Male

NPI: 1861626814

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

GASTROENTEROLOGY

BAUMAN, LAURA

Provider ID: 260041

Board Certified Specialty: No
LAURA E BAUMAN

3030 CHILDRENS WAY FL
2

SAN DIEGO, CA 92123
Phone: (858) 966-4003
Fax: (858) 560-6798

After Hours Phone: (858)

966-4003

Provider Gender: Female

NPI: 1255697850

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

D3. Directorio de proveedores especialistas


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

GASTROENTEROLOGY

DAVE, SHRAVAN

Provider ID: 270450

Board Certified Specialty: No
SHRAVAN S DAVE

 4510 EXECUTIVE DR STE 7
SAN DIEGO, CA 92121

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1588081814


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


GASTROENTEROLOGY

DAVE, SHRAVAN

Provider ID: 304204

Board Certified Specialty: No
SHRAVAN S DAVE

 6655 ALVARADO RD
SAN DIEGO, CA 92120

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1588081814

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


GASTROENTEROLOGY

HASAN, AWS

Provider ID: 299951

Board Certified Specialty: No
AWS K HASAN

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1780047597

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

GASTROENTEROLOGY


HILDRETH, AMBER

Provider ID: 280464

Board Certified Specialty: No
AMBER N HILDRETH

 3030 CHILDRENS WAY FL
2

SAN DIEGO, CA 92123

 Phone: (858) 966-4003

Fax: (858) 560-6798

 After Hours Phone: (858)
966-4003

Provider Gender: Female

NPI: 1548521511

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

GASTROENTEROLOGY


KUMAR, SOMA

Provider ID: 205377

Board Certified Specialty: No
SOMA KUMAR

 3030 CHILDRENS WAY FL
2 SOUTH

SAN DIEGO, CA 92123

 Phone: (858) 966-4003

Fax: (858) 560-6798

 After Hours Phone: (858)
966-4003

Provider Gender: Female

NPI: 1356502520

 Provider English Spoken: Y


D3. Directorio de proveedores especialistas

Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


GASTROENTEROLOGY

NOVO, MEGAN

Provider ID: 296066

Board Certified Specialty: No
MEGAN E NOVO

 292 EUCLID AVE STE 115
SAN DIEGO, CA 92114

 Phone: (619) 266-3332
Fax: (619) 266-6000

 After Hours Phone: (619)
266-3332

Provider Gender: Female
NPI: 1770961971

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, UCSD LA JOLLA
JOHN SALLY THORNTON,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, UNIVERSITY OF
CALIFORNIA IRVINE MED CTR,
UCSD MEDICAL CTR, SCRIPPS

MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL


Medi-Cal Open Panel: Yes


Min/Max Age: 18\999

American Sign Language (ASL): JOSEPH B REDDY

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


GASTROENTEROLOGY

POLK, DAVID

Provider ID: 275449

Board Certified Specialty: No
DAVID B POLK

 3030 CHILDRENS WAY FL
2

SAN DIEGO, CA 92123
 Phone: (760) 294-9260
Fax: (760) 294-9274

 After Hours Phone: (760)
294-9260

Provider Gender: Male
NPI: 1427140839

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, CHILDRENS HOSP OF
LOS ANGELES


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

GASTROENTEROLOGY

REDDY, JOSEPH


Provider ID: 290034

Board Certified Specialty: Yes


JOSEPH B REDDY

 6699 ALVARADO RD STE
2301

SAN DIEGO, CA 92120

 Phone: (619) 599-4074


Fax: (619) 588-4004

 After Hours Phone: (619)
599-4074

Provider Gender: Male

NPI: 1245215391

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hindi, Spanish,
Telugu

Cultural Competency: N

Hospital Affiliation:


GROSSMONT HOSPITAL, UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

GASTROENTEROLOGY


REDDY, JOSEPH

Provider ID: 27748

Board Certified Specialty: Yes
JOSEPH B REDDY

 6699 ALVARADO RD STE
2301

SAN DIEGO, CA 92120

 Phone: (619) 599-4074


Fax: (619) 588-4004


 After Hours Phone: (619)
599-4074

Provider Gender: Male

D3. Directorio de proveedores especialistas

NPI: 1245215391

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hindi, Spanish,
Telugu

Cultural Competency: N

Hospital Affiliation:


GROSSMONT HOSPITAL, UCSD
MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 18\150

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


GASTROENTEROLOGY

SHAFFER, KATHERINE

Provider ID: 295712

Board Certified Specialty: No
KATHERINE M SHAFFER

 292 EUCLID AVE STE 115
SAN DIEGO, CA 92114

 Phone: (619) 266-3332

Fax: (619) 266-6006

 After Hours Phone: (619)
266-3332

Provider Gender: Female

NPI: 1336405695

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

GASTROENTEROLOGY


SHAH, SHAILJA

Provider ID: 304178

Board Certified Specialty: No

SHAILJA C SHAH

 6655 ALVARADO RD
SAN DIEGO, CA 92120

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1073803243

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

GASTROENTEROLOGY

SHAH, SHAILJA

Provider ID: 283896

Board Certified Specialty: No
SHAILJA C SHAH

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1073803243

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


GASTROENTEROLOGY

TSAI, MATTHEW

Provider ID: 304196

Board Certified Specialty: No
MATTHEW TSAI

 6655 ALVARADO RD
SAN DIEGO, CA 92120

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1285051177


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes

D3. Directorio de proveedores especialistas

Min/Max Age: 0\999

American Sign Language (ASL):  Provider English Spoken: Y
Cultural Competency: N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


GASTROENTEROLOGY


YOUSSEF, FADY

Provider ID: 304186

Board Certified Specialty: No
FADY F YOUSSEF

 6655 ALVARADO RD
SAN DIEGO, CA 92120

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1265887723

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):  N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


GASTROENTEROLOGY


YOUSSEF, FADY

Provider ID: 300024

Board Certified Specialty: No
FADY F YOUSSEF

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1265887723

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):  N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


GENETICS CLINICAL

REIMERS, REBECCA

Provider ID: 302348

Board Certified Specialty: No
REBECCA M REIMERS

 7920 FROST ST STE 200
SAN DIEGO, CA 92123

 Phone: (858) 966-5840
Fax: (858) 966-8550

 After Hours Phone: (858)
966-5840

Provider Gender: Female


NPI: 1801207634

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):  N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


GENETICS CLINICAL

REIMERS, REBECCA

Provider ID: 294650

Board Certified Specialty: No
REBECCA M REIMERS

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-6710
Fax: (858) 966-6711

 After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1801207634


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


GENETICS MEDICAL


DELCAMPOCASANELLES, MIGUEL

Provider ID: 206013

Board Certified Specialty: No
MIGUEL

 7920 FROST ST STE 200
SAN DIEGO, CA 92123



 Phone: (858) 966-5840
Fax: (858) 966-4064

 After Hours Phone: (858)
966-5840


Provider Gender: Male


NPI: 1598141475

D3. Directorio de proveedores especialistas

 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: French, Italian,
Portuguese, Spanish*
Cultural Competency: N
*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
UCSD LA JOLLA JOHN SALLY
THORNTON*
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


GENETICS MEDICAL

NIEMI, ANNA-KAISA

Provider ID: 307094



*Board Certified Specialty: No
ANNA-KAISA NIEMI*

 *7920 FROST ST STE 200
SAN DIEGO, CA 92123*

 *Phone: (858) 966-5840*
Fax: (858) 966-8550

 *After Hours Phone: (858)
966-5840*

*Provider Gender: Female
NPI: 1497941397*


 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Finnish, French,
German, Spanish, Swedish*
Cultural Competency: N

*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,*

*SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19*

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


HEARING AID DEALER / SUPPLIER

ANDERSON, ELAINE

Provider ID: 268691


*Board Certified Specialty: No
ELAINE ANDERSON*

 *9340 CLAIREMONT MESA
BLVD STE D
SAN DIEGO, CA 92123*

 *Phone: (858) 278-9911*
Fax: (858) 565-7324


 *After Hours Phone: (858)
278-9911*


*Provider Gender: Female
NPI: 1063558856*

 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*


 *Website: N/A*


HEARING AID DEALER / SUPPLIER


ANDERSON, ELAINE

Provider ID: 268689


*Board Certified Specialty: No
ELAINE ANDERSON*

 *6367 ALVARADO CT STE 101
SAN DIEGO, CA 92120*


 *Phone: (619) 583-7002*
Fax: (619) 583-9404


 *After Hours Phone: (619)
583-7002*

*Provider Gender: Female
NPI: 1063558856*

 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*


 *Website: N/A*


HEARING AID DEALER / SUPPLIER

DAVIS, KELLE

Provider ID: 268652


*Board Certified Specialty: No
KELLE L DAVIS*

 *6367 ALVARADO CT STE 101
SAN DIEGO, CA 92120*



 *Phone: (619) 583-7002*
Fax: (619) 583-9404

 *After Hours Phone: (619)
583-7002*


*Provider Gender: Female
NPI: 1902853344*

 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

D3. Directorio de proveedores especialistas

American Sign Language (ASL):  Phone: (800) 926-8273
N  Fax: (888) 539-8781

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:30AM-5:00PM

 Website: N/A


HEARING AID DEALER / SUPPLIER


DAVIS, KELLE

Provider ID: 268653

Board Certified Specialty: No
KELLE L DAVIS

 9340 CLAIREMONT MESA
BLVD STE D
SAN DIEGO, CA 92123

 Phone: (858) 278-9911

 Fax: (858) 565-7324

 After Hours Phone: (858)
278-9911

Provider Gender: Female


NPI: 1902853344


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:30AM-5:00PM

 Website: N/A

HEMATOLOGY / ONCOLOGY

CHEN, YU-WEI

Provider ID: 303059

Board Certified Specialty: No
YU-WEI CHEN

 200 W ARBOR DR
SAN DIEGO, CA 92103

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1245694801

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A


HEMATOLOGY / ONCOLOGY


LEE, KAREN


Provider ID: 284165

Board Certified Specialty: No
KAREN K LEE

 3010 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123

 Phone: (858) 966-5811

 Fax: (858) 966-8035

 After Hours Phone: (858)
966-5811

Provider Gender: Female

NPI: 1518352970

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A


HEMATOLOGY / ONCOLOGY


NGUYEN, ANTHONY

Provider ID: 301060

Board Certified Specialty: No
ANTHONY L NGUYEN

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

 Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1295153575


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: LOMA
LINDA UNIVERSITY MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

HEMATOLOGY / ONCOLOGY


PAUL, MEGAN


Provider ID: 274499

Board Certified Specialty: No
MEGAN R PAUL

 3010 CHILDRENS WAY STE
2W
SAN DIEGO, CA 92123

 Phone: (858) 966-5811

 Fax: (858) 966-8035

 After Hours Phone: (858)
966-5811

Provider Gender: Female

NPI: 1427495894

D3. Directorio de proveedores especialistas

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


HEMATOLOGY / ONCOLOGY

VU, PETER

Provider ID: 272716

Board Certified Specialty: No
PETER VU

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1861810830


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

HEMATOLOGY / ONCOLOGY

ZHOU, JENNY


Provider ID: 273188


Board Certified Specialty: No

JENNY Y ZHOU

 9333 GENESEE AVE STE
310

SAN DIEGO, CA 92121

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1598007924


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


HOSPICE AND PALLIATIVE MEDICINE

RUBENZI, TAMARA

Provider ID: 276671

Board Certified Specialty: No
TAMARA T RUBENZI

 4168 FRONT ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1811200652

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL


CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


HOSPICE AND PALLIATIVE MEDICINE

RUBENZI, TAMARA

Provider ID: 245573

Board Certified Specialty: No
TAMARA T RUBENZI


 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1811200652

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL

CTR


Medi-Cal Open Panel: Yes


D3. Directorio de proveedores especialistas

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INFECTIOUS DISEASE

ALDOUS, JEANNETTE

Provider ID: 290420

Board Certified Specialty: No
JEANNETTE L ALDOUS

 950 S EUCLID AVE
SAN DIEGO, CA 92114


 Phone: (619) 662-4100

Fax: (619) 205-6384

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1073650339

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


INFECTIOUS DISEASE

BAMFORD, LAURA


Provider ID: 276546

Board Certified Specialty: No
LAURA P BAMFORD

 4168 FRONT ST FL 3
SAN DIEGO, CA 92103


 Phone: (619) 543-6382

Fax: (888) 539-8781

 After Hours Phone: (619)
543-6382

Provider Gender: Female

NPI: 1750435996

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INFECTIOUS DISEASE


DEISS, ROBERT


Provider ID: 258330

Board Certified Specialty: No

ROBERT G DEISS

 4168 FRONT ST FL 3
SAN DIEGO, CA 92103


 Phone: (619) 543-3995

 After Hours Phone: (619)
543-3995

Provider Gender: Male

NPI: 1194977652

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Portuguese,
Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INFECTIOUS DISEASE

HORTON, LUCY


Provider ID: 240887

Board Certified Specialty: No

LUCY E HORTON

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1427324821

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INFECTIOUS DISEASE

KUPPALLI, KRUTIKA

Provider ID: 301058

D3. Directorio de proveedores especialistas

Board Certified Specialty: No
KRUTIKA KUPPALLI

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
📠 Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1538346317

🗨 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, Stanford Health
Care, STANFORD HEALTH
CARE TRI-VALLEY

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

INFECTIOUS DISEASE

MARTIN, THOMAS

Provider ID: 277226

Board Certified Specialty: No
THOMAS C MARTIN

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
📠 Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1093193583

🗨 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

INFECTIOUS DISEASE

MARTIN, THOMAS

Provider ID: 277225

Board Certified Specialty: No
THOMAS C MARTIN

📍 4168 FRONT ST FL 3
SAN DIEGO, CA 92103
☎ Phone: (619) 543-5890
📠 Fax: (888) 539-8781

🕒 After Hours Phone: (619)
543-5890

Provider Gender: Male

NPI: 1093193583

🗨 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

INFECTIOUS DISEASE

MOODLEY, AMARAN

Provider ID: 208558

Board Certified Specialty: No
AMARAN MOODLEY

📍 3030 CHILDRENS WAY FL
2
SAN DIEGO, CA 92123

☎ Phone: (885) 966-7785
📠 Fax: (858) 966-8658

🕒 After Hours Phone: (885)
966-7785

Provider Gender: Male

NPI: 1104023670

🗨 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

INFECTIOUS DISEASE

PANNARAJ, PIA

Provider ID: 301026

Board Certified Specialty: No
PIA S PANNARAJ

📍 3030 CHILDRENS WAY FL
2
SAN DIEGO, CA 92123

☎ Phone: (858) 966-7785
📠 Fax: (858) 966-8658

🕒 After Hours Phone: (858)
966-7785

Provider Gender: Female

NPI: 1942478524

🗨 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

CHILDRENS HOSP OF LOS

D3. Directorio de proveedores especialistas

ANGELES, HOLLYWOOD
PRESBYTERIAN MED CTR,
RADY CHILDRENS HOSPITAL
SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19


American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

INFECTIOUS DISEASE


RAJAGOPAL, AMUTHA


Provider ID: 221088

Board Certified Specialty: No

AMUTHA V RAJAGOPAL


 4168 FRONT ST FL 3
SAN DIEGO, CA 92103

 Phone: (619) 433-3995

 After Hours Phone: (619)
433-3995

Provider Gender: Female

NPI: 1124465745

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999


American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

INFECTIOUS DISEASE


RAMIREZSANCHEZ, CLAUDIA


Provider ID: 299946

Board Certified Specialty: No

CLAUDIA C RAMIREZSANCHEZ

 200 W ARBOR DR
SAN DIEGO, CA 92103


 Phone: (800) 926-8273


 Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1659720555

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

INFECTIOUS DISEASE


TOVARPADUA, LEIDY


Provider ID: 265093

Board Certified Specialty: No

LEIDY J TOVARPADUA


 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1033491311

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, CHILDRENS HOSP OF

LOS ANGELES, LONG BEACH

MEMORIAL MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

INFECTIOUS DISEASE

TOVARPADUA, LEIDY


Provider ID: 205357


Board Certified Specialty: No

LEIDY J TOVARPADUA

 3030 CHILDRENS WAY FL
2

SAN DIEGO, CA 92123

 Phone: (858) 966-7785

 Fax: (858) 966-8658

 After Hours Phone: (858)
966-7785

Provider Gender: Female

NPI: 1033491311

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, CHILDRENS HOSP OF

LOS ANGELES, LONG BEACH

MEMORIAL MED CTR

Medi-Cal Open Panel: Yes


D3. Directorio de proveedores especialistas

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INTERNAL MEDICINE


ARUTYUNOV, BORIS

Provider ID: 201910

Board Certified Specialty: No
BORIS S ARUTYUNOV

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (619) 471-9186

 After Hours Phone: (619)
471-9186

Provider Gender: Male

NPI: 1144562703

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Russian

Cultural Competency: N

Hospital Affiliation: PIH

HEALTH GOOD SAMARITAN
HOSPITAL, SUTTER MEDICAL
CENTER SACRAMENTO, UCSD
LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A


INTERNAL MEDICINE

BALL, SHELDON

Provider ID: 294136

Board Certified Specialty: No
SHELDON S BALL

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

Fax: (858) 633-4680

 After Hours Phone: (858)
810-8700

Provider Gender: Male

NPI: 1689646275

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M 8:30AM-5:30PM
TU 8:30AM-8:30PM

W-F 8:30AM-5:30PM

SA 9:00AM-4:00PM

 Website: N/A


INTERNAL MEDICINE

BALL, SHELDON

Provider ID: 294137

Board Certified Specialty: No
SHELDON S BALL

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

Fax: (858) 633-4680

 After Hours Phone: (858)
279-0925

Provider Gender: Male

NPI: 1689646275

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M 8:30AM-5:30PM
TU 8:30AM-8:30PM

W-F 8:30AM-5:30PM

SA 9:00AM-4:00PM

 Website: N/A


INTERNAL MEDICINE

BORDIN-WOSK, TALYA

Provider ID: 273983

Board Certified Specialty: No
TALYA S BORDIN WOSK

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (760) 471-9186

Fax: (619) 543-8255

 After Hours Phone: (760)
471-9186

Provider Gender: Female

NPI: 1801184973

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERNAL MEDICINE

CHENG, GEORGE

D3. Directorio de proveedores especialistas

Provider ID: 247639

Board Certified Specialty: No
GEORGE Z CHENG

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1316174568

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INTERNAL MEDICINE

DJEKIC, KRISTINA

Provider ID: 286668

Board Certified Specialty: No
KRISTINA DJEKIC

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1417343732

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INTERNAL MEDICINE

GRUNVALD, EDUARDO

Provider ID: 286343

Board Certified Specialty: No
EDUARDO L GRUNVALD

4303 LA JOLLA VILLAGE
DR STE 2110

SAN DIEGO, CA 92122

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1497791339

Provider English Spoken: Y

Provider Language(s)
Spoken: Portuguese,
Spanish

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INTERNAL MEDICINE

GRUNVALD, EDUARDO

Provider ID: 286344

Board Certified Specialty: No
EDUARDO L GRUNVALD

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1497791339

Provider English Spoken: Y

Provider Language(s)
Spoken: Portuguese,
Spanish

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INTERNAL MEDICINE


HASTIE, ELIZABETH

Provider ID: 291431

Board Certified Specialty: No
ELIZABETH B HASTIE

200 W ARBOR DR
SAN DIEGO, CA 92103

D3. Directorio de proveedores especialistas

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female


NPI: 1154818797


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

INTERNAL MEDICINE


HOGARTH, MICHAEL


Provider ID: 214386

Board Certified Specialty: No

MICHAEL A HOGARTH



 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1225019193

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Portuguese,
Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON, UC


DAVIS MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERNAL MEDICINE


JABBOUR, MOUSSA


Provider ID: 256659

Board Certified Specialty: No

MOUSSA JABBOUR


 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1255741633

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: UCSD LA


JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERNAL MEDICINE

KATZ, YISRAEL


Provider ID: 272936


Board Certified Specialty: No

YISRAEL KATZ

 200 W ARBOR DR


SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1730507872


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERNAL MEDICINE


KVIATKOVSKY, MILLA


Provider ID: 274003

Board Certified Specialty: No

MILLA J KVIATKOVSKY



 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (619) 543-6222

 After Hours Phone: (619) 543-6222

Provider Gender: Female

NPI: 1366855355

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Finnish, French,
Hebrew, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA




JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

D3. Directorio de proveedores especialistas

 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

INTERNAL MEDICINE


LAGO HERNANDEZ, CARLOS


Provider ID: 238622

Board Certified Specialty: No

CARLOS A LAGO-HERNANDEZ


 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1558756270

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERNAL MEDICINE

LAM, MICHAEL


Provider ID: 274410

Board Certified Specialty: No

MICHAEL T LAM

 4520 EXECUTIVE DR STE
P2

SAN DIEGO, CA 92121


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1578974259

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Mandarin

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERNAL MEDICINE


LAM, MICHAEL

Provider ID: 274411

Board Certified Specialty: No

MICHAEL T LAM

 4168 FRONT ST
SAN DIEGO, CA 92103


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1578974259

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Mandarin

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERNAL MEDICINE


LEVERONE, NICHOLAS

Provider ID: 272692

Board Certified Specialty: No

NICHOLAS A LEVERONE

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1407388564

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERNAL MEDICINE

MAJITHIA, AMIT

D3. Directorio de proveedores especialistas

Provider ID: 255882

Board Certified Specialty: No
AMIT R MAJITHIA

4168 FRONT ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1801091459

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INTERNAL MEDICINE

MARTINEZ, ARMANDO

Provider ID: 291421

Board Certified Specialty: No
ARMANDO R MARTINEZ

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1598261091

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

INTERNAL MEDICINE

MUNCE, DANIELLE

Provider ID: 272577

Board Certified Specialty: No
DANIELLE F MUNCE

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1740644509

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INTERNAL MEDICINE

NOKES, BRANDON

Provider ID: 287582

Board Certified Specialty: No
BRANDON T NOKES

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1487040051

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INTERNAL MEDICINE

SEBASKY, MEGHAN

Provider ID: 273962

Board Certified Specialty: No
MEGHAN M SEBASKY

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (619) 543-6222

Fax: (619) 543-8255

After Hours Phone: (619)
543-6222

Provider Gender: Female

NPI: 1538351408

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON


D3. Directorio de proveedores especialistas

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL): Board Certified Specialty: No
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


INTERNAL MEDICINE

SHAMSINEJAD BABAKI, ARASH


Provider ID: 309544

Board Certified Specialty: No
ARASH SHAMSINEJAD BABAKI

 1666 PRECISION PARK LN
SAN DIEGO, CA 92173


 Phone: (619) 662-4100


Fax: (619) 785-3384

 After Hours Phone: (619)
662-4100

Provider Gender: Male

NPI: 1750498119

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi


Cultural Competency: N


Hospital Affiliation: ST MARYS
MEDICAL CENTER SAN
FRANCISCO


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INTERNAL MEDICINE


SMITH, CHELSEY

Provider ID: 239920

Board Certified Specialty: No
CHELSEY J SMITH


 4168 FRONT ST
SAN DIEGO, CA 92103

 Phone: (858) 657-6110

 After Hours Phone: (858)
657-6110

Provider Gender: Female

NPI: 1013264506

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INTERNAL MEDICINE

TANTISIRA, LALITA

Provider ID: 275926

Board Certified Specialty: No
LALITA K TANTISIRA

 4520 EXECUTIVE DR
SAN DIEGO, CA 92121


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1508874298

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Thai


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERNAL MEDICINE

TANTISIRA, LALITA

Provider ID: 275927

Board Certified Specialty: No
LALITA K TANTISIRA

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1508874298

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Thai


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERNAL MEDICINE

TAYLOR, DAVID

Provider ID: 274469

D3. Directorio de proveedores especialistas

Board Certified Specialty: No
DAVID S TAYLOR

200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1033572995

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INTERNAL MEDICINE

THOMAS, ROBERT

Provider ID: 238929

Board Certified Specialty: Yes
ROBERT L THOMAS III

200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1053765909

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INTERNAL MEDICINE

WANG, ANGELA

Provider ID: 259535

Board Certified Specialty: No
ANGELA C WANG

200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1730133976

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL, UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INTERNAL MEDICINE

WANG, ANGELA

Provider ID: 259534

Board Certified Specialty: No
ANGELA C WANG

4520 EXECUTIVE DR STE
P2

SAN DIEGO, CA 92121
Phone: (855) 355-5864
Fax: (888) 539-8781

After Hours Phone: (855)
355-5864

Provider Gender: Female

NPI: 1730133976

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL, UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INTERNAL MEDICINE

WEBSTER, LUKE

Provider ID: 272681

Board Certified Specialty: No
LUKE A WEBSTER

200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1235660887

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

D3. Directorio de proveedores especialistas

THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL): Provider ID: 283027

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERNAL MEDICINE


YANG, JENNY

Provider ID: 283026

Board Certified Specialty: No

JENNY Z YANG

 4168 FRONT ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1346636453

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP

CORONADO HOSP AND
HEALTHCARE CTR, UCSD


MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERNAL MEDICINE


YANG, JENNY

Board Certified Specialty: No

JENNY Z YANG

 4520 EXECUTIVE DR STE
P2

SAN DIEGO, CA 92121

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1346636453

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR, UCSD
MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERNAL MEDICINE

ZHANG, SHERRY

Provider ID: 272657

Board Certified Specialty: No

SHERRY S ZHANG

 200 W ARBOR DR
SAN DIEGO, CA 92103


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1588198147

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Mandarin

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERNAL MEDICINE

GERIATRIC MEDICINE

AGNIHOTRI, PARAG


Provider ID: 247292

Board Certified Specialty: No

PARAG AGNIHOTRI

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1447351085

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: MERCY
GENERAL HOSPITAL


Medi-Cal Open Panel: Yes


D3. Directorio de proveedores especialistas

Min/Max Age: 0\999

American Sign Language (ASL): Provider ID: 301814

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERVENTIONAL

CARDIOLOGY


CRUZ RODRIGUEZ, JOSE

Provider ID: 300061

Board Certified Specialty: No

JOSE B CRUZ RODRIGUEZ


 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1457770240

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PIONEERS
MEMORIAL HOSPITAL, EL
CENTRO REGIONAL MEDICAL
CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

INTERVENTIONAL


CARDIOLOGY

KINGDON, TYLER

Provider ID: 301814

Board Certified Specialty: No
TYLER C KINGDON

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5855
Fax: (858) 966-7903

 After Hours Phone: (858)
966-5855

Provider Gender: Male

NPI: 1477084283

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:
CHILDRENS HOSPITAL OF
ORANGE COUNTY, RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERVENTIONAL


CARDIOLOGY

MOHAMEDALI, BURHAN

Provider ID: 309250

Board Certified Specialty: No
BURHAN MOHAMEDALI

 412 WASHINGTON ST
SAN DIEGO, CA 92103

 Phone: (619) 616-2100
Fax: (619) 616-2104

 After Hours Phone: (619)
616-2100

Provider Gender: Male

NPI: 1831393289

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Swahili

Cultural Competency: N

Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
Adventist Health and Rideout


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A

INTERVENTIONAL


CARDIOLOGY

MOHAMEDALI, BURHAN

Provider ID: 245577

Board Certified Specialty: No
BURHAN MOHAMEDALI

 292 EUCLID AVE STE 210
SAN DIEGO, CA 92114


 Phone: (619) 616-2100
Fax: (619) 616-2104

 After Hours Phone: (619)
616-2100

Provider Gender: Male

NPI: 1831393289

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Swahili

Cultural Competency: N

Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
Adventist Health and Rideout


Medi-Cal Open Panel: Yes


D3. Directorio de proveedores especialistas

Min/Max Age: 0\999

American Sign Language (ASL): HOSP AND HEALTHCARE CTR

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A

INTERVENTIONAL

CARDIOLOGY

SHEREV, DIMITRI


Provider ID: 302987

Board Certified Specialty: No

DIMITRI A SHEREV

 6402 EL CAJON BLVD STE
102

SAN DIEGO, CA 92115

 Phone: (619) 582-4490


Fax: (619) 582-4737

 After Hours Phone: (619)
582-4490

Provider Gender: Male

NPI: 1154323996

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Bulgarian, Russian,
Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,

GROSSMONT HOSPITAL,

SHARP MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL, ALVARADO

HOSPITAL LLC, SHARP CHULA

VISTA MED CTR, TRI CITY

MEDICAL CTR, TRI CITY

MEDICAL CTR, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, Sharp Grossmont

Hospital, SHARP CORONADO

HOSP AND HEALTHCARE CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A

INTERVENTIONAL


CARDIOLOGY


SUDHAKAR, DEEPTHI

Provider ID: 296050


Board Certified Specialty: No

DEEPTHI SUDHAKAR

 292 EUCLID AVE STE 210
SAN DIEGO, CA 92114


 Phone: (619) 616-2100

Fax: (619) 616-2104

 After Hours Phone: (619)
616-2100

Provider Gender: Female

NPI: 1811307051

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: Sharp

Grossmont Hospital, SHARP

CHULA VISTA MED CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 15\99

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERVENTIONAL

CARDIOLOGY


SUDHAKAR, DEEPTHI

Provider ID: 295844

Board Certified Specialty: No

DEEPTHI SUDHAKAR

 292 EUCLID AVE STE 210
SAN DIEGO, CA 92114

 Phone: (619) 616-2100

Fax: (619) 616-2104

 After Hours Phone: (619)
616-2100

Provider Gender: Female

NPI: 1811307051

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: Sharp

Grossmont Hospital, SHARP

CHULA VISTA MED CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 15\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

INTERVENTIONAL

CARDIOLOGY


SUDHAKAR, DEEPTHI

Provider ID: 309096

Board Certified Specialty: No

DEEPTHI SUDHAKAR

 412 WASHINGTON ST
SAN DIEGO, CA 92103

 Phone: (619) 616-2100

Fax: (619) 616-2104

 After Hours Phone: (619)
616-2100

D3. Directorio de proveedores especialistas

Provider Gender: Female

NPI: 1811307051

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Sharp

Grossmont Hospital, SHARP


CHULA VISTA MED CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 15\99

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

LICENSED PROFESSIONAL CLINICAL COUNSELOR


GARCIA, JENNI

Provider ID: 299310

Board Certified Specialty: No

JENNI GARCIA

 3025 BEYER BLVD
SAN DIEGO, CA 92154


 Phone: (619) 662-4100

Fax: (619) 662-4119

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1437775863

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

LICENSED PROFESSIONAL CLINICAL COUNSELOR

NAKAMURA, TIFFANY


Provider ID: 239584


Board Certified Specialty: No

TIFFANY NAKAMURA

 4510 EXECUTIVE DR STE
315

SAN DIEGO, CA 92121

 Phone: (858) 534-8019

 After Hours Phone: (858)
534-8019

Provider Gender: Female

NPI: 1356846349


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

MATERNAL AND FETAL MEDICINE


ADAMI, REBECCA

Provider ID: 272670

Board Certified Specialty: No

REBECCA R ADAMI

 3003 HEALTH CENTER DR
SAN DIEGO, CA 92123

 Phone: (858) 966-6710

Fax: (858) 966-6711

 After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1992149447

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, SHARP MEMORIAL


HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

MATERNAL AND FETAL MEDICINE


ADAMI, REBECCA

Provider ID: 277179

Board Certified Specialty: No

REBECCA R ADAMI

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-6710

Fax: (858) 966-6711

 After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1992149447

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, SHARP MEMORIAL

D3. Directorio de proveedores especialistas

HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


MATERNAL AND FETAL MEDICINE

EMERUWA, UKACHI

Provider ID: 300010

Board Certified Specialty: No
UKACHI N EMERUWA

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1245627421


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


MATERNAL AND FETAL MEDICINE

EMERUWA, UKACHI

Provider ID: 300012

Board Certified Specialty: No
UKACHI N EMERUWA

 4168 FRONT ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1245627421

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

MATERNAL AND FETAL MEDICINE

EMERUWA, UKACHI

Provider ID: 300011

Board Certified Specialty: No
UKACHI N EMERUWA

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1245627421

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

MATERNAL AND FETAL MEDICINE


LAURENT, LOUISE

Provider ID: 208640

Board Certified Specialty: No
LOUISE C LAURENT

 4168 FRONT ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1770532707

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA
VISTA, SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,
PALOMAR MEDICAL CENTER,


SCRIPPS MEMORIAL
HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

MATERNAL AND FETAL MEDICINE





MCCULLOUGH, DEIRDRE




Provider ID: 277260

Board Certified Specialty: No
DEIRDRE M MCCULLOUGH

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

D3. Directorio de proveedores especialistas




 Phone: (858) 966-6710
 Fax: (858) 966-6711
 After Hours Phone: (858) 966-6710
Provider Gender: Female
NPI: 1639153018
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, Sharp Grossmont Hospital, SHARP MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

MATERNAL AND FETAL MEDICINE

MCCULLOUGH, DEIRDRE




Provider ID: 210034
Board Certified Specialty: No
DEIRDRE M MCCULLOUGH
 3003 HEALTH CENTER DR SAN DIEGO, CA 92123
 Phone: (858) 966-6710
 Fax: (858) 939-4102
 After Hours Phone: (858) 966-6710
Provider Gender: Female
NPI: 1639153018
 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, Sharp Grossmont Hospital, SHARP MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

MATERNAL AND FETAL MEDICINE










MELBER, DORA

Provider ID: 296994
Board Certified Specialty: No
DORA J MELBER
 3003 HEALTH CENTER DR SAN DIEGO, CA 92123
 Phone: (858) 966-6710
 Fax: (858) 939-4102
 After Hours Phone: (858) 966-6710
Provider Gender: Female
NPI: 1124413026
 Provider English Spoken: Y
 Provider Language(s) Spoken: Hungarian, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes

Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

MATERNAL AND FETAL MEDICINE

MELBER, DORA

Provider ID: 296990
Board Certified Specialty: No
DORA J MELBER
 3020 CHILDRENS WAY SAN DIEGO, CA 92123
 Phone: (858) 966-6710
 Fax: (858) 966-6711
 After Hours Phone: (858) 966-6710
Provider Gender: Female
NPI: 1124413026
 Provider English Spoken: Y
 Provider Language(s) Spoken: Hungarian, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

D3. Directorio de proveedores especialistas

MATERNAL AND FETAL MEDICINE

MELBER, DORA

Provider ID: 296989

Board Certified Specialty: No
DORA J MELBER

7910 FROST ST STE 430
SAN DIEGO, CA 92123

Phone: (858) 966-6710
Fax: (858) 966-6711

After Hours Phone: (858)
966-6710

Provider Gender: Female
NPI: 1124413026

Provider English Spoken: Y
Provider Language(s)
Spoken: Hungarian, Spanish
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

MATERNAL AND FETAL MEDICINE

MELBER, DORA

Provider ID: 296998

Board Certified Specialty: No
DORA J MELBER

7910 FROST ST STE 220
SAN DIEGO, CA 92123

Phone: (858) 966-6710
After Hours Phone: (858)
966-6710

Provider Gender: Female
NPI: 1124413026

Provider English Spoken: Y
Provider Language(s)
Spoken: Hungarian, Spanish
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

MATERNAL AND FETAL MEDICINE

MOORE, THOMAS

Provider ID: 208643

Board Certified Specialty: No
THOMAS R MOORE

4168 FRONT ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273
After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1184682379

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, SCRIPPS
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

MATERNAL AND FETAL MEDICINE

MOORE, THOMAS

Provider ID: 208644

Board Certified Specialty: No
THOMAS R MOORE

4910 DIRECTORS PL STE
200
SAN DIEGO, CA 92121

Phone: (800) 926-8273
After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1184682379

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, SCRIPPS
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 16\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

MATERNAL AND FETAL MEDICINE

REIMERS, REBECCA

D3. Directorio de proveedores especialistas

Provider ID: 294648
Board Certified Specialty: No
REBECCA M REIMERS

7910 FROST ST STE 220
SAN DIEGO, CA 92123

Phone: (858) 966-6710
Fax: (858) 966-6711

After Hours Phone: (858)
966-6710

Provider Gender: Female
NPI: 1801207634

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

MATERNAL AND FETAL MEDICINE

REIMERS, REBECCA

Provider ID: 294647
Board Certified Specialty: Yes
REBECCA M REIMERS

3003 HEALTH CENTER DR
SAN DIEGO, CA 92123

Phone: (858) 966-6710
Fax: (858) 939-4102

After Hours Phone: (858)
966-6710

Provider Gender: Female
NPI: 1801207634

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

MATERNAL AND FETAL MEDICINE

RICHARDSON, ALVIE

Provider ID: 214436
Board Certified Specialty: No
ALVIE C RICHARDSON

3003 HEALTH CENTER DR
SAN DIEGO, CA 92123

Phone: (858) 966-6710
Fax: (858) 939-4102

After Hours Phone: (858)
966-6710

Provider Gender: Male
NPI: 1154305977

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, RADY
CHILDRENS HOSPITAL SAN

DIEGO, Sharp Grossmont
Hospital

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

MATERNAL AND FETAL MEDICINE

RICHARDSON, ALVIE

Provider ID: 277314
Board Certified Specialty: No
ALVIE C RICHARDSON

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-6710
Fax: (858) 966-6711

After Hours Phone: (858)
966-6710

Provider Gender: Male
NPI: 1154305977

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, RADY
CHILDRENS HOSPITAL SAN

DIEGO, Sharp Grossmont
Hospital

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

MATERNAL AND FETAL MEDICINE

SCHWENDEMANN, WADE

Provider ID: 277304
Board Certified Specialty: No
WADE D SCHWENDEMANN

3020 CHILDRENS WAY

D3. Directorio de proveedores especialistas

SAN DIEGO, CA 92123
☎ Phone: (858) 966-6710
Fax: (858) 966-6711
🕒 After Hours Phone: (858) 966-6710
Provider Gender: Male
NPI: 1477563302
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, TRI CITY MEDICAL CTR, Sharp Grossmont Hospital, Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

MATERNAL AND FETAL MEDICINE

SCHWENDEMANN, WADE

Provider ID: 277307
Board Certified Specialty: No
WADE D SCHWENDEMANN
📍 3003 HEALTH CENTER DR SAN DIEGO, CA 92123
☎ Phone: (858) 966-6710
Fax: (858) 939-4102
🕒 After Hours Phone: (858)

966-6710
Provider Gender: Male
NPI: 1477563302
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, TRI CITY MEDICAL CTR, Sharp Grossmont Hospital, Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

MATERNAL AND FETAL MEDICINE

SHANNON, KELLI

Provider ID: 208474
Board Certified Specialty: No
KELLI K SHANNON
📍 3003 HEALTH CENTER DR SAN DIEGO, CA 92123
☎ Phone: (858) 966-6710
Fax: (858) 966-6711
🕒 After Hours Phone: (858) 966-6710
Provider Gender: Female
NPI: 1922156397
🗣 Provider English Spoken: Y

Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F 8:00AM-5:00PM
🌐 Website: N/A

MATERNAL AND FETAL MEDICINE

WESTERMANN, MELISSA

Provider ID: 287084
Board Certified Specialty: No
MELISSA L WESTERMANN
📍 7910 FROST ST STE 220 SAN DIEGO, CA 92123
☎ Phone: (858) 966-6710
Fax: (858) 966-6711
🕒 After Hours Phone: (858) 966-6710
Provider Gender: Female
NPI: 1760730758
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, EARL AND LORRAINE MILLER CHILDRENS HSP, LONG BEACH MEMORIAL MED CTR, UNIVERSITY OF CALIFORNIA IRVINE MED CTR, SHARP MEMORIAL HOSPITAL, GROSSMONT HOSPITAL,

D3. Directorio de proveedores especialistas

Sharp Grossmont Hospital,


Sharp Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

MATERNAL AND FETAL

MEDICINE


WESTERMANN, MELISSA

Provider ID: 242522

Board Certified Specialty: No

MELISSA L WESTERMANN

 3003 HEALTH CENTER DR
SAN DIEGO, CA 92123

 Phone: (858) 966-6710

Fax: (858) 939-4102

 After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1760730758

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP
MARY BIRCH HOSP FOR

WOMEN AND NEWBORNS,
EARL AND LORRAINE MILLER

CHILDRENS HSP, LONG
BEACH MEMORIAL MED CTR,

UNIVERSITY OF CALIFORNIA
IRVINE MED CTR, SHARP

MEMORIAL HOSPITAL,
GROSSMONT HOSPITAL,

Sharp Grossmont Hospital,
Sharp Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19


American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

MATERNAL AND FETAL

MEDICINE


WESTERMANN, MELISSA

Provider ID: 277353

Board Certified Specialty: No

MELISSA L WESTERMANN

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-6710

Fax: (858) 966-6711

 After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1760730758

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SHARP

MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,

EARL AND LORRAINE MILLER
CHILDRENS HSP, LONG

BEACH MEMORIAL MED CTR,
UNIVERSITY OF CALIFORNIA

IRVINE MED CTR, SHARP
MEMORIAL HOSPITAL,

GROSSMONT HOSPITAL,
Sharp Grossmont Hospital,

Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

MATERNAL AND FETAL

MEDICINE


WILLIAMS, KRISTIN

Provider ID: 277383

Board Certified Specialty: No

KRISTIN M WILLIAMS

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-6710

Fax: (858) 966-6711

 After Hours Phone: (858)
966-6710

Provider Gender: Female

NPI: 1992847131

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Stanford
Health Care, LUCILE SALTER

PACKARD CHILDRENS HOSP,
SAN MATEO MEDICAL CTR,

SHARP MEMORIAL HOSPITAL,
SHARP MARY BIRCH HOSP

FOR WOMEN AND
NEWBORNS, TRI CITY

MEDICAL CTR, CALIFORNIA
PACIFIC MED CTR,


CALIFORNIA PACIFIC MED
CTR, RADY CHILDRENS

HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

D3. Directorio de proveedores especialistas

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


MATERNAL AND FETAL MEDICINE

WILLIAMS, KRISTIN

Provider ID: 277387

Board Certified Specialty: No
KRISTIN M WILLIAMS

 3003 HEALTH CENTER DR
SAN DIEGO, CA 92123

 Phone: (858) 966-6710

Fax: (858) 966-6711

 After Hours Phone: (858)
966-6710

Provider Gender: Female


NPI: 1992847131


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Stanford
Health Care, LUCILE SALTER
PACKARD CHILDRENS HOSP,
SAN MATEO MEDICAL CTR,
SHARP MEMORIAL HOSPITAL,
SHARP MARY BIRCH HOSP
FOR WOMEN AND
NEWBORNS, TRI CITY
MEDICAL CTR, CALIFORNIA
PACIFIC MED CTR,
CALIFORNIA PACIFIC MED
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

MATERNAL AND FETAL MEDICINE

WOLF, RICHARD


Provider ID: 209253

Board Certified Specialty: No
RICHARD B WOLF

 4910 DIRECTORS PL STE
200

SAN DIEGO, CA 92121

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1497713846

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, PALOMAR
MEDICAL CENTER, UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON,
UCSD LA JOLLA JOHN SALLY
THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

NEONATAL / PERINATAL


MEDICINE


BAI-TONG, SHIYU

Provider ID: 283285

Board Certified Specialty: No
SHIYU S BAI-TONG

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5818

 After Hours Phone: (858)
966-5818

Provider Gender: Female

NPI: 1528454188


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEONATAL / PERINATAL MEDICINE

CARROLL, JEANNE


Provider ID: 205727

Board Certified Specialty: Yes
JEANNE M CARROLL

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5818

Fax: (858) 966-7483

 After Hours Phone: (858)
966-5818

Provider Gender: Female

NPI: 1386928224

D3. Directorio de proveedores especialistas

 *Provider English Spoken: Y*
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

 *Hours: M-F*
8:00AM-5:00PM

 *Website: N/A*


NEONATAL / PERINATAL **MEDICINE**


DELROSARIO, PAMELA

Provider ID: 295000

Board Certified Specialty: No
PAMELA G DELROSARIO

 *3010 CHILDRENS WAY FL 3*
SAN DIEGO, CA 92123

 *Phone: (858) 966-5888*

 *After Hours Phone: (858)*
966-5888

Provider Gender: Female

NPI: 1952691941

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

 *Hours: M-F*

8:00AM-5:00PM

 *Website: N/A*


NEONATAL / PERINATAL **MEDICINE**

FLEMING, SARAH


Provider ID: 205645

Board Certified Specialty: No
SARAH E FLEMING

 *4077 5TH AVE*
SAN DIEGO, CA 92103

 *Phone: (619) 260-7046*

Fax: (619) 686-3843

 *After Hours Phone: (619)*
260-7046

Provider Gender: Female

NPI: 1679809826

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS


MERCY HOSPITAL CHULA
VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

 *Hours: M-F*
8:00AM-5:00PM

 *Website: N/A*


NEONATAL / PERINATAL **MEDICINE**

GLENN, TARA

Provider ID: 283159

Board Certified Specialty: No
TARA JACKSON GLENN

 *3020 CHILDRENS WAY*
SAN DIEGO, CA 92123

 *Phone: (858) 966-5818*
Fax: (858) 966-7483

 *After Hours Phone: (858)*
966-5818

Provider Gender: Female

NPI: 1992060974

 *Provider English Spoken: Y*
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

 *Hours: M-F*
8:00AM-5:00PM

 *Website: N/A*


NEONATAL / PERINATAL **MEDICINE**

HIETALATI, SAMANTHA

Provider ID: 294251

Board Certified Specialty: Yes
SAMANTHA M HIETALATI

 *3010 CHILDRENS WAY FL 3*
SAN DIEGO, CA 92123

 *Phone: (858) 966-5888*

Fax: (858) 249-5839

 *After Hours Phone: (858)*
966-5888

Provider Gender: Female

NPI: 1245617489

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes


D3. Directorio de proveedores especialistas

Min/Max Age: 0\19

American Sign Language (ASL): American Sign Language (ASL): N

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

Min/Max Age: 0\19

American Sign Language (ASL): American Sign Language (ASL): N

N

 Accessibility: CONTACT PROVIDER


 Hours: M-F
8:00AM-5:00PM

 Website: N/A

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

NEONATAL / PERINATAL MEDICINE


HONOLD, JOSE

Provider ID: 205941

Board Certified Specialty: No

JOSE A HONOLD

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5818

Fax: (858) 966-7483

 After Hours Phone: (858)
966-5818

Provider Gender: Male

NPI: 1093886855

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, PIONEERS MEMORIAL

HOSPITAL, SOUTHWEST
HEALTHCARE INLAND VALLEY

HOSPITAL, SOUTHWEST

HEALTHCARE RANCHO

SPRINGS HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, EL CENTRO REGIONAL

MEDICAL CENTER, SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL

Medi-Cal Open Panel: Yes

NEONATAL / PERINATAL MEDICINE


HONOLD, JOSE


Provider ID: 242881

Board Certified Specialty: No

JOSE A HONOLD

 4077 5TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 691-7000

 After Hours Phone: (619)
691-7000

Provider Gender: Male

NPI: 1093886855

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, PIONEERS MEMORIAL

HOSPITAL, SOUTHWEST
HEALTHCARE INLAND VALLEY

HOSPITAL, SOUTHWEST

HEALTHCARE RANCHO

SPRINGS HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, EL CENTRO REGIONAL

MEDICAL CENTER, SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

NEONATAL / PERINATAL MEDICINE


LANE, BRIAN

Provider ID: 205707

Board Certified Specialty: No

BRIAN P LANE

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5818

Fax: (858) 966-7483

 After Hours Phone: (858)
966-5818

Provider Gender: Male

NPI: 1427129287

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,
SCRIPPS MEMORIAL

HOSPITAL, SHARP CHULA

VISTA MED CTR, SOUTHWEST
HEALTHCARE INLAND VALLEY

HOSPITAL, SOUTHWEST

HEALTHCARE RANCHO

SPRINGS HOSPITAL, SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL, SCRIPPS


MERCY HOSPITAL CHULA


VISTA


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

D3. Directorio de proveedores especialistas

American Sign Language (ASL): 8:00AM-5:00PM
N  Website: N/A

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEONATAL / PERINATAL MEDICINE

LE, CRYSTAL

Provider ID: 205630

Board Certified Specialty: No
CRYSTAL N LE

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5818
Fax: (858) 966-7483

 After Hours Phone: (858)
966-5818

Provider Gender: Female

NPI: 1003028416

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SOUTHWEST

HEALTHCARE INLAND VALLEY
HOSPITAL, SOUTHWEST

HEALTHCARE RANCHO
SPRINGS HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL


HOSPITAL ENCINITAS

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F


NEONATAL / PERINATAL MEDICINE

MARC-AURELE, KRISHELLE


Provider ID: 206210

Board Certified Specialty: No
KRISHELLE L MARC-AURELE

 3030 CHILDRENS WAY FL
2

SAN DIEGO, CA 92123
 Phone: (858) 966-8022

Fax: (858) 966-8457

 After Hours Phone: (858)
966-8022

Provider Gender: Female

NPI: 1952503435

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,

UCSD LA JOLLA JOHN SALLY
THORNTON, TRI CITY

MEDICAL CTR, SCRIPPS
MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEONATAL / PERINATAL MEDICINE

MARC-AURELE, KRISHELLE

Provider ID: 206208

Board Certified Specialty: No
KRISHELLE L MARC-AURELE

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5818
Fax: (858) 966-7483

 After Hours Phone: (858)
966-5818

Provider Gender: Female

NPI: 1952503435

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,

UCSD LA JOLLA JOHN SALLY
THORNTON, TRI CITY

MEDICAL CTR, SCRIPPS
MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


NEONATAL / PERINATAL MEDICINE


MARC-AURELE, KRISHELLE


Provider ID: 206206

Board Certified Specialty: No
KRISHELLE L MARC-AURELE

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (619) 543-3812

 After Hours Phone: (800)
926-8273

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,

D3. Directorio de proveedores especialistas

Provider Gender: Female

NPI: 1952503435

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
UCSD LA JOLLA JOHN SALLY
THORNTON, TRI CITY
MEDICAL CTR, SCRIPPS
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEONATAL / PERINATAL MEDICINE

MATOBA, NANA

Provider ID: 297975

Board Certified Specialty: No
NANA MATOBA

 4077 5TH AVE
SAN DIEGO, CA 92103



 Phone: (619) 260-7046

Fax: (619) 686-3843

 After Hours Phone: (619)
260-7046

Provider Gender: Female

NPI: 1801952197

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Japanese
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN


DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEONATAL / PERINATAL MEDICINE

MATOBA, NANA

Provider ID: 297974

Board Certified Specialty: No
NANA MATOBA

 3010 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123

 Phone: (858) 966-5888

Fax: (858) 249-5839

 After Hours Phone: (858)
966-5888

Provider Gender: Female

NPI: 1801952197

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Japanese
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEONATAL / PERINATAL MEDICINE

MATOBA, NANA

Provider ID: 299894

Board Certified Specialty: No
NANA MATOBA

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5888

Fax: (858) 966-7483

 After Hours Phone: (858)
966-5888

Provider Gender: Female

NPI: 1801952197

 Provider English Spoken: Y
 Provider Language(s)


Spoken: Japanese
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEONATAL / PERINATAL MEDICINE

MCCULLEY, DAVID

Provider ID: 277177

Board Certified Specialty: No
DAVID J MCCULLEY

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5818

Fax: (858) 966-7483

D3. Directorio de proveedores especialistas

 After Hours Phone: (858) 966-5818

Provider Gender: Male


NPI: 1235304155


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEONATAL / PERINATAL MEDICINE


MESTAN, KAREN

Provider ID: 285932

Board Certified Specialty: No
KAREN K MESTAN

 3010 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123

 Phone: (858) 966-5888

 After Hours Phone: (858)
966-5888

Provider Gender: Female

NPI: 1942253356

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEONATAL / PERINATAL MEDICINE

NIEMI, ANNA-KAISA

Provider ID: 262157

Board Certified Specialty: No
ANNA-KAISA NIEMI

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123


 Phone: (858) 966-5818


Fax: (858) 966-7483

 After Hours Phone: (858)
966-5818

Provider Gender: Female

NPI: 1497941397

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Finnish, French,
German, Spanish, Swedish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
SCRIPPS MERCY HOSPITAL


CHULA VISTA, SCRIPPS
MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEONATAL / PERINATAL MEDICINE


NIEMI, ANNA-KAISA

Provider ID: 262158

Board Certified Specialty: No
ANNA-KAISA NIEMI

 4077 5TH AVE
SAN DIEGO, CA 92103


 Phone: (619) 260-7107

 After Hours Phone: (619)
260-7107

Provider Gender: Female

NPI: 1497941397

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Finnish, French,
German, Spanish, Swedish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
SCRIPPS MERCY HOSPITAL


CHULA VISTA, SCRIPPS
MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEONATAL / PERINATAL MEDICINE

NYMAN, KATHERINE

Provider ID: 301822

Board Certified Specialty: No
KATHERINE N NYMAN

 4077 5TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 260-7046


Fax: (619) 686-3843

D3. Directorio de proveedores especialistas

 After Hours Phone: (619) 260-7046

Provider Gender: Female

NPI: 1003260951

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8:00AM-5:00PM

 Website: N/A


NEONATAL / PERINATAL MEDICINE

NYMAN, KATHERINE

Provider ID: 301819

Board Certified Specialty: No
KATHERINE N NYMAN


 3010 CHILDRENS WAY FL 3 SAN DIEGO, CA 92123


 Phone: (858) 966-5888
Fax: (858) 249-5839

 After Hours Phone: (858) 966-5888

Provider Gender: Female

NPI: 1003260951

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

 Hours: M-F 8:00AM-5:00PM

 Website: N/A


NEONATAL / PERINATAL MEDICINE

ODONNELL, F

Provider ID: 205578

Board Certified Specialty: No
F D ODONNELL


 3020 CHILDRENS WAY SAN DIEGO, CA 92123

 Phone: (858) 966-5818
Fax: (858) 966-7483

 After Hours Phone: (858) 966-5818

Provider Gender: Female

NPI: 1477625325

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:

SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8:00AM-5:00PM

 Website: N/A


NEONATAL / PERINATAL MEDICINE

RAMOS, CARLOS

Provider ID: 206060

Board Certified Specialty: No
CARLOS G RAMOS

 200 W ARBOR DR SAN DIEGO, CA 92103

 Phone: (619) 543-3759
Fax: (619) 543-3812

 After Hours Phone: (619) 543-3759

Provider Gender: Male

NPI: 1205047545

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD MEDICAL CTR, EL CENTRO REGIONAL MEDICAL CENTER, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD LA JOLLA JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

 Hours: M-F 8:00AM-5:00PM

D3. Directorio de proveedores especialistas

 Website: N/A


NEONATAL / PERINATAL MEDICINE

SAJTI, ENIKO

Provider ID: 206171

Board Certified Specialty: No
ENIKO C SAJTI

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (619) 543-3759

Fax: (619) 543-3812

 After Hours Phone: (619)
543-3759

Provider Gender: Female

NPI: 1649433103

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSF
BENIOFF CHILDREN'S
HOSPITAL OAKLAND, RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEONATAL / PERINATAL MEDICINE


SAUER, CHARLES

Provider ID: 303906

Board Certified Specialty: No
CHARLES W SAUER

 4077 5TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 260-7046

 After Hours Phone: (619)
260-7046

Provider Gender: Male

NPI: 1538388988

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
PALOMAR MEDICAL CENTER,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, PALOMAR
HEALTH, SCRIPPS MEMORIAL
HOSPITAL, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEONATAL / PERINATAL MEDICINE

SAUER, CHARLES

Provider ID: 303904

Board Certified Specialty: No
CHARLES W SAUER

 3010 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123

 Phone: (858) 966-5888

Fax: (858) 249-5839

 After Hours Phone: (858)
966-5888

Provider Gender: Male

NPI: 1538388988

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS,
PALOMAR MEDICAL CENTER,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, PALOMAR
HEALTH, SCRIPPS MEMORIAL
HOSPITAL, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

NEONATAL / PERINATAL MEDICINE




SONG, RICHARD

Provider ID: 206143

Board Certified Specialty: No
RICHARD S SONG



 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

D3. Directorio de proveedores especialistas




 Phone: (858) 966-5818
 Fax: (858) 966-7483
 After Hours Phone: (858) 966-5818
Provider Gender: Male
NPI: 1881893477
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR HEALTH, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, PALOMAR MEDICAL CENTER, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

NEONATAL / PERINATAL MEDICINE

SPEZIALE, MARK



Provider ID: 206126
Board Certified Specialty: No
MARK V SPEZIALE
 3020 CHILDRENS WAY SAN DIEGO, CA 92123
 Phone: (858) 966-5888

 Fax: (858) 966-7483
 After Hours Phone: (858) 966-5888
Provider Gender: Male
NPI: 1801978143
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SCRIPPS MERCY HOSPITAL, UCSD MEDICAL CTR, UCSD MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N




 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

NEONATAL / PERINATAL MEDICINE

SUTTNER, DENISE



Provider ID: 265085
Board Certified Specialty: No
DENISE M SUTTNER
 3020 CHILDRENS WAY SAN DIEGO, CA 92123
 Phone: (858) 966-5818
Fax: (858) 966-7483

 After Hours Phone: (858) 966-5818
Provider Gender: Female
NPI: 1457433799
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

NEONATAL / PERINATAL MEDICINE

SWEENEY, NATHALY

Provider ID: 206182
Board Certified Specialty: No
NATHALY M SWEENEY
 3020 CHILDRENS WAY SAN DIEGO, CA 92123
 Phone: (858) 966-5818
Fax: (858) 966-7483

D3. Directorio de proveedores especialistas

☎ After Hours Phone: (858) 966-5818

Provider Gender: Female

NPI: 1164572632

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, RADY

CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8:00AM-5:00PM

🌐 Website: N/A

NEONATAL / PERINATAL MEDICINE

VOLLER, STEPHANNIE

Provider ID: 303807

Board Certified Specialty: No STEPHANNIE M VOLLER

📍 8001 FROST ST SAN DIEGO, CA 92123

☎ Phone: (858) 966-8052

Fax: (858) 966-7789

☎ After Hours Phone: (858) 966-8052

Provider Gender: Female

NPI: 1417121971

☑ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8:00AM-5:00PM

🌐 Website: N/A

NEONATAL / PERINATAL MEDICINE

VOLLER, STEPHANNIE

Provider ID: 303808

Board Certified Specialty: No STEPHANNIE M VOLLER

📍 3010 CHILDRENS WAY FL 3 SAN DIEGO, CA 92123

☎ Phone: (858) 966-5888

Fax: (858) 249-5839

☎ After Hours Phone: (858) 966-5888

Provider Gender: Female

NPI: 1417121971

☑ Provider English Spoken: Y Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8:00AM-5:00PM

🌐 Website: N/A

NEONATAL / PERINATAL MEDICINE

VOLLER, STEPHANNIE

Provider ID: 303806

Board Certified Specialty: No STEPHANNIE M VOLLER

📍 3020 CHILDRENS WAY SAN DIEGO, CA 92123

☎ Phone: (858) 966-5888

Fax: (858) 966-7483

☎ After Hours Phone: (858) 966-5888

Provider Gender: Female

NPI: 1417121971

☑ Provider English Spoken: Y Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8:00AM-5:00PM

🌐 Website: N/A

NEONATAL / PERINATAL MEDICINE

WEISS, KATHERINE

Provider ID: 264677

Board Certified Specialty: No KATHERINE J WEISS

📍 3020 CHILDRENS WAY SAN DIEGO, CA 92123

☎ Phone: (858) 966-5818

Fax: (858) 966-7483

☎ After Hours Phone: (858) 966-5818

Provider Gender: Female

NPI: 1053541862

☑ Provider English Spoken: Y


☑ Provider Language(s)

D3. Directorio de proveedores especialistas

Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*


NEONATAL / PERINATAL MEDICINE

WEST, JULIE

Provider ID: 297073

Board Certified Specialty: No
JULIE E WEST

 3010 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123

 *Phone: (858) 966-5888*

Fax: (858) 249-5839

 *After Hours Phone: (858) 966-5888*

Provider Gender: Female

NPI: 1811151848

 *Provider English Spoken: Y*
Cultural Competency: N


Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8:00AM-5:00PM*

 *Website: N/A*


NEPHROLOGY

BALBOA NEPHROLOGY MED GRP INC,

Provider ID: 308472

BALBOA NEPHROLOGY MED GRP INC

 8010 FROST ST STE 100
SAN DIEGO, CA 92123

 *Phone: (858) 637-4700*

Fax: (858) 637-4701

 *After Hours Phone: (858) 637-4700*

NPI: 1316997505


 *Provider English Spoken: Y*
Cultural Competency: N

Medi-Cal Open Panel: No

Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 9:00AM-5:00PM*

 *Website: www.balboacare.com*

NEPHROLOGY


QUEVEDO, JUAN

Provider ID: 269998


Board Certified Specialty: No
JUAN M QUEVEDO

 995 GATEWAY CENTER
WAY STE 207

SAN DIEGO, CA 92102


 *Phone: (619) 263-9729*

Fax: (619) 263-9730

 *After Hours Phone: (619) 263-9729*

Provider Gender: Male

NPI: 1093902496

 *Provider English Spoken: Y*

 *Provider Language(s)*
Spoken: Spanish


Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, RIVERSIDE COMMUNITY HOSP

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 9:00AM-5:00PM*

 *Website: N/A*


NEPHROLOGY

SHAH, MITA

Provider ID: 262230

Board Certified Specialty: No
MITA M SHAH

 8010 FROST ST STE 510
SAN DIEGO, CA 92123

 *Phone: (858) 637-4700*

Fax: (858) 637-4701

 *After Hours Phone: (858) 637-4700*

Provider Gender: Female

NPI: 1194773010

 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

D3. Directorio de proveedores especialistas

 Website: N/A


NEPHROLOGY

ZHONG, YAN

Provider ID: 296054

Board Certified Specialty: No
YAN ZHONG

 4060 4TH AVE STE 220
SAN DIEGO, CA 92103


 Phone: (619) 299-2350

Fax: (619) 297-8379

 After Hours Phone: (619)
299-2350

Provider Gender: Female

NPI: 1467683540

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese, Mandarin

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, LAC RANCHO

LOS AMIGOS NATIONAL

REHAB CENTER, SCRIPPS

MERCY HOSPITAL, SHARP

CORONADO HOSP AND

HEALTHCARE CTR, KECK

HOSPITAL OF USC, Los Angeles

General Medical Center,

SELECT SPECIALTY HOSPITAL

SAN DIEGO, SELECT

SPECIALTY HOSPITAL SAN

DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEPHROLOGY

ZHONG, YAN

Provider ID: 296053

Board Certified Specialty: No
YAN ZHONG

 4060 4TH AVE STE 220
SAN DIEGO, CA 92103


 Phone: (619) 299-2350

Fax: (619) 297-8379

 After Hours Phone: (619)
299-2350

Provider Gender: Female

NPI: 1467683540

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese, Mandarin

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, LAC RANCHO

LOS AMIGOS NATIONAL

REHAB CENTER, SCRIPPS

MERCY HOSPITAL, SHARP

CORONADO HOSP AND

HEALTHCARE CTR, KECK

HOSPITAL OF USC, Los Angeles

General Medical Center,

SELECT SPECIALTY HOSPITAL

SAN DIEGO, SELECT

SPECIALTY HOSPITAL SAN

DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

NEUROLOGY


BEVINS, ELIZABETH


Provider ID: 241943

Board Certified Specialty: No
ELIZABETH A BEVINS

 4510 EXECUTIVE DR STE
325

SAN DIEGO, CA 92121

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1013395151

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEUROLOGY

BUI, JONATHAN

Provider ID: 206005

Board Certified Specialty: No
JONATHAN D BUI

 8001 FROST ST
SAN DIEGO, CA 92123

 Phone: (858) 966-5999

Fax: (858) 966-4930

 After Hours Phone: (858)
966-5999




Provider Gender: Male

NPI: 1730247974

 Provider English Spoken: Y




D3. Directorio de proveedores especialistas

 *Provider Language(s)*
Spoken: Spanish,
Vietnamese
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N


 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

NEUROLOGY

BUI, JONATHAN



Provider ID: 303227
Board Certified Specialty: No
JONATHAN D BUI
 3030 CHILDRENS WAY FL
4
SAN DIEGO, CA 92123
 *Phone: (858) 966-5819*
Fax: (858) 966-4930
 *After Hours Phone: (858)*
966-5819
Provider Gender: Male
NPI: 1730247974


 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish,
Vietnamese
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):

N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*




NEUROLOGY

COUGHLIN, DAVID

Provider ID: 240951
Board Certified Specialty: No
DAVID G COUGHLIN
 200 W ARBOR DR
SAN DIEGO, CA 92103
 *Phone: (800) 926-8273*
 *After Hours Phone: (800)*
926-8273
Provider Gender: Male
NPI: 1740543784

 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N


 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*



NEUROLOGY

COUGHLIN, DAVID

Provider ID: 304172
Board Certified Specialty: No
DAVID G COUGHLIN
 6655 ALVARADO RD
SAN DIEGO, CA 92120
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800)*
926-8273

Provider Gender: Male
NPI: 1740543784

 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N


 *Accessibility: CONTACT*
PROVIDER
 *Website: N/A*




NEUROLOGY

COUGHLIN, DAVID

Provider ID: 240949
Board Certified Specialty: Yes
DAVID G COUGHLIN
 4510 EXECUTIVE DR STE
325
SAN DIEGO, CA 92121
 *Phone: (800) 926-8273*
 *After Hours Phone: (800)*
926-8273

Provider Gender: Male
NPI: 1740543784

 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

NEUROLOGY

DOVE, KATHERINE

Provider ID: 302784
Board Certified Specialty: No

D3. Directorio de proveedores especialistas

KATHERINE M DOVE

3030 CHILDRENS WAY FL 4
SAN DIEGO, CA 92123
Phone: (858) 966-5819
Fax: (858) 966-4930
After Hours Phone: (858) 966-5819

Provider Gender: Female
NPI: 1033642574

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

NEUROLOGY

DUNN-PIRIO, ANASTASIE

Provider ID: 304160
Board Certified Specialty: No
ANASTASIE M DUNN-PIRIO
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1700177136

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

NEUROLOGY

DUNN-PIRIO, ANASTASIE

Provider ID: 203235
Board Certified Specialty: No
ANASTASIE M DUNN-PIRIO
200 W ARBOR DR FL 1
SAN DIEGO, CA 92103
Phone: (619) 543-3500
Fax: (888) 539-8781

After Hours Phone: (619) 543-3500
Provider Gender: Female
NPI: 1700177136
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

NEUROLOGY

FREDERICK, ALIYA

Provider ID: 283152
Board Certified Specialty: Yes
ALIYA L FREDERICK
3020 CHILDRENS WAY

SAN DIEGO, CA 92123
Phone: (858) 966-5999
Fax: (858) 576-8412
After Hours Phone: (858) 966-5999
Provider Gender: Female
NPI: 1548657992
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

NEUROLOGY

GOLD, JEFFREY

Provider ID: 303287
Board Certified Specialty: No
JEFFREY J GOLD
3030 CHILDRENS WAY FL 4
SAN DIEGO, CA 92123
Phone: (858) 966-5819
Fax: (858) 966-4930

After Hours Phone: (858) 966-5819
Provider Gender: Male
NPI: 1568773984
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN


D3. Directorio de proveedores especialistas

DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND, SHARP MEMORIAL
HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEUROLOGY

GOLD, JEFFREY

Provider ID: 283335

Board Certified Specialty: No
JEFFREY J GOLD

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5999

Fax: (858) 576-8412

 After Hours Phone: (858)
966-5999

Provider Gender: Male

NPI: 1568773984


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF

CHILDREN'S HOSPITAL
OAKLAND, SHARP MEMORIAL
HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

NEUROLOGY


GUIDO-ESTRADA, NATALIE

Provider ID: 303271

Board Certified Specialty: No
NATALIE M GUIDO-ESTRADA

 3030 CHILDRENS WAY FL
4

SAN DIEGO, CA 92123

 Phone: (858) 966-5819

Fax: (858) 966-4930

 After Hours Phone: (858)
966-5819

Provider Gender: Female

NPI: 1528353521

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEUROLOGY

GUNDOGDU, MELEK

Provider ID: 201623

Board Certified Specialty: No
MELEK B GUNDOGDU

 200 W ARBOR DR FL 1
SAN DIEGO, CA 92103

 Phone: (619) 543-3500


 After Hours Phone: (619)

543-3500

Provider Gender: Female

NPI: 1437253671

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Turkish

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEUROLOGY

HANNAWI, ANDREW

Provider ID: 283154

Board Certified Specialty: Yes
ANDREW P HANNAWI

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5999

Fax: (858) 576-8412

 After Hours Phone: (858)
966-5999

Provider Gender: Male

NPI: 1194179135

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

DIEGO, UCSD LA JOLLA JOHN
SALLY THORNTON, UCSD

MEDICAL CTR

D3. Directorio de proveedores especialistas


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

NEUROLOGY

IRAGUIMADOZ, VICENTE

Provider ID: 304154

Board Certified Specialty: No
VICENTE J IRAGUIMADOZ

 6655 ALVARADO RD
SAN DIEGO, CA 92120


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1053326710

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

NEUROLOGY


KHAMISHON, BORIS


Provider ID: 269923

Board Certified Specialty: No
BORIS KHAMISHON

 6699 ALVARADO RD STE
2301


SAN DIEGO, CA 92120


 Phone: (619) 582-2595

 After Hours Phone: (619)
582-2595

Provider Gender: Male

NPI: 1104922038

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Russian

Cultural Competency: N

Hospital Affiliation: ALVARADO
HOSPITAL LLC


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH
8:00AM-4:00PM
F 8:00AM-3:00PM

 Website: N/A

NEUROLOGY


KIMMCMANUS, OLIVIA

Provider ID: 303229

Board Certified Specialty: No
OLIVIA S KIMMCMANUS

 3030 CHILDRENS WAY FL
4

SAN DIEGO, CA 92123


 Phone: (858) 966-5819

Fax: (858) 966-4930

 After Hours Phone: (858)
966-5819

Provider Gender: Female

NPI: 1174870067

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:

UNIVERSITY OF CALIFORNIA
IRVINE MED CTR, CHILDRENS
HOSPITAL OF ORANGE
COUNTY, RADY CHILDRENS
HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

NEUROLOGY


LAVERTY, CHAMINDRA

Provider ID: 303258

Board Certified Specialty: No
CHAMINDRA G LAVERTY

 3030 CHILDRENS WAY FL
4

SAN DIEGO, CA 92123

 Phone: (858) 966-5819

Fax: (858) 966-4930

 After Hours Phone: (858)
966-5819

Provider Gender: Female

NPI: 1538320395

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

D3. Directorio de proveedores especialistas

8:00AM-5:00PM
Website: N/A

NEUROLOGY

LEE, DAVID

Provider ID: 246263

Board Certified Specialty: No
DAVID J LEE

200 W ARBOR DR FL 1
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1871884130

Provider English Spoken: Y

Provider Language(s)
Spoken: Korean

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

NEUROLOGY

LEE, DAVID

Provider ID: 304198

Board Certified Specialty: No
DAVID J LEE

6655 ALVARADO RD
SAN DIEGO, CA 92120

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Male

NPI: 1871884130

Provider English Spoken: Y

Provider Language(s)
Spoken: Korean

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

NEUROLOGY

LONGARDNER, KATHERINE

Provider ID: 304197

Board Certified Specialty: No
KATHERINE M LONGARDNER

6655 ALVARADO RD
SAN DIEGO, CA 92120

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1801215926

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

Website: N/A

NEUROLOGY

LONGARDNER, KATHERINE

Provider ID: 268346

Board Certified Specialty: No
KATHERINE M LONGARDNER

4520 EXECUTIVE DR
SAN DIEGO, CA 92121

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1801215926

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

NEUROLOGY

QAYOUMI, WALI

Provider ID: 284370

Board Certified Specialty: No
WALI Z QAYOUMI

4510 EXECUTIVE DR STE
325

SAN DIEGO, CA 92121

Phone: (619) 294-3746

Fax: (888) 539-8781

After Hours Phone: (619)

D3. Directorio de proveedores especialistas

294-3746
Provider Gender: Male
NPI: 1093178220
 Provider English Spoken: Y
 Provider Language(s)
Spoken: French
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

NEUROLOGY

QAYOUMI, WALI

Provider ID: 304161
Board Certified Specialty: No
WALI Z QAYOUMI
 6655 ALVARADO RD
SAN DIEGO, CA 92120
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1093178220
 Provider English Spoken: Y
 Provider Language(s)
Spoken: French
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

NEUROLOGY

RIGGINS, NINA

Provider ID: 304200
Board Certified Specialty: No
NINA Y RIGGINS
 6655 ALVARADO RD
SAN DIEGO, CA 92120
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1568655264
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Russian
Cultural Competency: N
Hospital Affiliation: UCSF
MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

NEUROLOGY
SCHORR, EMILY
Provider ID: 305020
Board Certified Specialty: No
EMILY M SCHORR
 4510 EXECUTIVE DR
SAN DIEGO, CA 92121
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1255862041
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

NEUROLOGY
RIGGINS, NINA
Provider ID: 285968
Board Certified Specialty: No
NINA Y RIGGINS
 4510 EXECUTIVE DR STE

NEUROLOGY

RIGGINS, NINA

Provider ID: 285968
Board Certified Specialty: No
NINA Y RIGGINS
 4510 EXECUTIVE DR STE



325
SAN DIEGO, CA 92121
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1568655264
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Russian
Cultural Competency: N
Hospital Affiliation: UCSF
MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

NEUROLOGY

SCHORR, EMILY

Provider ID: 305020
Board Certified Specialty: No
EMILY M SCHORR
 4510 EXECUTIVE DR
SAN DIEGO, CA 92121
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1255862041
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

D3. Directorio de proveedores especialistas

 Accessibility: CONTACT PROVIDER
 Website: N/A


NEUROLOGY


SCHORR, EMILY

Provider ID: 305021

Board Certified Specialty: No
EMILY M SCHORR

 6655 ALVARADO RD
SAN DIEGO, CA 92120

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female


NPI: 1255862041

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

NEUROLOGY


SCHORR, EMILY

Provider ID: 305023

Board Certified Specialty: No
EMILY M SCHORR

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1255862041


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

NEUROLOGY


SWEAT, MARIE

Provider ID: 303831

Board Certified Specialty: No
MARIE E SWEAT

 3030 CHILDRENS WAY FL
4

SAN DIEGO, CA 92123

 Phone: (858) 966-5819

Fax: (858) 966-4930

 After Hours Phone: (858)
966-5819

Provider Gender: Female

NPI: 1861929036

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

NEUROLOGY


YANG, JENNIFER

Provider ID: 301593

Board Certified Specialty: No
JENNIFER H YANG

 3020 CHILDRENS WAY

SAN DIEGO, CA 92123

 Phone: (858) 966-5999

Fax: (858) 576-8412

 After Hours Phone: (858)
966-5999

Provider Gender: Female

NPI: 1528420619

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese, Mandarin


Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEUROLOGY

ZIMBRIC, MICHAEL

Provider ID: 206272

Board Certified Specialty: No
MICHAEL R ZIMBRIC

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5999

Fax: (858) 966-4930

 After Hours Phone: (858)
966-5999

Provider Gender: Male

NPI: 1487819546

 Provider English Spoken: Y

 Provider Language(s)
Spoken: French

Cultural Competency: N

Hospital Affiliation: RADY

D3. Directorio de proveedores especialistas

CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

NEUROLOGY


ZIMBRIC, MICHAEL

Provider ID: 303284


Board Certified Specialty: No
MICHAEL R ZIMBRIC

 3030 CHILDRENS WAY FL
4

SAN DIEGO, CA 92123


 Phone: (858) 966-5819

Fax: (858) 966-4930

 After Hours Phone: (858)
966-5819

Provider Gender: Male

NPI: 1487819546

 Provider English Spoken: Y

 Provider Language(s)
Spoken: French

Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEUROLOGY CHILD


GRAVES, JENNIFER

Provider ID: 261037

Board Certified Specialty: No
JENNIFER S GRAVES

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1992849863

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSF

Medical Center At Mission Bay,
UCSF MEDICAL CENTER AT
MOUNT ZION, UCSF MEDICAL
CENTER, UCSD MEDICAL CTR,
UCSD LA JOLLA JOHN SALLY
THORNTON, RADY

CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEUROLOGY CHILD

GUIDO-ESTRADA, NATALIE

Provider ID: 205825

Board Certified Specialty: No
NATALIE M GUIDO-ESTRADA

 8001 FROST ST
SAN DIEGO, CA 92123

 Phone: (858) 966-5999

Fax: (858) 966-4930

 After Hours Phone: (858)
966-5999

Provider Gender: Female

NPI: 1528353521

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


NEUROLOGY CHILD

SAHAGIAN, MICHELLE

Provider ID: 206074

Board Certified Specialty: No
MICHELLE L SAHAGIAN

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5999

Fax: (858) 966-4930

 After Hours Phone: (858)
966-5999

Provider Gender: Female

NPI: 1275604035

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

D3. Directorio de proveedores especialistas

CHILDRENS HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OBSTETRICS / GYNECOLOGY


ASLIAN, AZITA

Provider ID: 308270

Board Certified Specialty: No

AZITA ASLIAN

 950 S EUCLID AVE
SAN DIEGO, CA 92114


 Phone: (619) 662-4100


Fax: (619) 662-4158

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1851667661

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Faroese, Fataleka

Cultural Competency: N

Hospital Affiliation: Hemet

Global Medical Center, Menifee

Global Medical Center,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS MERCY
HOSPITAL


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OBSTETRICS / GYNECOLOGY


BLAKE, GARY

Provider ID: 290731


Board Certified Specialty: No

GARY D BLAKE

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111


 Phone: (858) 279-0925

Fax: (858) 633-4680

 After Hours Phone: (858)
279-0925

Provider Gender: Male

NPI: 1497738439

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OBSTETRICS / GYNECOLOGY

COHEN, MANSOUR


Provider ID: 205940

Board Certified Specialty: Yes

MANSOUR J COHEN

 7695 CARDINAL CT STE
390

SAN DIEGO, CA 92123


 Phone: (858) 279-8111


Fax: (858) 279-4703

 After Hours Phone: (858)
279-8111

Provider Gender: Male

NPI: 1346225356

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Arabic, Farsi,

Hebrew, Persian, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, SHARP

MARY BIRCH HOSP FOR


WOMEN AND NEWBORNS


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH
9:00AM-4:00PM

 Website: N/A

Email:

JOSHUACOHENMD@YAHOO.COM

OBSTETRICS / GYNECOLOGY


DELCORE, LAURA

Provider ID: 291330


Board Certified Specialty: No

LAURA M DELCORE

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1790128759

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL



Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

D3. Directorio de proveedores especialistas

 Accessibility: CONTACT PROVIDER
 Website: N/A


OBSTETRICS / GYNECOLOGY

DEL CORE, LAURA

Provider ID: 291326


Board Certified Specialty: No
LAURA M DEL CORE

 3750 CONVOY ST STE 312
SAN DIEGO, CA 92111



 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1790128759

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
 Website: N/A


OBSTETRICS / GYNECOLOGY

DEL CORE, LAURA

Provider ID: 291327


Board Certified Specialty: No
LAURA M DEL CORE



 4168 FRONT ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1790128759

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
 Website: N/A


OBSTETRICS / GYNECOLOGY

DEL CORE, LAURA

Provider ID: 291329


Board Certified Specialty: No
LAURA M DEL CORE

 16950 VIA TAZON
SAN DIEGO, CA 92127



 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1790128759

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
 Website: N/A

OBSTETRICS / GYNECOLOGY


DEL CORE, LAURA

Provider ID: 291328

Board Certified Specialty: No


LAURA M DEL CORE

 6030 VILLAGE WAY
SAN DIEGO, CA 92130

 Phone: (800) 926-8273
Fax: (888) 539-8781



 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1790128759

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER
 Website: N/A


OBSTETRICS / GYNECOLOGY

DRIEBE, AMY

Provider ID: 291339


Board Certified Specialty: No
AMY M DRIEBE

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1730507567


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 16\999

American Sign Language (ASL):

D3. Directorio de proveedores especialistas

N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

OBSTETRICS / GYNECOLOGY


DRIEBE, AMY

Provider ID: 291338

Board Certified Specialty: No

AMY M DRIEBE

 6030 VILLAGE WAY
SAN DIEGO, CA 92130

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800) 926-8273*

Provider Gender: Female

NPI: 1730507567

 *Provider English Spoken: Y*
Cultural Competency: N


*Hospital Affiliation: SHARP
MEMORIAL HOSPITAL*

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

OBSTETRICS / GYNECOLOGY

DRIEBE, AMY

Provider ID: 291340

Board Certified Specialty: No

AMY M DRIEBE

 330 LEWIS ST
SAN DIEGO, CA 92103

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800) 926-8273*

Provider Gender: Female

NPI: 1730507567

 *Provider English Spoken: Y*
Cultural Competency: N

*Hospital Affiliation: SHARP
MEMORIAL HOSPITAL*

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

OBSTETRICS / GYNECOLOGY

DRIEBE, AMY

Provider ID: 291337

Board Certified Specialty: No

AMY M DRIEBE

 3750 CONVOY ST STE 312
SAN DIEGO, CA 92111

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800) 926-8273*

Provider Gender: Female

NPI: 1730507567

 *Provider English Spoken: Y*
Cultural Competency: N

*Hospital Affiliation: SHARP
MEMORIAL HOSPITAL*

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*


OBSTETRICS / GYNECOLOGY


FRUGONI, GINA

Provider ID: 270056

Board Certified Specialty: No
GINA R FRUGONI

 4168 FRONT ST
SAN DIEGO, CA 92103

 *Phone: (619) 400-5074*

 *After Hours Phone: (619) 400-5074*

Provider Gender: Female

NPI: 1578729315

 *Provider English Spoken: Y*
Cultural Competency: N

*Hospital Affiliation: UCSD
MEDICAL CTR*


Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


OBSTETRICS / GYNECOLOGY

GROGAN, BRIAN

Provider ID: 296001

Board Certified Specialty: No
BRIAN D GROGAN

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111



 *Phone: (858) 810-8700*

Fax: (858) 633-4680

 *After Hours Phone: (858) 810-8700*

Provider Gender: Male

NPI: 1235218439

 *Provider English Spoken: Y*
 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

D3. Directorio de proveedores especialistas

American Sign Language (ASL): Provider Gender: Female
N

 Accessibility: CONTACT PROVIDER

 Website: N/A


OBSTETRICS / GYNECOLOGY

GROGAN, BRIAN

Provider ID: 296002

Board Certified Specialty: No
BRIAN D GROGAN

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111


 Phone: (858) 279-0925

Fax: (858) 633-4682

 After Hours Phone: (858)
279-0925

Provider Gender: Male

NPI: 1235218439

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A


OBSTETRICS / GYNECOLOGY

GUPTA, PRATIMA

Provider ID: 257548

Board Certified Specialty: No
PRATIMA GUPTA


 4168 FRONT ST
SAN DIEGO, CA 92103


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

NPI: 1891749842

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hindi, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OBSTETRICS / GYNECOLOGY

GUPTA, PRATIMA


Provider ID: 257547

Board Certified Specialty: No
PRATIMA GUPTA

 16950 VIA TAZON
SAN DIEGO, CA 92127


 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1891749842

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hindi, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OBSTETRICS / GYNECOLOGY

HARVEY, SCOTT

Provider ID: 278917

Board Certified Specialty: No
SCOTT A HARVEY

 4168 FRONT ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1457662868

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OBSTETRICS / GYNECOLOGY

HARVEY, SCOTT

Provider ID: 278915

Board Certified Specialty: No
SCOTT A HARVEY

D3. Directorio de proveedores especialistas






 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1457662868
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD




MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

OBSTETRICS / GYNECOLOGY

HOANG, MAI

Provider ID: 208294
Board Certified Specialty: No
MAI P HOANG

 4168 FRONT ST
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1104143593
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL



CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

OBSTETRICS / GYNECOLOGY

HOM-TEDLA, MARIANNE

Provider ID: 242751
Board Certified Specialty: No
MARIANNE S HOM-TEDLA

 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1972047397

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR



Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A




OBSTETRICS / GYNECOLOGY

KLEIN, DAVID

Provider ID: 271560
Board Certified Specialty: No
DAVID A KLEIN

 16950 VIA TAZON
SAN DIEGO, CA 92127
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1780073635

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL):
N



 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

OBSTETRICS / GYNECOLOGY

KLEIN, DAVID

Provider ID: 271561
Board Certified Specialty: No
DAVID A KLEIN

 6030 VILLAGE WAY
SAN DIEGO, CA 92130
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1780073635








 Provider English Spoken: Y
 Provider Language(s)


D3. Directorio de proveedores especialistas

Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

OBSTETRICS / GYNECOLOGY

KOHATSU, KAREN



Provider ID: 205481
Board Certified Specialty: No
KAREN E KOHATSU
 11939 RANCHO BERNARDO
RD STE 110
SAN DIEGO, CA 92128
 *Phone: (858) 618-1156*
Fax: (858) 618-3314
 *After Hours Phone: (858)*
618-1156
Provider Gender: Female
NPI: 1679517239
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR
HEALTH
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-TH*


8:30AM-4:30PM
F 8:30AM-2:00PM
 *Website: N/A*

OBSTETRICS / GYNECOLOGY

LAMALE-SMITH, LEAH


Provider ID: 208681
Board Certified Specialty: No
LEAH M LAMALE-SMITH
 4910 DIRECTORS PL STE
200
SAN DIEGO, CA 92121
 *Phone: (800) 926-8273*
 *After Hours Phone: (800)*
926-8273








Provider Gender: Female
NPI: 1396904876
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, EISENHOWER MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

OBSTETRICS / GYNECOLOGY

LAMALE-SMITH, LEAH

Provider ID: 285519
Board Certified Specialty: No
LEAH M LAMALE-SMITH
 16950 VIA TAZON

SAN DIEGO, CA 92127
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800)*
926-8273
Provider Gender: Female
NPI: 1396904876
 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, EISENHOWER MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

OBSTETRICS / GYNECOLOGY

MACKAY, GILLIAN

Provider ID: 200965
Board Certified Specialty: No
GILLIAN MACKAY
 16950 VIA TAZON
SAN DIEGO, CA 92127
 *Phone: (800) 926-8273*
 *After Hours Phone: (800)*
926-8273
Provider Gender: Female
NPI: 1770702177
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

D3. Directorio de proveedores especialistas


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A

OBSTETRICS / GYNECOLOGY

MACKAY, GILLIAN

Provider ID: 303064

Board Certified Specialty: No
GILLIAN MACKAY

 6030 VILLAGE WAY
SAN DIEGO, CA 92130

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1770702177

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

OBSTETRICS / GYNECOLOGY


MANI, PARVIN

Provider ID: 242345

Board Certified Specialty: No
PARVIN P MANI

 5555 RESERVOIR DR STE
208

SAN DIEGO, CA 92120


 Phone: (619) 583-7555

Fax: (619) 583-0555

 After Hours Phone: (619)
583-7555

Provider Gender: Female

NPI: 1518925015

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Faroese, Farsi

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
ALVARADO HOSPITAL LLC,
SHARP MARY BIRCH HOSP
FOR WOMEN AND


NEWBORNS, UCSD LA JOLLA
JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 10\150

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A

Email:

PARVINMANI@YAHOO.COM

OBSTETRICS / GYNECOLOGY


MEADOWS, AUDRA

Provider ID: 285742

Board Certified Specialty: No
AUDRA R MEADOWS

 4168 FRONT ST

SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1467585521

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OBSTETRICS / GYNECOLOGY

MEADOWS, AUDRA

Provider ID: 285741

Board Certified Specialty: No
AUDRA R MEADOWS

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1467585521

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

D3. Directorio de proveedores especialistas

CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OBSTETRICS / GYNECOLOGY

MELENDEZ, ARIANA

Provider ID: 299921

Board Certified Specialty: No

ARIANA L MELENDEZ

 4168 FRONT ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1295232973


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OBSTETRICS / GYNECOLOGY


MELENDEZ, ARIANA

Provider ID: 299922

Board Certified Specialty: No

ARIANA L MELENDEZ

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1295232973

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OBSTETRICS / GYNECOLOGY


PICKETT, CHARLOTTE

Provider ID: 299982


Board Certified Specialty: No

CHARLOTTE M PICKETT

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1447530696

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OBSTETRICS / GYNECOLOGY

PICKETT, CHARLOTTE

Provider ID: 299979

Board Certified Specialty: No

CHARLOTTE M PICKETT

 4168 FRONT ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1447530696


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OBSTETRICS / GYNECOLOGY

PICKETT, CHARLOTTE

Provider ID: 299978

Board Certified Specialty: No

CHARLOTTE M PICKETT

 3750 CONVOY ST STE 312
SAN DIEGO, CA 92111

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1447530696

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

 Accessibility: CONTACT

D3. Directorio de proveedores especialistas

PROVIDER
 Website: N/A

OBSTETRICS / GYNECOLOGY


PICKETT, CHARLOTTE

Provider ID: 299981

Board Certified Specialty: No
CHARLOTTE M PICKETT

 16950 VIA TAZON

SAN DIEGO, CA 92127

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1447530696

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

OBSTETRICS / GYNECOLOGY

PICKETT, CHARLOTTE

Provider ID: 299980

Board Certified Specialty: No
CHARLOTTE M PICKETT

 6030 VILLAGE WAY

SAN DIEGO, CA 92130

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1447530696

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

OBSTETRICS / GYNECOLOGY


RIVAS, RENEE

Provider ID: 284298

Board Certified Specialty: No
RENEE N RIVAS

 200 W ARBOR DR

SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1295263861

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OBSTETRICS / GYNECOLOGY

SUYAMA, JULIE

Provider ID: 284291

Board Certified Specialty: No
JULIE A SUYAMA

 200 W ARBOR DR

SAN DIEGO, CA 92103


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1306372800

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OBSTETRICS / GYNECOLOGY

SUYAMA, JULIE

Provider ID: 284290

Board Certified Specialty: No
JULIE A SUYAMA

 4520 EXECUTIVE DR STE
360

SAN DIEGO, CA 92121

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273



Provider Gender: Female

NPI: 1306372800






 Provider English Spoken: Y



 Provider Language(s)

D3. Directorio de proveedores especialistas





Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*




OBSTETRICS / GYNECOLOGY

THOMSON, SAMANTHA
Provider ID: 285176
Board Certified Specialty: No
SAMANTHA L THOMSON
 4168 FRONT ST
SAN DIEGO, CA 92103
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800) 926-8273*
Provider Gender: Female
NPI: 1689013468
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: CEDARS SINAI MEDICAL CENTER, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL): N
 *Accessibility: CONTACT*


PROVIDER
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*







OBSTETRICS / GYNECOLOGY

THOMSON, SAMANTHA
Provider ID: 285174
Board Certified Specialty: No
SAMANTHA L THOMSON
 200 W ARBOR DR
SAN DIEGO, CA 92103
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800) 926-8273*
Provider Gender: Female
NPI: 1689013468
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: CEDARS SINAI MEDICAL CENTER, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL): N





 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

OBSTETRICS / GYNECOLOGY

TRUJILLO, JENNIFER
Provider ID: 290128
Board Certified Specialty: No
JENNIFER C TRUJILLO
 950 S EUCLID AVE

SAN DIEGO, CA 92114
 *Phone: (619) 662-4100*
Fax: (619) 662-4158
 *After Hours Phone: (619) 662-4100*
Provider Gender: Female
NPI: 1053407593
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*


OCCUPATIONAL THERAPIST

BOND, KIMBERLEE
Provider ID: 206549
Board Certified Specialty: No
KIMBERLEE A BOND
 16950 VIA TAZON
SAN DIEGO, CA 92127
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800) 926-8273*
Provider Gender: Female
NPI: 1669770939
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON


D3. Directorio de proveedores especialistas

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):  8929 UNIVERSITY CENTER
LN STE 200

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OCCUPATIONAL THERAPIST

BOND, KIMBERLEE

Provider ID: 206548

Board Certified Specialty: No

KIMBERLEE A BOND

 8929 UNIVERSITY CENTER
LN STE 200

SAN DIEGO, CA 92122

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1669770939

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OCCUPATIONAL THERAPIST

LARSEN, JULIE


Provider ID: 258359

Board Certified Specialty: No

JULIE L LARSEN

 8929 UNIVERSITY CENTER
LN STE 200

SAN DIEGO, CA 92122

 Phone: (855) 543-0333

Fax: (858) 657-1809

 After Hours Phone: (855)
543-0333

Provider Gender: Female

NPI: 1497009179


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OCCUPATIONAL THERAPIST

MIKUT, ALYSSA


Provider ID: 258415

Board Certified Specialty: No

ALYSSA M MIKUT

 8929 UNIVERSITY CENTER
LN STE 200

SAN DIEGO, CA 92122

 Phone: (858) 249-0832

Fax: (858) 657-1809

 After Hours Phone: (858)
249-0832

Provider Gender: Female

NPI: 1952816134

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL


CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OPHTHALMOLOGY


BANSAL, PREETI

Provider ID: 205620

Board Certified Specialty: Yes

PREETI BANSAL

 7910 FROST ST STE 200
SAN DIEGO, CA 92123

 Phone: (858) 309-7702


Fax: (858) 966-7403

 After Hours Phone: (858)
309-7702

Provider Gender: Female

NPI: 1871664631

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hindi

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

DIEGO, GROSSMONT

HOSPITAL, SHARP MARY

BIRCH HOSP FOR WOMEN

AND NEWBORNS, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MEMORIAL

HOSPITAL, TRI CITY MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

D3. Directorio de proveedores especialistas


N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

OPHTHALMOLOGY

BAXTER, SALLY

Provider ID: 272788
Board Certified Specialty: No
SALLY L BAXTER

 4060 4TH AVE STE 610
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1912325184

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

OPHTHALMOLOGY

BAXTER, SALLY

Provider ID: 272789
Board Certified Specialty: No
SALLY L BAXTER

 200 W ARBOR DR STE 101
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1912325184

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

OPHTHALMOLOGY

BEAZER, ALEX

Provider ID: 272803
Board Certified Specialty: No
ALEX P BEAZER

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1942662168

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

OPHTHALMOLOGY

BHATIA, SHAGUN

Provider ID: 240636
Board Certified Specialty: No
SHAGUN K BHATIA

 7910 FROST ST STE 200
SAN DIEGO, CA 92123

 Phone: (858) 309-7702
Fax: (858) 966-7403

 After Hours Phone: (858)
309-7702

Provider Gender: Female

NPI: 1104237353

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR, RADY CHILDRENS


HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OPHTHALMOLOGY

CAMP, ANDREW

Provider ID: 260020

D3. Directorio de proveedores especialistas

Board Certified Specialty: No
ANDREW S CAMP

7910 FROST ST STE 200
SAN DIEGO, CA 92123

Phone: (858) 309-7702

Fax: (858) 966-7403

After Hours Phone: (858)
309-7702

Provider Gender: Male

NPI: 1326300377

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,
RADY CHILDRENS HOSPITAL
SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPHTHALMOLOGY

GUALTIERI, CHRISTOPHER

Provider ID: 252313

Board Certified Specialty: Yes
CHRISTOPHER J GUALTIERI

3969 4TH AVE STE 300
SAN DIEGO, CA 92103

Phone: (619) 688-2648

Fax: (619) 688-2626

After Hours Phone: (619)
688-2648

Provider Gender: Male

NPI: 1790769156

Provider English Spoken: Y
Provider Language(s)

Spoken: Spanish
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA
VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 6\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

Email:

MYNEWWEYES@HOTMAIL.COM

OPHTHALMOLOGY

HENNEIN, LAUREN

Provider ID: 297011

Board Certified Specialty: No
LAUREN M HENNEIN

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 309-7702

Fax: (858) 966-7403

After Hours Phone: (858)
309-7702

Provider Gender: Female

NPI: 1699216010

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPHTHALMOLOGY

HENNEIN, LAUREN

Provider ID: 297009

Board Certified Specialty: No
LAUREN M HENNEIN

7910 FROST ST STE 200
SAN DIEGO, CA 92123

Phone: (858) 309-7702

Fax: (858) 966-7403

After Hours Phone: (858)
309-7702

Provider Gender: Female

NPI: 1699216010

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPHTHALMOLOGY

HUYNH, PAUL

Provider ID: 245200

Board Certified Specialty: No
PAUL D HUYNH

4844 UNIVERSITY AVE STE
A

SAN DIEGO, CA 92105

Phone: (619) 283-1303

D3. Directorio de proveedores especialistas

Fax: (619) 283-1666

After Hours Phone: (619) 283-1303

Provider Gender: Male

NPI: 1871577056

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish, Tagalog,
Vietnamese

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM
SA 8:00AM-5:00PM

Website: N/A

Email:

DOCTORPAUL@SBCGLOBAL.NET

OPHTHALMOLOGY

HUYNH, PAUL

Provider ID: 295645

Board Certified Specialty: No
PAUL D HUYNH

4844 UNIVERSITY AVE STE
A

SAN DIEGO, CA 92105

Phone: (619) 283-1303

Fax: (619) 283-1666

After Hours Phone: (619)
283-1303

Provider Gender: Male

NPI: 1871577056

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish, Tagalog,
Vietnamese

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM
SA 8:00AM-5:00PM

Website: N/A

Email:

DOCTORPAUL@SBCGLOBAL.NET

OPHTHALMOLOGY

JACOBSEN, BRADLEY

Provider ID: 302869

Board Certified Specialty: No

BRADLEY H JACOBSEN

7695 CARDINAL CT STE 100
SAN DIEGO, CA 92123

Phone: (858) 609-7100

Fax: (858) 609-7106

After Hours Phone: (858)
609-7100

Provider Gender: Male

NPI: 1760845184

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, SHARP

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPHTHALMOLOGY

KHATIB, NORA

Provider ID: 305375

Board Certified Specialty: No

NORA KHATIB

4060 4TH AVE STE 640
SAN DIEGO, CA 92103

Phone: (619) 642-2240

Fax: (619) 642-2245

After Hours Phone: (619)
642-2240

Provider Gender: Female

NPI: 1538487756

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SHARP CHULA

VISTA MED CTR, GROSSMONT

HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 14\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

D3. Directorio de proveedores especialistas

OPHTHALMOLOGY

KLINE, LANNING

Provider ID: 239915

Board Certified Specialty: No
LANNING B KLINE

4060 4TH AVE STE 610
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1841227477

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPHTHALMOLOGY

LI, ALEXANDRIA

Provider ID: 272833

Board Certified Specialty: No
ALEXANDRIA L LI

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1841652864

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, SCRIPPS GREEN

HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, SCRIPPS

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPHTHALMOLOGY

LIU, YUNXIANG

Provider ID: 210803

Board Certified Specialty: No
YUNXIANG LIU

7910 FROST ST STE 200
SAN DIEGO, CA 92123

Phone: (858) 309-7702

After Hours Phone: (858)
309-7702

Provider Gender: Female

NPI: 1770849804

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR, RADY CHILDRENS

HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPHTHALMOLOGY

MOLL, ANGELA

Provider ID: 205510

Board Certified Specialty: No
ANGELA M MOLL

7910 FROST ST STE 200
SAN DIEGO, CA 92123

Phone: (858) 309-7702

Fax: (858) 966-7403

After Hours Phone: (858)
309-7702

Provider Gender: Female

NPI: 1861648602

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT

HOSPITAL, SHARP MEMORIAL
HOSPITAL, UCSF BENIOFF

CHILDREN'S HOSPITAL

OAKLAND, SCRIPPS MERCY

HOSPITAL, SCRIPPS MERCY

HOSPITAL CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPHTHALMOLOGY

D3. Directorio de proveedores especialistas

MOVAGHAR, MANSOOR

Provider ID: 216412

Board Certified Specialty: No
MANSOOR MOVAGHAR

7910 FROST ST STE 200
SAN DIEGO, CA 92123

Phone: (858) 309-7702

After Hours Phone: (858)
309-7702

Provider Gender: Male

NPI: 1497792220

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPHTHALMOLOGY

OHALLORAN, HENRY

Provider ID: 205888

Board Certified Specialty: No
HENRY S OHALLORAN

7910 FROST ST STE 200
SAN DIEGO, CA 92123

Phone: (858) 309-7702

Fax: (858) 966-7403

After Hours Phone: (858)
309-7702

Provider Gender: Male

NPI: 1235287947

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPHTHALMOLOGY

PHAN, RYAN

Provider ID: 305445

Board Certified Specialty: No
RYAN PHAN

10737 CAMINO RUIZ STE
100

SAN DIEGO, CA 92126

Phone: (858) 549-3200

Fax: (858) 549-3207

After Hours Phone: (858)
549-3200

Provider Gender: Male

NPI: 1588027213

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, UCSD
LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, GROSSMONT HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPHTHALMOLOGY

PHAN, RYAN

Provider ID: 295646

Board Certified Specialty: No
RYAN PHAN

10737 CAMINO RUIZ
SAN DIEGO, CA 92126

Phone: (858) 549-3200

Fax: (858) 549-3207

After Hours Phone: (858)
549-3200

Provider Gender: Male

NPI: 1588027213

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, UCSD
LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, GROSSMONT HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F

D3. Directorio de proveedores especialistas

8:00AM-5:00PM
Website: N/A

OPHTHALMOLOGY

PHAN, RYAN

Provider ID: 287883

Board Certified Specialty: No
RYAN PHAN

10737 CAMINO RUIZ
SAN DIEGO, CA 92126

Phone: (858) 549-3200

Fax: (858) 549-3207

After Hours Phone: (858)
549-3200

Provider Gender: Male

NPI: 1588027213

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, UCSD

LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, GROSSMONT HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

OPHTHALMOLOGY

PHAN, RYAN

Provider ID: 302925

Board Certified Specialty: No

RYAN PHAN

4844 UNIVERSITY AVE STE
A

SAN DIEGO, CA 92105

Phone: (619) 283-1303

Fax: (619) 283-1666

After Hours Phone: (619)
283-1303

Provider Gender: Male

NPI: 1588027213

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, UCSD

LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, GROSSMONT HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

OPHTHALMOLOGY

PHAN, RYAN

Provider ID: 295647

Board Certified Specialty: No

RYAN PHAN

4844 UNIVERSITY AVE STE
A

SAN DIEGO, CA 92105

Phone: (619) 283-1303

Fax: (619) 283-1666

After Hours Phone: (619)

283-1303

Provider Gender: Male

NPI: 1588027213

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, UCSD

LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, GROSSMONT HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

OPHTHALMOLOGY

PUIG LLANO, MANUEL

Provider ID: 299964

Board Certified Specialty: No

MANUEL PUIG LLANO

4060 4TH AVE STE 610
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1427102979

Provider English Spoken: Y

Provider Language(s)
Spoken: French, German,

Spanish, Tagalog

Cultural Competency: N


D3. Directorio de proveedores especialistas

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP
MEMORIAL HOSPITAL, SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

OPHTHALMOLOGY




SATTERFIELD, KELLIE



Provider ID: 305302
Board Certified Specialty: No
KELLIE R SATTERFIELD
 5330 CARROLL CANYON
RD STE 210
SAN DIEGO, CA 92121
 Phone: (858) 450-1010
Fax: (858) 450-9451
 After Hours Phone: (858)
450-1010
Provider Gender: Female
NPI: 1629509336
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F

8:00AM-5:00PM
 Website: N/A

OPHTHALMOLOGY


SHEILS, CATHERINE





Provider ID: 305305
Board Certified Specialty: No
CATHERINE R SHEILS
 5330 CARROLL CANYON
RD STE 210
SAN DIEGO, CA 92121
 Phone: (858) 450-1010
Fax: (858) 450-9451
 After Hours Phone: (858)
450-1010
Provider Gender: Female
NPI: 1932605649

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-TU
8:30AM-4:00PM
W-F 8:30AM-1:00PM
 Website: N/A

OPHTHALMOLOGY






SHEILS, CATHERINE

Provider ID: 299936
Board Certified Specialty: No
CATHERINE R SHEILS
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781



 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1932605649
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

OPHTHALMOLOGY

SHEILS, CATHERINE

Provider ID: 305306
Board Certified Specialty: No
CATHERINE R SHEILS
 3939 3RD AVE
SAN DIEGO, CA 92103
 Phone: (800) 765-2737
Fax: (619) 291-6577
 After Hours Phone: (800)
765-2737
Provider Gender: Female
NPI: 1932605649
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER


D3. Directorio de proveedores especialistas


 Hours: M-TU
8:30AM-4:00PM
W-F 8:30AM-1:00PM
 Website: N/A

OPHTHALMOLOGY

SONG, DELU



Provider ID: 302872
Board Certified Specialty: No
DELU SONG

 7695 CARDINAL CT STE 100
SAN DIEGO, CA 92123

 Phone: (858) 609-7100
Fax: (858) 609-7106

 After Hours Phone: (858)
609-7100


Provider Gender: Male
NPI: 1437689536


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Chinese, Mandarin
Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Hours: M-F
8:00AM-5:00PM


 Website: N/A

OPHTHALMOLOGY

YAMADA, KENTARO



Provider ID: 295848
Board Certified Specialty: No
KENTARO E YAMADA

 1040 UNIVERSITY AVE STE
B209A
SAN DIEGO, CA 92103

 Phone: (619) 299-1100
Fax: (619) 299-7156

 After Hours Phone: (619)
299-1100

Provider Gender: Male
NPI: 1629047188


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Japanese, Spanish
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM


 Website: N/A

OPTOMETRIST

AOTO, KIM



Provider ID: 268723
Board Certified Specialty: No
KIM N AOTO

 6945 EL CAJON BLVD
SAN DIEGO, CA 92115

 Phone: (800) 898-2020
Fax: (844) 897-3788


 After Hours Phone: (800)
898-2020

Provider Gender: Female
NPI: 1780935650

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:30AM-5:00PM


 Website: N/A

OPTOMETRIST

AOTO, KIM



Provider ID: 268718
Board Certified Specialty: No
KIM N AOTO

 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

 Phone: (858) 565-8822
Fax: (858) 565-2449

 After Hours Phone: (858)
565-8822


Provider Gender: Female
NPI: 1780935650


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M 9:00AM-5:00PM
TU 8:30AM-4:30PM
W 7:30AM-4:30PM
TH 9:30AM-5:00PM
F 8:30AM-4:00PM

 Website: N/A

OPTOMETRIST

AOTO, KIM

D3. Directorio de proveedores especialistas

Provider ID: 296795
Board Certified Specialty: No
KIM N AOTO

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

Phone: (858) 565-8822
Fax: (858) 565-2449

After Hours Phone: (858)
565-8822

Provider Gender: Female

NPI: 1780935650

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M 9:00AM-5:00PM

TU 8:30AM-4:30PM

W 7:30AM-4:30PM

TH 9:30AM-5:00PM

F 8:30AM-4:00PM

Website: N/A

OPTOMETRIST

JOMOC, CAITLIN

Provider ID: 304156

Board Certified Specialty: No
CAITLIN JOMOC

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1861164642

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OPTOMETRIST

JOMOC, CAITLIN

Provider ID: 304155

Board Certified Specialty: No
CAITLIN JOMOC

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1861164642

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OPTOMETRIST

KIM, PHILIP

Provider ID: 287910

Board Certified Specialty: No
PHILIP KIM

4060 4TH AVE STE 610
SAN DIEGO, CA 92103

Phone: (800) 926-8372
Fax: (888) 539-8781

After Hours Phone: (800)
926-8372

Provider Gender: Male

NPI: 1376929034

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPTOMETRIST

SCHWAB, GARY

Provider ID: 290411

Board Certified Specialty: No
GARY G SCHWAB

4290 POLK AVE
SAN DIEGO, CA 92105

Phone: (619) 563-0250
Fax: (858) 633-4681

After Hours Phone: (619)
563-0250

Provider Gender: Male

NPI: 1740274372

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OPTOMETRIST

SCHWAB, GARY

Provider ID: 290410

D3. Directorio de proveedores especialistas

Board Certified Specialty: No
GARY G SCHWAB

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 279-0925

Fax: (858) 633-4680

After Hours Phone: (858)
279-0925

Provider Gender: Male

NPI: 1740274372

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

OPTOMETRIST

VO, ANDREW

Provider ID: 201312

Board Certified Specialty: No
ANDREW M VO

200 W ARBOR DR STE 101
SAN DIEGO, CA 92103

Phone: (619) 543-7907

After Hours Phone: (619)
543-7907

Provider Gender: Male

NPI: 1790291565

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPTOMETRIST

VO, ANDREW

Provider ID: 304147

Board Certified Specialty: No
ANDREW M VO

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1790291565

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

OPTOMETRIST

YU, CAROL

Provider ID: 301684

Board Certified Specialty: No
CAROL Y YU

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1639697451

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OPTOMETRIST

YU, CAROL

Provider ID: 301680

Board Certified Specialty: No
CAROL Y YU

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1639697451

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OPTOMETRIST

D3. Directorio de proveedores especialistas

YU, CAROL

Provider ID: 301683

Board Certified Specialty: No
CAROL Y YU

4060 4TH AVE STE 610
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1639697451

Provider English Spoken: Y

Provider Language(s)

Spoken: Chinese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

ORAL MAXILLOFACIAL

SURGEON

DENTICO-OLIN, MARC

Provider ID: 273663

Board Certified Specialty: No
MARC DENTICO-OLIN

501 WASHINGTON ST STE
710

SAN DIEGO, CA 92103

Phone: (619) 295-6774

Fax: (619) 295-6776

After Hours Phone: (619)
295-6774

Provider Gender: Male

NPI: 1629205174

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS GREEN

HOSPITAL, SCRIPPS MERCY
HOSPITAL CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

ORAL MAXILLOFACIAL

SURGEON

DENTICO-OLIN, MARC

Provider ID: 304727

Board Certified Specialty: No
MARC DENTICO-OLIN

2878 CAMINO DEL RIO S
STE 210

SAN DIEGO, CA 92108

Phone: (619) 298-2200

Fax: (619) 298-2250

After Hours Phone: (619)
298-2200

Provider Gender: Male

NPI: 1629205174

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS GREEN

HOSPITAL, SCRIPPS MERCY

HOSPITAL CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

OTOLARYNGOLOGY

BLISS, MORGAN

Provider ID: 272565

Board Certified Specialty: Yes

MORGAN R BLISS

3030 CHILDRENS WAY FL 1

SAN DIEGO, CA 92123

Phone: (858) 309-7701

Fax: (858) 966-8038

After Hours Phone: (858)
309-7701

Provider Gender: Female

NPI: 1760707657

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

OTOLARYNGOLOGY

BRUMUND, KEVIN

Provider ID: 299635

Board Certified Specialty: No

KEVIN T BRUMUND

8899 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122

Phone: (800) 926-8273

D3. Directorio de proveedores especialistas

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1033193669

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

OTOLARYNGOLOGY

BRUMUND, KEVIN

Provider ID: 299634

Board Certified Specialty: No
KEVIN T BRUMUND

📍 16950 VIA TAZON
SAN DIEGO, CA 92127

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1033193669

☑ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT

PROVIDER

🌐 Website: N/A

OTOLARYNGOLOGY

CALIFANO, JOSEPH

Provider ID: 299461

Board Certified Specialty: No
JOSEPH A CALIFANO III

📍 16950 VIA TAZON
SAN DIEGO, CA 92127

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1881652972

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

OTOLARYNGOLOGY

CALIFANO, JOSEPH

Provider ID: 299462

Board Certified Specialty: No
JOSEPH A CALIFANO III

📍 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1881652972

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

OTOLARYNGOLOGY

CALIFANO, JOSEPH

Provider ID: 299457

Board Certified Specialty: No
JOSEPH A CALIFANO III

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1881652972

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

OTOLARYNGOLOGY

CARVALHO, DANIELA

Provider ID: 272557

Board Certified Specialty: No
DANIELA CARVALHO

📍 3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123

☎ Phone: (858) 309-7701

Fax: (858) 966-8038

☎ After Hours Phone: (858)

D3. Directorio de proveedores especialistas

309-7701
Provider Gender: Female
NPI: 1154492916
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: French, Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL
HOSPITAL, SHARP MEMORIAL
HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

OTOLARYNGOLOGY

CARVALHO, DANIELA

Provider ID: 205628
Board Certified Specialty: No
DANIELA CARVALHO

📍 3030 CHILDRENS WAY STE
109
SAN DIEGO, CA 92123
☎ Phone: (858) 309-7702
🕒 After Hours Phone: (858)
309-7702

Provider Gender: Female
NPI: 1154492916
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: French, Spanish

Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MEMORIAL

HOSPITAL, SHARP MEMORIAL
HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

OTOLARYNGOLOGY

CHANG, EDWARD

Provider ID: 309535
Board Certified Specialty: No
EDWARD W CHANG

📍 5405 OBERLIN DR FL 2
SAN DIEGO, CA 92121
☎ Phone: (858) 909-0770
Fax: (858) 909-0880

🕒 After Hours Phone: (858)
909-0770

Provider Gender: Male
NPI: 1528146008

☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

OTOLARYNGOLOGY

COFFEY, CHARLES

Provider ID: 299582
Board Certified Specialty: No

CHARLES S COFFEY
📍 16950 VIA TAZON
SAN DIEGO, CA 92127
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1932297330
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, SCRIPPS
GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A

OTOLARYNGOLOGY

COFFEY, CHARLES

Provider ID: 299583
Board Certified Specialty: No
CHARLES S COFFEY

📍 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
☎ Phone: (800) 926-8273
Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1932297330

☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, SCRIPPS
GREEN HOSPITAL

D3. Directorio de proveedores especialistas

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


OTOLARYNGOLOGY

COFFEY, CHARLES

Provider ID: 299579

Board Certified Specialty: No
CHARLES S COFFEY

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (619) 543-6631

Fax: (619) 471-0656

 After Hours Phone: (619)
543-6631

Provider Gender: Male

NPI: 1932297330

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, SCRIPPS
GREEN HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OTOLARYNGOLOGY

DECONDE, ADAM

Provider ID: 299569

Board Certified Specialty: No
ADAM S DECONDE

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1588988919

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OTOLARYNGOLOGY

DECONDE, ADAM

Provider ID: 299568

Board Certified Specialty: No
ADAM S DECONDE

 8899 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1588988919

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OTOLARYNGOLOGY

DECONDE, ADAM

Provider ID: 299567

Board Certified Specialty: No
ADAM S DECONDE

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1588988919

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


OTOLARYNGOLOGY

FRIEDMAN, RICK

Provider ID: 299530

Board Certified Specialty: No
RICK A FRIEDMAN

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

D3. Directorio de proveedores especialistas

NPI: 1982708558

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PIH


HEALTH GOOD SAMARITAN
HOSPITAL, CHILDRENS HOSP
OF LOS ANGELES, SOUTH
COAST GLOBAL MEDICAL
CENTER INC, ANAHEIM
GLOBAL MEDICAL CENTER,
ORANGE COUNTY GLOBAL
MEDICAL CENTER INC,
CHAPMAN GLOBAL MEDICAL
CENTER INC, UCSD LA JOLLA
JOHN SALLY THORNTON,
UCSD LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

OTOLARYNGOLOGY

FRIEDMAN, RICK

Provider ID: 299531

Board Certified Specialty: No

RICK A FRIEDMAN

 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1982708558

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PIH

HEALTH GOOD SAMARITAN
HOSPITAL, CHILDRENS HOSP
OF LOS ANGELES, SOUTH
COAST GLOBAL MEDICAL
CENTER INC, ANAHEIM
GLOBAL MEDICAL CENTER,
ORANGE COUNTY GLOBAL
MEDICAL CENTER INC,
CHAPMAN GLOBAL MEDICAL
CENTER INC, UCSD LA JOLLA
JOHN SALLY THORNTON,
UCSD LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

OTOLARYNGOLOGY


FRIEDMAN, RICK

Provider ID: 299532


Board Certified Specialty: No

RICK A FRIEDMAN

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1982708558

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PIH

HEALTH GOOD SAMARITAN
HOSPITAL, CHILDRENS HOSP
OF LOS ANGELES, SOUTH
COAST GLOBAL MEDICAL
CENTER INC, ANAHEIM
GLOBAL MEDICAL CENTER,
ORANGE COUNTY GLOBAL
MEDICAL CENTER INC,
CHAPMAN GLOBAL MEDICAL
CENTER INC, UCSD LA JOLLA
JOHN SALLY THORNTON,
UCSD LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

OTOLARYNGOLOGY


FRIESEN, TZYYNONG

Provider ID: 272604

Board Certified Specialty: Yes

TZYYNONG L FRIESEN

 3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123

 Phone: (858) 309-7701

Fax: (858) 966-8038




 After Hours Phone: (858)
309-7701

Provider Gender: Female

NPI: 1952740177

 Provider English Spoken: Y

D3. Directorio de proveedores especialistas


Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*



OTOLARYNGOLOGY

GILANI, SAPIDEH

Provider ID: 299560
Board Certified Specialty: No
SAPIDEH GILANI
 8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800) 926-8273*

Provider Gender: Female
NPI: 1003825571

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*


OTOLARYNGOLOGY

GILANI, SAPIDEH



Provider ID: 299561

Board Certified Specialty: No
SAPIDEH GILANI
 200 W ARBOR DR
SAN DIEGO, CA 92103
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800) 926-8273*

Provider Gender: Female
NPI: 1003825571

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*


OTOLARYNGOLOGY

GILANI, SAPIDEH

Provider ID: 299559
Board Certified Specialty: No
SAPIDEH GILANI
 16950 VIA TAZON
SAN DIEGO, CA 92127
 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800) 926-8273*



Provider Gender: Female
NPI: 1003825571

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*


OTOLARYNGOLOGY

GREENE, JACQUELINE



Provider ID: 298396
Board Certified Specialty: No
JACQUELINE J GREENE
 16950 VIA TAZON
SAN DIEGO, CA 92127
 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800) 926-8273*

Provider Gender: Female
NPI: 1144583931



 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*

OTOLARYNGOLOGY

GREENE, JACQUELINE


Provider ID: 298397
Board Certified Specialty: No
JACQUELINE J GREENE
 8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
 *Phone: (800) 926-8273*
Fax: (888) 539-8781

D3. Directorio de proveedores especialistas

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1144583931

 Provider English Spoken: Y


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OTOLARYNGOLOGY

GREENE, JACQUELINE

Provider ID: 272959

Board Certified Specialty: No

JACQUELINE J GREENE

 200 W ARBOR DR

SAN DIEGO, CA 92103


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1144583931

 Provider English Spoken: Y


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

OTOLARYNGOLOGY

HARRIS, JEFFREY

Provider ID: 299576

Board Certified Specialty: No

JEFFREY P HARRIS

 8899 UNIVERSITY CENTER

LN

SAN DIEGO, CA 92122


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1417988783

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL, UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OTOLARYNGOLOGY

HARRIS, JEFFREY


Provider ID: 299575

Board Certified Specialty: No


JEFFREY P HARRIS

 16950 VIA TAZON

SAN DIEGO, CA 92127


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1417988783

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL, UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OTOLARYNGOLOGY

HOM, DAVID


Provider ID: 299514

Board Certified Specialty: No

DAVID B HOM

 16950 VIA TAZON

SAN DIEGO, CA 92127

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1659305027

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

OTOLARYNGOLOGY

HOM, DAVID

Provider ID: 299515

Board Certified Specialty: No

DAVID B HOM

D3. Directorio de proveedores especialistas

8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1659305027

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OTOLARYNGOLOGY

HOM, DAVID

Provider ID: 299511
Board Certified Specialty: No
DAVID B HOM

200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (858) 657-8590
After Hours Phone: (858) 657-8590

Provider Gender: Male
NPI: 1659305027
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

OTOLARYNGOLOGY

HUSSEMAN, JACOB

Provider ID: 301052
Board Certified Specialty: No
JACOB W HUSSEMAN

200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1124034053

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OTOLARYNGOLOGY

HUSSEMAN, JACOB

Provider ID: 301053

Board Certified Specialty: No
JACOB W HUSSEMAN

16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273

Provider Gender: Male
NPI: 1124034053

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OTOLARYNGOLOGY

JIANG, WEN

Provider ID: 272660
Board Certified Specialty: Yes
WEN A JIANG

3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123
Phone: (858) 309-7701
Fax: (858) 966-8038
After Hours Phone: (858) 309-7701

Provider Gender: Female
NPI: 1659305753

Provider English Spoken: Y
Provider Language(s) Spoken: Mandarin
Cultural Competency: N


D3. Directorio de proveedores especialistas

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OTOLARYNGOLOGY


KARI, ELINA

Provider ID: 299443

Board Certified Specialty: No
ELINA KARI

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (619) 543-6631

 After Hours Phone: (619)
543-6631


Provider Gender: Female
NPI: 1780860536


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation:
CHILDRENS HOSP OF LOS
ANGELES, PIH HEALTH
HOSPITAL - WHITTIER, UCSD
LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OTOLARYNGOLOGY

KARI, ELINA

Provider ID: 299445

Board Certified Specialty: No
ELINA KARI

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273


Provider Gender: Female
NPI: 1780860536


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:
CHILDRENS HOSP OF LOS
ANGELES, PIH HEALTH
HOSPITAL - WHITTIER, UCSD
LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

OTOLARYNGOLOGY

KARI, ELINA

Provider ID: 299446

Board Certified Specialty: No
ELINA KARI

 8899 UNIVERSITY CENTER

LN

SAN DIEGO, CA 92122

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1780860536

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:
CHILDRENS HOSP OF LOS
ANGELES, PIH HEALTH
HOSPITAL - WHITTIER, UCSD
LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OTOLARYNGOLOGY

LEUIN, SHELBY


Provider ID: 272637

Board Certified Specialty: No
SHELBY C LEUIN

 3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123

 Phone: (858) 309-7701

Fax: (858) 966-8038

 After Hours Phone: (858)
309-7701

Provider Gender: Female
NPI: 1124230909


 Provider English Spoken: Y
Cultural Competency: N


D3. Directorio de proveedores especialistas

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


OTOLARYNGOLOGY

MAGIT, ANTHONY


Provider ID: 272767

Board Certified Specialty: Yes
ANTHONY E MAGIT

 3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123

 Phone: (855) 309-7701

Fax: (858) 966-4062

 After Hours Phone: (855)
309-7701

Provider Gender: Male


NPI: 1891858379


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A

OTOLARYNGOLOGY


MAGIT, ANTHONY

Provider ID: 299481

Board Certified Specialty: No
ANTHONY E MAGIT

 8899 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1891858379

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

OTOLARYNGOLOGY

MAGIT, ANTHONY

Provider ID: 299482

Board Certified Specialty: No
ANTHONY E MAGIT

 200 W ARBOR DR

SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1891858379

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

OTOLARYNGOLOGY


MAGIT, ANTHONY

Provider ID: 299480

Board Certified Specialty: No
ANTHONY E MAGIT

 16950 VIA TAZON

SAN DIEGO, CA 92127

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1891858379

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

OTOLARYNGOLOGY

D3. Directorio de proveedores especialistas

MATSUOKA, AKIHIRO

Provider ID: 299590

Board Certified Specialty: No

AKIHIRO MATSUOKA

16950 VIA TAZON

SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1669630653

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

OTOLARYNGOLOGY

MATSUOKA, AKIHIRO

Provider ID: 299592

Board Certified Specialty: No

AKIHIRO MATSUOKA

200 W ARBOR DR

SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1669630653

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

OTOLARYNGOLOGY

MATSUOKA, AKIHIRO

Provider ID: 299591

Board Certified Specialty: No

AKIHIRO MATSUOKA

8899 UNIVERSITY CENTER

LN

SAN DIEGO, CA 92122

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1669630653

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

OTOLARYNGOLOGY

NGUYEN, QUYEN

Provider ID: 299607

Board Certified Specialty: No

QUYEN T NGUYEN

8899 UNIVERSITY CENTER

LN

SAN DIEGO, CA 92122

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1477524452

Provider English Spoken: Y

Provider Language(s)

Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

OTOLARYNGOLOGY

NGUYEN, QUYEN

Provider ID: 299603

Board Certified Specialty: No

QUYEN T NGUYEN

200 W ARBOR DR

SAN DIEGO, CA 92103

Phone: (619) 543-6631

Fax: (619) 543-6532

After Hours Phone: (619)
543-6631

Provider Gender: Female

NPI: 1477524452

Provider English Spoken: Y

Provider Language(s)

Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER



D3. Directorio de proveedores especialistas

 Hours: M-F
8:00AM-5:00PM
 Website: N/A

OTOLARYNGOLOGY



NGUYEN, QUYEN

Provider ID: 299606
Board Certified Specialty: No
QUYEN T NGUYEN

 16950 VIA TAZON
SAN DIEGO, CA 92127
 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1477524452

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, SCRIPPS
GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N



 Accessibility: CONTACT
PROVIDER


 Website: N/A

OTOLARYNGOLOGY

PATEL, VIJAY

Provider ID: 297037
Board Certified Specialty: No
VIJAY PATEL

 3030 CHILDRENS WAY STE
1
SAN DIEGO, CA 92123
 Phone: (858) 309-7701
Fax: (858) 966-8038

 After Hours Phone: (858)
309-7701

Provider Gender: Male
NPI: 1508250747

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, VALLEY CHILDRENS
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Hours: M-F
8:00AM-5:00PM


 Website: N/A

OTOLARYNGOLOGY

VAHABZADEH-HAGH, ANDREW

Provider ID: 299508
Board Certified Specialty: No
ANDREW M

 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1346506920

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RONALD
REAGAN UCLA MED CTR,
SANTA MONICA UCLA MED

CTR, UCSD LA JOLLA JOHN
SALLY THORNTON, UCSD
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER



 Website: N/A

OTOLARYNGOLOGY

VAHABZADEH-HAGH, ANDREW

Provider ID: 299509
Board Certified Specialty: No
ANDREW M

VAHABZADEH-HAGH

 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1346506920

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RONALD
REAGAN UCLA MED CTR,
SANTA MONICA UCLA MED

CTR, UCSD LA JOLLA JOHN
SALLY THORNTON, UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

D3. Directorio de proveedores especialistas

OTOLARYNGOLOGY

VAHABZADEH-HAGH, ANDREW

Provider ID: 299507
Board Certified Specialty: No
ANDREW M

VAHABZADEH-HAGH

16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1346506920

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RONALD
REAGAN UCLA MED CTR,
SANTA MONICA UCLA MED
CTR, UCSD LA JOLLA JOHN
SALLY THORNTON, UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

OTOLARYNGOLOGY

WATSON, DEBORAH

Provider ID: 299641
Board Certified Specialty: No
DEBORAH WATSON

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1346270816

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OTOLARYNGOLOGY

WATSON, DEBORAH

Provider ID: 299642
Board Certified Specialty: No
DEBORAH WATSON

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1346270816

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OTOLARYNGOLOGY

WATSON, DEBORAH

Provider ID: 299639
Board Certified Specialty: No
DEBORAH WATSON

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (619) 543-6631

After Hours Phone: (619)
543-6631

Provider Gender: Female

NPI: 1346270816

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OTOLARYNGOLOGY

WEISSBROD, PHILIP

Provider ID: 299610
Board Certified Specialty: No
PHILIP A WEISSBROD

200 W ARBOR DR STE 505
SAN DIEGO, CA 92103

Phone: (858) 657-8590

After Hours Phone: (858)
657-8590



Provider Gender: Male

NPI: 1366590853

Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD

D3. Directorio de proveedores especialistas

MEDICAL CTR, SCRIPPS
GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

OTOLARYNGOLOGY

WEISSBROD, PHILIP







Provider ID: 299615
Board Certified Specialty: No
PHILIP A WEISSBROD
 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1366590853
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, SCRIPPS
GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

OTOLARYNGOLOGY






WEISSBROD, PHILIP

Provider ID: 299614
Board Certified Specialty: No

PHILIP A WEISSBROD
 16950 VIA TAZON
SAN DIEGO, CA 92127
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1366590853
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, SCRIPPS
GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

OTOLARYNGOLOGY

YAN, CAROL




Provider ID: 298412
Board Certified Specialty: No
CAROL H YAN
 16950 VIA TAZON
SAN DIEGO, CA 92127
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1619237260
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Chinese
Cultural Competency: N




Hospital Affiliation: Stanford
Health Care, LUCILE SALTER
PACKARD CHILDRENS HOSP,

UCSD LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

OTOLARYNGOLOGY

YAN, CAROL

Provider ID: 298413
Board Certified Specialty: No
CAROL H YAN
 8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1619237260
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Chinese
Cultural Competency: N
Hospital Affiliation: Stanford
Health Care, LUCILE SALTER
PACKARD CHILDRENS HOSP,
UCSD LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

D3. Directorio de proveedores especialistas

 Website: N/A


OTOLARYNGOLOGY

YAN, CAROL

Provider ID: 298414


Board Certified Specialty: No
CAROL H YAN

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1619237260

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese


Cultural Competency: N


Hospital Affiliation: Stanford
Health Care, LUCILE SALTER
PACKARD CHILDRENS HOSP,
UCSD LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

PATHOLOGY ANATOMIC


CLINICAL

ALLEN, ELIZABETH

Provider ID: 275756


Board Certified Specialty: No
ELIZABETH S ALLEN

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1174814065

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

UCSD MEDICAL CTR, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,

SCRIPPS GREEN HOSPITAL,


SCRIPPS GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PATHOLOGY ANATOMIC


CLINICAL

BROOME, HELEN

Provider ID: 275720

Board Certified Specialty: No
HELEN E BROOME

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1184674145

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL


CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PATHOLOGY ANATOMIC


CLINICAL

BROOME, HELEN

Provider ID: 275721

Board Certified Specialty: No
HELEN E BROOME

 10300 CAMPUS POINT DR
SAN DIEGO, CA 92121

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1184674145

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR


Medi-Cal Open Panel: Yes


D3. Directorio de proveedores especialistas

Min/Max Age: 0\999

American Sign Language (ASL): Provider ID: 247580

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PATHOLOGY ANATOMIC

CLINICAL

BUI, JACK

Provider ID: 247581

Board Certified Specialty: No
JACK D BUI

 10300 CAMPUS POINT DR
SAN DIEGO, CA 92121

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1942529821

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PATHOLOGY ANATOMIC


CLINICAL

BUI, JACK


Provider ID: 247580

Board Certified Specialty: No
JACK D BUI

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1942529821

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PATHOLOGY ANATOMIC


CLINICAL

QUINTANA, PAULINA


Provider ID: 296765

Board Certified Specialty: No
QUINTANA, PAULINA

 292 EUCLID AVE STE 115
SAN DIEGO, CA 92114

 Phone: (619) 266-3332

Fax: (619) 266-6000

 After Hours Phone: (619)
266-3332

Provider Gender: Female

NPI: 1164482477

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: PARADISE
VALLEY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PATHOLOGY ANATOMIC


CLINICAL

ROMA, ANDRES

Provider ID: 275826

Board Certified Specialty: No
ANDRES A ROMA

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1295912657

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT

D3. Directorio de proveedores especialistas

PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PATHOLOGY ANATOMIC CLINICAL

SHABAIK, AHMED

Provider ID: 275781
Board Certified Specialty: No
AHMED S SHABAIK

200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1679521579

Provider English Spoken: Y
Provider Language(s)
Spoken: Arabic

Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PATHOLOGY ANATOMIC CLINICAL

SONG, WEI

Provider ID: 300001

Board Certified Specialty: No
WEI SONG

10300 CAMPUS POINT DR
SAN DIEGO, CA 92121

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1306164157

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT
PROVIDER

Website: N/A

PATHOLOGY ANATOMIC CLINICAL

STEPHENS, LAURA

Provider ID: 300042

Board Certified Specialty: No

LAURA D STEPHENS

10300 CAMPUS POINT DR
SAN DIEGO, CA 92121

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1942561212

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT
PROVIDER

Website: N/A

PATHOLOGY ANATOMIC CLINICAL

VAVINSKAYA, VERA

Provider ID: 275789

Board Certified Specialty: No
VERA VAVINSKAYA

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1174757181

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PATHOLOGY ANATOMIC CLINICAL

WANG, DEHUA

Provider ID: 289153

Board Certified Specialty: No
DEHUA WANG

3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123

Phone: (858) 966-6776

Fax: (858) 966-6707

After Hours Phone: (858)

D3. Directorio de proveedores especialistas

966-6776
Provider Gender: Female
NPI: 1578790655
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Chinese
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PEDIATRIC ALLERGY / IMMUNOLOGY

ALKATIB, RHONDA
Provider ID: 291226
Board Certified Specialty: No
RHONDA E ALKATIB
 2655 CAMINO DEL RIO N
STE 425
SAN DIEGO, CA 92108
 Phone: (619) 286-6687
Fax: (619) 286-6695
 After Hours Phone: (619)
286-6687
Provider Gender: Female
NPI: 1417363086
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, Spanish
Cultural Competency: N
Hospital Affiliation: ALVARADO
HOSPITAL LLC
Medi-Cal Open Panel: Yes

Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PEDIATRIC ALLERGY / IMMUNOLOGY

COLLINS, CATHLEEN
Provider ID: 206083
Board Certified Specialty: No
CATHLEEN A COLLINS
 3030 CHILDRENS WAY STE
2
SAN DIEGO, CA 92123
 Phone: (858) 966-5961
 After Hours Phone: (858)
966-5961

Provider Gender: Female
NPI: 1205128089
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: LUCILE
SALTER PACKARD CHILDRENS
HOSP, Stanford Health Care,
RADY CHILDRENS HOSPITAL
SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PEDIATRIC ALLERGY / IMMUNOLOGY

COLLINS, CATHLEEN
Provider ID: 285133
Board Certified Specialty: No
CATHLEEN A COLLINS
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-8800
 After Hours Phone: (858)
966-8800
Provider Gender: Female
NPI: 1205128089
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: LUCILE
SALTER PACKARD CHILDRENS
HOSP, Stanford Health Care,
RADY CHILDRENS HOSPITAL
SAN DIEGO
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
 Website: N/A

PEDIATRIC ALLERGY / IMMUNOLOGY

GENG, BOB
Provider ID: 205824
Board Certified Specialty: No
BOB GENG
 3030 CHILDRENS WAY STE
2
SAN DIEGO, CA 92123
 Phone: (858) 966-5961
 After Hours Phone: (858)
966-5961
Provider Gender: Male
NPI: 1356570758
 Provider English Spoken: Y


D3. Directorio de proveedores especialistas


Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD LA JOLLA JOHN
SALLY THORNTON, UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC ALLERGY / IMMUNOLOGY


GENG, BOB

Provider ID: 205823

Board Certified Specialty: No
BOB GENG

 5776 RUFFIN RD
SAN DIEGO, CA 92123

 Phone: (858) 292-1144

 After Hours Phone: (858)
292-1144

Provider Gender: Male

NPI: 1356570758

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD LA JOLLA JOHN
SALLY THORNTON, UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC ALLERGY / IMMUNOLOGY


GREINER, ALEXANDER

Provider ID: 205697

Board Certified Specialty: No
ALEXANDER N GREINER


 5776 RUFFIN RD
SAN DIEGO, CA 92123


 Phone: (858) 966-4900

 After Hours Phone: (858)
966-4900

Provider Gender: Male

NPI: 1609801299

 Provider English Spoken: Y

 Provider Language(s)
Spoken: French, German,
Spanish

Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-0:00PM

 Website: N/A

PEDIATRIC ALLERGY / IMMUNOLOGY


LEIBEL, SYDNEY


Provider ID: 205724

Board Certified Specialty: No

SYDNEY A LEIBEL

 5776 RUFFIN RD
SAN DIEGO, CA 92123

 Phone: (858) 292-1144

 After Hours Phone: (858)
292-1144

Provider Gender: Male

NPI: 1861666919

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC ALLERGY / IMMUNOLOGY


LEIBEL, SYDNEY


Provider ID: 205725

Board Certified Specialty: No
SYDNEY A LEIBEL

 3030 CHILDRENS WAY FL
2 NORTH

SAN DIEGO, CA 92123

 Phone: (858) 966-5961

 After Hours Phone: (858)
966-5961

Provider Gender: Male

NPI: 1861666919

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

D3. Directorio de proveedores especialistas


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): Provider ID: 284120

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC CARDIOLOGY

BOCK, MATTHEW

Provider ID: 280463

Board Certified Specialty: No
MATTHEW J BOCK

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5855

Fax: (858) 966-7903

 After Hours Phone: (858)
966-5855

Provider Gender: Male

NPI: 1356514624

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: LOMA
LINDA UNIVERSITY MED CTR,
LOMA LINDA UNIVERSITY
CHILDRENS HOSPITAL, RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC CARDIOLOGY


BORQUEZ, ALEJANDRO

Provider ID: 284120

Board Certified Specialty: No

ALEJANDRO A BORQUEZ

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123



 Phone: (858) 966-5855

Fax: (858) 966-7903

 After Hours Phone: (858)
966-5855

Provider Gender: Female

NPI: 1114277787

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC CARDIOLOGY

CHAU, PETER

Provider ID: 271427

Board Certified Specialty: No
PETER CHAU

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5855

Fax: (858) 966-7903

 After Hours Phone: (858)
966-5855

Provider Gender: Male

NPI: 1407146947

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: LOMA


LINDA UNIVERSITY
CHILDRENS HOSPITAL, LOMA
LINDA UNIVERSITY MED CTR,
RADY CHILDRENS HOSPITAL
SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC CARDIOLOGY

DAVIS, CHRISTOPHER

Provider ID: N/A

Board Certified Specialty: No
CHRISTOPHER K DAVIS

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5855

Fax: (858) 966-7903

 After Hours Phone: (858)
966-5855

Provider Gender: Male

NPI: 1760691950

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, GROSSMONT
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL, SHARP
MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes


D3. Directorio de proveedores especialistas

Min/Max Age: 0\19

American Sign Language (ASL): Provider ID: 260595

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC CARDIOLOGY

DO, THOMAS

Provider ID: 206162

Board Certified Specialty: No
THOMAS B DO

 3020 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123

 Phone: (858) 366-5855
Fax: (858) 966-7423

 After Hours Phone: (858)
366-5855

Provider Gender: Male

NPI: 1053545376

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, CHILDRENS HOSPITAL
AT MISSION, CHILDRENS
HOSPITAL OF ORANGE
COUNTY


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC CARDIOLOGY

DUMMER, KIRSTEN

Provider ID: 260595

Board Certified Specialty: No
KIRSTEN B DUMMER

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5855
Fax: (858) 966-7903

 After Hours Phone: (858)
966-5855

Provider Gender: Female

NPI: 1780642280

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC CARDIOLOGY

GOLDING, IAN

Provider ID: 210823

Board Certified Specialty: No
IAN F GOLDING

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5855
Fax: (858) 966-7903

 After Hours Phone: (858)
966-5855

Provider Gender: Male

NPI: 1962974956

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC CARDIOLOGY

GORDON, BRENT

Provider ID: 295391

Board Certified Specialty: No
BRENT M GORDON

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5855
Fax: (858) 966-7903

 After Hours Phone: (858)
966-5855

Provider Gender: Male

NPI: 1669480083

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: POMONA
VALLEY HOSP MED CTR,
SANTA MONICA UCLA MED
CTR, SAN ANTONIO COMM
HOSP, LOMA LINDA

UNIVERSITY CHILDRENS

HOSPITAL, LOMA LINDA


UNIVERSITY MED CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

D3. Directorio de proveedores especialistas

 Website: N/A

PEDIATRIC CARDIOLOGY


HALEY, JESSICA

Provider ID: 205687

Board Certified Specialty: No

JESSICA E HALEY

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123


 Phone: (858) 966-5855

Fax: (858) 966-7903

 After Hours Phone: (858)
966-5855

Provider Gender: Female

NPI: 1023329885

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC CARDIOLOGY


JUSTINO, HENRI

Provider ID: 284123

Board Certified Specialty: No

HENRI JUSTINO

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123


 Phone: (858) 966-5855

Fax: (858) 966-7903

 After Hours Phone: (858)
966-5855

Provider Gender: Male

NPI: 1518036821

 Provider English Spoken: Y

Cultural Competency: N


Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC CARDIOLOGY

LEHNERTSCHUCHARDT, ELEANOR


Provider ID: 262250

Board Certified Specialty: No

ELEANOR L

LEHNERTSCHUCHARDT

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123


 Phone: (858) 966-5855

Fax: (858) 966-7903

 After Hours Phone: (858)
966-5855

Provider Gender: Female

NPI: 1760707210

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC CARDIOLOGY


MCCANDLESS, RACHEL

Provider ID: 206147


Board Certified Specialty: No

RACHEL T MCCANDLESS

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-4912

Fax: (858) 966-7903

 After Hours Phone: (858)
966-4912

Provider Gender: Female

NPI: 1487821815

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF

CHILDREN'S HOSPITAL


OAKLAND


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC CARDIOLOGY

MUELLER, DANA

Provider ID: 245535

Board Certified Specialty: No

DANA M MUELLER

 3020 CHILDRENS WAY

D3. Directorio de proveedores especialistas

SAN DIEGO, CA 92123
Phone: (858) 966-5855
After Hours Phone: (858) 966-5855

Provider Gender: Female
NPI: 1184915712

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

PEDIATRIC CARDIOLOGY

NARAYAN, HARI

Provider ID: 205349

Board Certified Specialty: No
HARI K NARAYAN

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5855
Fax: (858) 966-7903

After Hours Phone: (858)
966-5855

Provider Gender: Male
NPI: 1376705707

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

Website: N/A

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC CARDIOLOGY

RAO, ROHIT

Provider ID: 206122

Board Certified Specialty: No
ROHIT P RAO

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5855
Fax: (858) 966-7903

After Hours Phone: (858)
966-5855

Provider Gender: Male
NPI: 1063452779

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC CARDIOLOGY

SILVASEPULVEDA, JOSE

Provider ID: 206297

Board Certified Specialty: Yes
JOSE A SILVASEPULVEDA

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5855

Fax: (858) 966-7903

After Hours Phone: (858)
966-5855

Provider Gender: Male
NPI: 1417222472

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC CARDIOLOGY

STEINBERG, LEONARD

Provider ID: 248208

Board Certified Specialty: No
LEONARD G STEINBERG

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5855
After Hours Phone: (858)
966-5855

Provider Gender: Male
NPI: 1538279484

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

D3. Directorio de proveedores especialistas

PEDIATRIC CARDIOLOGY

VAUGHN, GABRIELLE

Provider ID: 205643

Board Certified Specialty: No

GABRIELLE R VAUGHN

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 576-1700

Fax: (858) 966-7423

After Hours Phone: (858)
576-1700

Provider Gender: Female

NPI: 1891004461

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, UCSF BENIOFF

CHILDREN'S HOSPITAL

OAKLAND

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

PEDIATRIC CARDIOLOGY

VELLOREGOVARDHAN,

SHILPA

Provider ID: 271454

Board Certified Specialty: No

SHILPA

VELLOREGOVARDHAN

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5855

Fax: (858) 966-7903

After Hours Phone: (858)
966-5855

Provider Gender: Female

NPI: 1477702165

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC CARDIOLOGY

WERHO, DAVID

Provider ID: 206316

Board Certified Specialty: No

DAVID K WERHO

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5855

Fax: (858) 966-7903

After Hours Phone: (858)
966-5855

Provider Gender: Male

NPI: 1235391863

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC CARDIOLOGY

WILLIAMS, MATTHEW

Provider ID: 206287

Board Certified Specialty: No

MATTHEW R WILLIAMS

3020 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123

Phone: (858) 966-5855

Fax: (858) 966-7423

After Hours Phone: (858)
966-5855

Provider Gender: Male

NPI: 1831423250

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,

UCSF BENIOFF CHILDREN'S
HOSPITAL OAKLAND

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC CARDIOLOGY

YOUNOSZAI, ADEL


Provider ID: 303133

Board Certified Specialty: No

ADEL YOUNOSZAI

D3. Directorio de proveedores especialistas

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123


 Phone: (858) 966-5855

Fax: (858) 966-7903

 After Hours Phone: (858)
966-5855

Provider Gender: Male

NPI: 1952493819

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

PEDIATRIC DERMATOLOGY


EICHENFIELD, DAWN

Provider ID: 303679

Board Certified Specialty: No

DAWN Z EICHENFIELD

 7910 FROST ST STE 120
SAN DIEGO, CA 92123


 Phone: (858) 966-6795

Fax: (858) 966-7479

 After Hours Phone: (858)
966-6795

Provider Gender: Female

NPI: 1295198091

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19


American Sign Language (ASL): ROXANA AGHILI

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

PEDIATRIC DERMATOLOGY


EICHENFIELD, DAWN

Provider ID: 283142

Board Certified Specialty: No

DAWN Z EICHENFIELD

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123


 Phone: (858) 966-6795

Fax: (858) 966-7479

 After Hours Phone: (858)
966-6795

Provider Gender: Female

NPI: 1295198091

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

PEDIATRIC EMERGENCY

MEDICINE

AGHILI, ROXANA


Provider ID: 303780

Board Certified Specialty: No

ROXANA AGHILI

 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

 Phone: (619) 280-2905


Fax: (619) 283-1614

 After Hours Phone: (619)
280-2905

Provider Gender: Female

NPI: 1851927883

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi

Cultural Competency: N

Hospital Affiliation: KAISER

FOUNDATION HOSPITAL SAN
DIEGO, RADY CHILDRENS

HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 1:00PM-10:00PM

M-F 4:00PM-10:00PM

SA 1:00PM-10:00PM

 Website: N/A

PEDIATRIC EMERGENCY

MEDICINE


AGHILI, ROXANA


Provider ID: 304918

Board Certified Specialty: No

ROXANA AGHILI

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123


 Phone: (858) 966-8800


 After Hours Phone: (858)
966-8800

Provider Gender: Female

D3. Directorio de proveedores especialistas

NPI: 1851927883

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi

Cultural Competency: N


Hospital Affiliation: KAISER
FOUNDATION HOSPITAL SAN
DIEGO, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE


AMIRNOVIN, RAMBOD

Provider ID: 297673

Board Certified Specialty: No
RAMBOD AMIRNOVIN


 3020 CHILDRENS WAY
SAN DIEGO, CA 92123


 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Male

NPI: 1629104492

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi, Persian,
Spanish

Cultural Competency: N

Hospital Affiliation:
CHILDRENS HOSP OF LOS
ANGELES, LOMA LINDA
UNIVERSITY CHILDRENS
HOSPITAL, LOMA LINDA
UNIVERSITY MED CTR, RADY

CHILDRENS HOSPITAL SAN

DIEGO, LONG BEACH

MEMORIAL MED CTR, EARL

AND LORRAINE MILLER

CHILDRENS HSP

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE


AUSTIN-PAGE, LUKAS

Provider ID: 205589

Board Certified Specialty: No
LUKAS R AUSTIN-PAGE


 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Male

NPI: 1326301862

 Provider English Spoken: Y

Cultural Competency: N


Hospital Affiliation:
CHILDRENS HOSP OF LOS
ANGELES, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE


BIALOSTOZKY, MARIO

Provider ID: 206011

Board Certified Specialty: No
MARIO M BIALOSTOZKY

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Male

NPI: 1609281450

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS MERCY

HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

BRYL, AMY

Provider ID: 205967

Board Certified Specialty: No
AMY W BRYL

 3020 CHILDRENS WAY

D3. Directorio de proveedores especialistas

SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Female
NPI: 1497079487
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
UCSF BENIOFF CHILDREN'S
HOSPITAL OAKLAND,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
RADY CHILDRENS HOSPITAL
SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Website: N/A

PEDIATRIC EMERGENCY MEDICINE

CAMPBELL, SARA

Provider ID: 206335
Board Certified Specialty: No
SARA S CAMPBELL
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Female
NPI: 1841687563
Provider English Spoken: Y
Provider Language(s)
Spoken: Farsi, Spanish

Cultural Competency: N
Hospital Affiliation:
CHILDRENS HOSP OF LOS
ANGELES, RADY CHILDRENS
HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PEDIATRIC EMERGENCY MEDICINE

CHOO, SUN

Provider ID: 296535
Board Certified Specialty: No
SUN H CHOO
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Female
NPI: 1700047628
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC EMERGENCY MEDICINE

CHOO, SUN


Provider ID: 296536
Board Certified Specialty: No
SUN H CHOO
4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
Phone: (619) 280-2905
Fax: (619) 283-1614
After Hours Phone: (619) 280-2905
Provider Gender: Female
NPI: 1700047628
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
Website: N/A

PEDIATRIC EMERGENCY MEDICINE




CONRAD, HEATHER

Provider ID: 205960
Board Certified Specialty: No
HEATHER B CONRAD
3020 CHILDRENS WAY
SAN DIEGO, CA 92123

D3. Directorio de proveedores especialistas





 Phone: (858) 966-8800
 After Hours Phone: (858) 966-8800
Provider Gender: Female
NPI: 1205813409
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SHARP CHULA VISTA MED CTR, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19




American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE




DELRE, ANGELO


Provider ID: 206081
Board Certified Specialty: No
ANGELO M DELRE
 3020 CHILDRENS WAY SAN DIEGO, CA 92123
 Phone: (858) 966-8800
 After Hours Phone: (858) 966-8800
Provider Gender: Male
NPI: 1275761371
 Provider English Spoken: Y



Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

DEVERA, GEMMIE




Provider ID: 288572
Board Certified Specialty: No
GEMMIE S DEVERA
 3020 CHILDRENS WAY SAN DIEGO, CA 92123
 Phone: (858) 966-8800
 After Hours Phone: (858) 966-8800


Provider Gender: Female
NPI: 1366622078
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL): N



 Accessibility: CONTACT PROVIDER
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

DO, STEPHANIE




Provider ID: 287393
Board Certified Specialty: No
STEPHANIE T DO
 3020 CHILDRENS WAY SAN DIEGO, CA 92123
 Phone: (858) 966-8800
 After Hours Phone: (858) 966-8800

Provider Gender: Female
NPI: 1750513644
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Martin Luther King Jr Community Hospital, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

DONOFRIO-ODMANN, JOY

Provider ID: 205375
Board Certified Specialty: No
JOY J DONOFRIO
 3020 CHILDRENS WAY SAN DIEGO, CA 92123
 Phone: (858) 966-8800
 After Hours Phone: (858)

D3. Directorio de proveedores especialistas

966-8800
Provider Gender: Female
NPI: 1740571165
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: VALLEY CHILDRENS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

PEDIATRIC EMERGENCY **MEDICINE**

EKPENYONG, ATIM
Provider ID: 205722
Board Certified Specialty: No
ATIM O EKPENYONG

3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 576-1700
 After Hours Phone: (858) 576-1700

Provider Gender: Female
NPI: 1932318565
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST

HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PEDIATRIC EMERGENCY **MEDICINE**

FISHER, JAY
Provider ID: 295690
Board Certified Specialty: No
JAY FISHER

3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-8800
 After Hours Phone: (858) 966-8800

Provider Gender: Male
NPI: 1629118518
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PEDIATRIC EMERGENCY **MEDICINE**

GIBONEY, JENNIFER
Provider ID: 205925
Board Certified Specialty: No
JENNIFER C GIBONEY

3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-8800
 After Hours Phone: (858) 966-8800

Provider Gender: Female
NPI: 1275895849
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PEDIATRIC EMERGENCY **MEDICINE**

GORHAM, LAURA
Provider ID: 275784
Board Certified Specialty: No
LAURA M GORHAM

4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
 Phone: (619) 280-2058
Fax: (858) 633-4682
 After Hours Phone: (619) 280-2058


Provider Gender: Female
NPI: 1316162324
 Provider English Spoken: Y


D3. Directorio de proveedores especialistas

Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-2:00PM


 Website: N/A


PEDIATRIC EMERGENCY MEDICINE

GROSS, MATTHEW

Provider ID: 297172

Board Certified Specialty: No
MATTHEW F GROSS

 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105

 Phone: (619) 280-2905

Fax: (619) 283-1614

 After Hours Phone: (619)
280-2905

Provider Gender: Male

NPI: 1942223664



 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
 Website: N/A


PEDIATRIC EMERGENCY MEDICINE


GROSS, MATTHEW

Provider ID: 297174

Board Certified Specialty: No
MATTHEW F GROSS

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Male

NPI: 1942223664

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE


HERSKOVITZ, SCOTT

Provider ID: 261045

Board Certified Specialty: Yes
SCOTT A HERSKOVITZ

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Male

NPI: 1225393499

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE


HUNTER, WENDY

Provider ID: 206278

Board Certified Specialty: No
WENDY L HUNTER

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1053515551

 Provider English Spoken: Y
Cultural Competency: N




Hospital Affiliation: UCSF
BENIOFF CHILDREN'S
HOSPITAL OAKLAND, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

D3. Directorio de proveedores especialistas

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
 *Website: N/A*

PEDIATRIC EMERGENCY


MEDICINE


INDRA, SEAN

Provider ID: 302625

*Board Certified Specialty: No
SEAN W INDRA*

 *3020 CHILDRENS WAY
SAN DIEGO, CA 92123*

 *Phone: (858) 966-8800*

 *After Hours Phone: (858)
966-8800*

Provider Gender: Male

NPI: 1427349091

 *Provider English Spoken: Y
Cultural Competency: N*


Hospital Affiliation: RADY


*CHILDRENS HOSPITAL SAN
DIEGO, VALLEY CHILDRENS
HOSPITAL*

Medi-Cal Open Panel: No

Min/Max Age: 0\19

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Website: N/A*

PEDIATRIC EMERGENCY



MEDICINE

ISHIMINE, PAUL

Provider ID: 206236

*Board Certified Specialty: No
PAUL T ISHIMINE*

 *3020 CHILDRENS WAY
SAN DIEGO, CA 92123*

 *Phone: (858) 966-8800*
 *After Hours Phone: (858)
966-8800*

Provider Gender: Male

NPI: 1437184421

 *Provider English Spoken: Y
Cultural Competency: N*

Hospital Affiliation: UCSD

MEDICAL CTR, RADY


*CHILDRENS HOSPITAL SAN
DIEGO*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

PEDIATRIC EMERGENCY


MEDICINE

JACKSON, TAYLOR

Provider ID: 302127

*Board Certified Specialty: No
TAYLOR J JACKSON*

 *3020 CHILDRENS WAY
SAN DIEGO, CA 92123*

 *Phone: (858) 966-5999*

Fax: (858) 966-8519

 *After Hours Phone: (858)
966-5999*

Provider Gender: Male

NPI: 1326543752

 *Provider English Spoken: Y
Cultural Competency: N*

Hospital Affiliation: RADY


*CHILDRENS HOSPITAL SAN
DIEGO*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

PEDIATRIC EMERGENCY


MEDICINE


KHAN, SHAHFAR

Provider ID: 294094

*Board Certified Specialty: No
SHAHFAR KHAN*

 *3020 CHILDRENS WAY
SAN DIEGO, CA 92123*


 *Phone: (858) 966-8800*

 *After Hours Phone: (858)
966-8800*

Provider Gender: Female

NPI: 1013361815

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Hindi, Urdu*

Cultural Competency: N

Hospital Affiliation: RADY


*CHILDRENS HOSPITAL SAN
DIEGO*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Website: N/A*

PEDIATRIC EMERGENCY

MEDICINE

KINGDON, JOANNA

Provider ID: 302317

D3. Directorio de proveedores especialistas

Board Certified Specialty: No
JOANNA E KINGDON

4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

Phone: (619) 280-2905

Fax: (619) 283-1614

After Hours Phone: (619)
280-2905

Provider Gender: Female

NPI: 1609495399

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

Website: N/A

PEDIATRIC EMERGENCY MEDICINE

MCDANIEL, MICHELE

Provider ID: 248071

Board Certified Specialty: No

MICHELE A MCDANIEL

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1366761959

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,

SOUTHWEST HEALTHCARE

INLAND VALLEY HOSPITAL,

SOUTHWEST HEALTHCARE

RANCHO SPRINGS HOSPITAL,

RADY CHILDRENS HOSPITAL

SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

PEDIATRIC EMERGENCY MEDICINE

MENDES, CHANTAL

Provider ID: 295668

Board Certified Specialty: No

CHANTAL M MENDES

4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

Phone: (619) 280-2905

Fax: (619) 283-1614

After Hours Phone: (619)
280-2905

Provider Gender: Female

NPI: 1134681265

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

Website: N/A

PEDIATRIC EMERGENCY MEDICINE

MESIWALA, ADNAN

Provider ID: 275654

Board Certified Specialty: Yes

ADNAN K MESIWALA

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858)
966-8800

Provider Gender: Male

NPI: 1528483955

Provider English Spoken: Y

Provider Language(s)
Spoken: Gujarati

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC EMERGENCY MEDICINE

METCALF, ASHLEY

Provider ID: 205348

D3. Directorio de proveedores especialistas

Board Certified Specialty: No
ASHLEY M METCALF

3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858)
966-8800

Provider Gender: Female
NPI: 1073740205

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SOUTHWEST
HEALTHCARE INLAND VALLEY
HOSPITAL, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PEDIATRIC EMERGENCY MEDICINE

MILLS, DAVID

Provider ID: 302146
Board Certified Specialty: No
DAVID M MILLS

3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858)
966-8800

Provider Gender: Male
NPI: 1194145946

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Website: N/A

PEDIATRIC EMERGENCY MEDICINE

MURRAY, MATTHEW

Provider ID: 205759
Board Certified Specialty: No
MATTHEW P MURRAY

3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858)
966-8800

Provider Gender: Male
NPI: 1215103023

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,
RADY CHILDRENS HOSPITAL
SAN DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC EMERGENCY MEDICINE

NGUYEN, MYLINH

Provider ID: 262299
Board Certified Specialty: No
MYLINH T NGUYEN

3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858)
966-8800

Provider Gender: Female
NPI: 1730428053

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PEDIATRIC EMERGENCY MEDICINE

NGUYEN, MARGARET


Provider ID: 270705
Board Certified Specialty: No
MARGARET B NGUYEN

3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858)
966-8800

Provider Gender: Female

D3. Directorio de proveedores especialistas

NPI: 1942485248


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE


OZCAN, ALI

Provider ID: 287923

Board Certified Specialty: No
ALI K OZCAN


 3020 CHILDRENS WAY
SAN DIEGO, CA 92123


 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Male

NPI: 1265867683

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Turkish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, LOMA LINDA
UNIVERSITY MED CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): BRIAN L PARK

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE


PADE, KATHRYN

Provider ID: 262411

Board Certified Specialty: No
KATHRYN H PADE

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1215375183

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: Stanford
Health Care, LUCILE SALTER
PACKARD CHILDRENS HOSP,
RADY CHILDRENS HOSPITAL
SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE

PARK, BRIAN

Provider ID: 302352

Board Certified Specialty: No

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Male

NPI: 1710418744


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

PARK, RONALD


Provider ID: 295457

Board Certified Specialty: No

RONALD E PARK

 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

 Phone: (619) 280-2905

Fax: (619) 283-1614

 After Hours Phone: (619)
280-2905

Provider Gender: Male

NPI: 1881695914

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


D3. Directorio de proveedores especialistas

Hospital Affiliation: TRI CITY
MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: No
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE


PARKER, SHERINE

Provider ID: 205784

Board Certified Specialty: No
SHERINE B PARKER


 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1477626513

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, Spanish

Cultural Competency: N

Hospital Affiliation: GLENDALE
ADVENTIST MED CTR,
GLENDALE MEMORIAL HOSP
AND HEALTH CTR, TRI CITY
MEDICAL CTR, RADY


CHILDRENS HOSPITAL SAN
DIEGO, VALLEY CHILDRENS
HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE


QUINONES-PEREZ, BIANCA

Provider ID: 206947

Board Certified Specialty: No
BIANCA N QUINONES-PEREZ


 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1124360565

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

QUINONES-PEREZ, BIANCA


Provider ID: 206949

Board Certified Specialty: No

BIANCA N QUINONES-PEREZ

 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

 Phone: (619) 280-2905

Fax: (619) 283-1614

 After Hours Phone: (619)
280-2905

Provider Gender: Female

NPI: 1124360565

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM

SA 1:00PM-10:00PM

 Website: N/A


PEDIATRIC EMERGENCY MEDICINE


RANASURIYA, DUNISHA

Provider ID: 216970

Board Certified Specialty: No
DUNISHA G RANASURIYA

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1740468057

D3. Directorio de proveedores especialistas

 *Provider English Spoken: Y*
Cultural Competency: N

*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): SAMUEL RUSSELL

N

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


PEDIATRIC EMERGENCY MEDICINE


RUIZ, MONICA

Provider ID: 305340

*Board Certified Specialty: No
MONICA O RUIZ*


 *3020 CHILDRENS WAY
SAN DIEGO, CA 92123*

 *Phone: (858) 966-8800*

 *After Hours Phone: (858)
966-8800*

Provider Gender: Female

NPI: 1982059689

 *Provider English Spoken: Y*

 *Provider Language(s)
Spoken: Spanish*

Cultural Competency: N


*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

 *Website: N/A*

PEDIATRIC EMERGENCY MEDICINE


RUSSELL, SAMUEL


Provider ID: 301249

Board Certified Specialty: No

SAMUEL RUSSELL


 *3020 CHILDRENS WAY
SAN DIEGO, CA 92123*

 *Phone: (858) 966-8800*

 *After Hours Phone: (858)
966-8800*

Provider Gender: Male

NPI: 1215564265

 *Provider English Spoken: Y*

Cultural Competency: N

*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

 *Website: N/A*

PEDIATRIC EMERGENCY MEDICINE

RUSSELL, SAMUEL


Provider ID: 301250

Board Certified Specialty: No

SAMUEL RUSSELL

 *4305 UNIVERSITY AVE STE
150*

SAN DIEGO, CA 92105

 *Phone: (619) 280-2905*

Fax: (619) 283-1614

 *After Hours Phone: (619)
280-2905*

Provider Gender: Male

NPI: 1215564265

 *Provider English Spoken: Y*
Cultural Competency: N

*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO*


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 *Accessibility: CONTACT
PROVIDER*

 *Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM*

SA 1:00PM-10:00PM

 *Website: N/A*

PEDIATRIC EMERGENCY MEDICINE


SALEH, FAREED


Provider ID: 206216

Board Certified Specialty: No

FAREED R SALEH

 *3020 CHILDRENS WAY
SAN DIEGO, CA 92123*

 *Phone: (858) 966-8800*

 *After Hours Phone: (858)
966-8800*

Provider Gender: Male

NPI: 1366691115

 *Provider English Spoken: Y*
Cultural Competency: N

*Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 *Accessibility: CONTACT*

D3. Directorio de proveedores especialistas

PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PEDIATRIC EMERGENCY **MEDICINE**

SCHROTER, STEPHANIE

Provider ID: 243830
Board Certified Specialty: No
STEPHANIE SCHROTER
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858)
966-8800
Provider Gender: Female
NPI: 1073951828

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PEDIATRIC EMERGENCY **MEDICINE**

SHERER, KIMBERLY

Provider ID: 284168
Board Certified Specialty: No
KIMBERLY A SHERER
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800

After Hours Phone: (858)
966-8800

Provider Gender: Female
NPI: 1992202964

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

PEDIATRIC EMERGENCY **MEDICINE**

SHETH, SARIKA

Provider ID: 248171
Board Certified Specialty: No
SARIKA K SHETH
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858)
966-8800

Provider Gender: Female
NPI: 1336503234

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

PEDIATRIC EMERGENCY

MEDICINE

SOUDER, CHRISTOPHER

Provider ID: 301636
Board Certified Specialty: No
CHRISTOPHER D SOUDER

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858)
966-8800

Provider Gender: Male

NPI: 1851540199

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSF
BENIOFF CHILDREN'S
HOSPITAL OAKLAND

Medi-Cal Open Panel: No
Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

PEDIATRIC EMERGENCY **MEDICINE**

SOUDER, CHRISTOPHER

Provider ID: 301635
Board Certified Specialty: No
CHRISTOPHER D SOUDER

3030 CHILDRENS WAY FL
3
SAN DIEGO, CA 92123

Phone: (858) 966-6789

Fax: (858) 966-6706

After Hours Phone: (858)
966-6789

Provider Gender: Male




NPI: 1851540199

Provider English Spoken: Y

D3. Directorio de proveedores especialistas

Cultural Competency: N
Hospital Affiliation: UCSF
BENIOFF CHILDREN'S
HOSPITAL OAKLAND
Medi-Cal Open Panel: No
Min/Max Age: 0\19




American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

PEDIATRIC EMERGENCY **MEDICINE**

TAMAS, VANESSA




Provider ID: 206212
Board Certified Specialty: No
VANESSA L TAMAS

 *3020 CHILDRENS WAY*
SAN DIEGO, CA 92123
 *Phone: (858) 576-1700*
 *After Hours Phone: (858)*
576-1700

Provider Gender: Female
NPI: 1326225368

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SOUTHWEST
HEALTHCARE INLAND VALLEY
HOSPITAL, CHILDRENS HOSP
OF LOS ANGELES,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19




American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*


PEDIATRIC EMERGENCY **MEDICINE**

TANG, ANDREW




Provider ID: 294677
Board Certified Specialty: No
ANDREW S TANG

 *3020 CHILDRENS WAY*
SAN DIEGO, CA 92123
 *Phone: (858) 966-8800*
 *After Hours Phone: (858)*
966-8800

Provider Gender: Male
NPI: 1184071516

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

PEDIATRIC EMERGENCY **MEDICINE**

TODD, SARAH

Provider ID: 302800
Board Certified Specialty: No
SARAH C TODD

 *4305 UNIVERSITY AVE STE*
150




SAN DIEGO, CA 92105
 *Phone: (619) 280-2905*
Fax: (619) 283-1614
 *After Hours Phone: (619)*
280-2905

Provider Gender: Female
NPI: 1407299787

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RONALD
REAGAN UCLA MED CTR,
SANTA MONICA UCLA MED
CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO, UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19




American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER
 *Hours: SU 1:00PM-10:00PM*
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
 *Website: N/A*



PEDIATRIC EMERGENCY **MEDICINE**

TRAN, THERESA

Provider ID: 301834
Board Certified Specialty: No
THERESA T TRAN

 *3020 CHILDRENS WAY*
SAN DIEGO, CA 92123
 *Phone: (858) 966-8800*
 *After Hours Phone: (858)*
966-8800







Provider Gender: Female
NPI: 1417496985



 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Spanish,

D3. Directorio de proveedores especialistas


Vietnamese
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A


PEDIATRIC EMERGENCY MEDICINE

TRAUT, JOEL
Provider ID: 205475
Board Certified Specialty: No
JOEL TRAUT
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 576-1700
 After Hours Phone: (858)
576-1700
Provider Gender: Male
NPI: 1982792065
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER



 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE




ULRICH, STACEY
Provider ID: 205847
Board Certified Specialty: No
STACEY L ULRICH
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-8036
 After Hours Phone: (858)
966-8036

Provider Gender: Female
NPI: 1619049236
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM
 Website: N/A



PEDIATRIC EMERGENCY MEDICINE

VAIDYA, KAMALA
Provider ID: 205809
Board Certified Specialty: No
KAMALA VAIDYA
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-8800
 After Hours Phone: (858)

966-8800
Provider Gender: Female
NPI: 1083840920
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE

VAIDYA, KAMALA
Provider ID: 205811
Board Certified Specialty: No
KAMALA VAIDYA
 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
 Phone: (619) 280-2905
Fax: (619) 283-1614
 After Hours Phone: (619)
280-2905

Provider Gender: Female
NPI: 1083840920
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT

D3. Directorio de proveedores especialistas

PROVIDER
Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
Website: N/A

PEDIATRIC EMERGENCY

MEDICINE

VANE, JACKSON

Provider ID: 205883
Board Certified Specialty: No
JACKSON VANE

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800
After Hours Phone: (858)
966-8800

Provider Gender: Male
NPI: 1952608580

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC EMERGENCY

MEDICINE

VANWOY, LAUREN

Provider ID: 301574
Board Certified Specialty: No
LAUREN E VANWOY

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800
After Hours Phone: (858)
966-8800

Provider Gender: Female
NPI: 1568959161

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: PALOMAR
HEALTH, PALOMAR MEDICAL
CENTER, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

PEDIATRIC EMERGENCY

MEDICINE

VARGAS, JACLYN

Provider ID: 285935
Board Certified Specialty: No
JACLYN F VARGAS

3010 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123

Phone: (858) 576-1700
Fax: (858) 966-8479

After Hours Phone: (858)
576-1700

Provider Gender: Female
NPI: 1619359718

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, Los Angeles General
Medical Center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC EMERGENCY

MEDICINE

VARGAS, JACLYN

Provider ID: 285934
Board Certified Specialty: Yes
JACLYN F VARGAS

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5841
Fax: (858) 966-6728

After Hours Phone: (858)
966-5841

Provider Gender: Female
NPI: 1619359718

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, Los Angeles General
Medical Center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC EMERGENCY

D3. Directorio de proveedores especialistas

MEDICINE

VARGAS, JACLYN

Provider ID: 296486

Board Certified Specialty: No

JACLYN F VARGAS

4305 UNIVERSITY AVE STE 150

SAN DIEGO, CA 92105

Phone: (619) 280-2905

Fax: (619) 283-1614

After Hours Phone: (619) 280-2905

Provider Gender: Female

NPI: 1619359718

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, Los Angeles General Medical Center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: SU 1:00PM-10:00PM

M-F 4:00PM-10:00PM

SA 1:00PM-10:00PM

Website: N/A

PEDIATRIC EMERGENCY

MEDICINE

VAYNGORTIN, TATYANA

Provider ID: 263012

Board Certified Specialty: No

TATYANA VAYNGORTIN

3020 CHILDRENS WAY SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858) 966-8800

Provider Gender: Female

NPI: 1578967907

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSF

BENIOFF CHILDREN'S

HOSPITAL OAKLAND,

CHILDRENS HOSP OF LOS

ANGELES, RADY CHILDRENS

HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

PEDIATRIC EMERGENCY

MEDICINE

WANG, YVETTE

Provider ID: 263416

Board Certified Specialty: No

YVETTE L WANG

3020 CHILDRENS WAY SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858) 966-8800

Provider Gender: Female

NPI: 1710321278

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

PEDIATRIC EMERGENCY

MEDICINE

WANG, VINCENT

Provider ID: 309661

Board Certified Specialty: No

VINCENT J WANG

3020 CHILDRENS WAY SAN DIEGO, CA 92123

Phone: (858) 966-8800

Fax: (858) 966-7433

After Hours Phone: (858) 966-8800

Provider Gender: Male

NPI: 1083713655

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:

CHILDRENS HOSP OF LOS ANGELES, RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Website: N/A

PEDIATRIC EMERGENCY

MEDICINE




YAPHOCKUN, KARENKIM

Provider ID: 206184


Board Certified Specialty: No

KARENKIM K YAPHOCKUN

D3. Directorio de proveedores especialistas

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 576-1700
 After Hours Phone: (858)
576-1700


Provider Gender: Female
NPI: 1861880817

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


PEDIATRIC ENDOCRINOLOGY

CYMBALUK, ANNA

Provider ID: 294214


Board Certified Specialty: Yes
ANNA L CYMBALUK

 3030 CHILDRENS WAY STE
4
SAN DIEGO, CA 92123

 Phone: (858) 966-4032
Fax: (858) 966-6227

 After Hours Phone: (858)
966-4032

Provider Gender: Female
NPI: 1043674849


 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


PEDIATRIC ENDOCRINOLOGY

PATTERSON, MARY

Provider ID: 206059


Board Certified Specialty: No
MARY E PATTERSON

 3030 CHILDRENS WAY FL
4 NORTH
SAN DIEGO, CA 92123

 Phone: (858) 966-4032
Fax: (858) 966-6227

 After Hours Phone: (858)
966-4032


Provider Gender: Female
NPI: 1912112020

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC ENDOCRINOLOGY


SINGH, PUJA


Provider ID: 302818

Board Certified Specialty: No


PUJA SINGH

 3030 CHILDRENS WAY FL
4
SAN DIEGO, CA 92123

 Phone: (858) 966-4032
Fax: (858) 966-6227

 After Hours Phone: (858)
966-4032


Provider Gender: Female
NPI: 1841721172

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


PEDIATRIC ENDOCRINOLOGY


VARGASTRUJILLO, MARCELA

Provider ID: 205605


Board Certified Specialty: No
MARCELA VARGASTRUJILLO

 3030 CHILDRENS WAY FL
4
SAN DIEGO, CA 92123

 Phone: (858) 966-4032
Fax: (858) 966-4032

 After Hours Phone: (858)
966-4032

Provider Gender: Female
NPI: 1952534091

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD

D3. Directorio de proveedores especialistas

MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC


GASTROENTEROLOGY


CHU, CHRISTOPHER

Provider ID: 301639

Board Certified Specialty: No
CHRISTOPHER CHU


 3030 CHILDRENS WAY FL
2
SAN DIEGO, CA 92123


 Phone: (858) 966-4003
Fax: (858) 560-6798

 After Hours Phone: (858)
966-4003

Provider Gender: Male

NPI: 1912369273

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish, Yue
Chinese

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: No


Min/Max Age: 0\19


American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC


GASTROENTEROLOGY

GOYAL, NIDHI

Provider ID: 205598

Board Certified Specialty: No
NIDHI P GOYAL

 3030 CHILDRENS WAY FL
2 SOUTH
SAN DIEGO, CA 92123

 Phone: (858) 966-4003
Fax: (858) 560-6798

 After Hours Phone: (858)
966-4003

Provider Gender: Female

NPI: 1598029332

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC


GASTROENTEROLOGY

HARTMANN, PHILLIPP

Provider ID: 294228

Board Certified Specialty: Yes
PHILLIPP HARTMANN

 3030 CHILDRENS WAY FL
2
SAN DIEGO, CA 92123


 Phone: (858) 966-4003
Fax: (858) 560-6798

 After Hours Phone: (858)
966-4003

Provider Gender: Male

NPI: 1356796536

 Provider English Spoken: Y

 Provider Language(s)
Spoken: French, German

Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC


GASTROENTEROLOGY

LIN, TOM

Provider ID: 297707

Board Certified Specialty: No
TOM K LIN

 3030 CHILDRENS WAY FL
2
SAN DIEGO, CA 92123


 Phone: (858) 966-4003
Fax: (858) 560-6798

 After Hours Phone: (858)
966-4003

Provider Gender: Male

D3. Directorio de proveedores especialistas

NPI: 1114136934

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC


GASTROENTEROLOGY

SCHWARZ, KATHLEEN

Provider ID: 205885

Board Certified Specialty: No
KATHLEEN B SCHWARZ

 3030 CHILDRENS WAY FL
2
SAN DIEGO, CA 92123


 Phone: (858) 966-4003

Fax: (858) 560-6798

 After Hours Phone: (858)
966-4003

Provider Gender: Female

NPI: 1265465918

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC


GASTROENTEROLOGY


YOUNG, JOCELYN

Provider ID: 294675

Board Certified Specialty: No

JOCELYN A YOUNG

 3030 CHILDRENS WAY FL
2
SAN DIEGO, CA 92123

 Phone: (858) 966-4003

Fax: (858) 560-6798

 After Hours Phone: (858)
966-4003

Provider Gender: Female

NPI: 1306227491

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UC DAVIS
MEDICAL CTR, RADY

CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC HEMATOLOGY /


ONCOLOGY

BRIGGS, BENJAMIN

Provider ID: 274689

Board Certified Specialty: Yes
BENJAMIN J BRIGGS

 3010 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123

 Phone: (858) 966-5811

Fax: (858) 966-8035

 After Hours Phone: (858)
966-5811

Provider Gender: Male

NPI: 1952695777

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, NAVAL MEDICAL CTR
SD RBE


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC HEMATOLOGY /


ONCOLOGY

BUSH, KELLY

Provider ID: 274408

Board Certified Specialty: No
KELLY A BUSH

 3010 CHILDRENS WAY STE
2
SAN DIEGO, CA 92123

 Phone: (858) 966-5811

Fax: (858) 966-8035

 After Hours Phone: (858)
966-5811

Provider Gender: Female

NPI: 1073831079


 Provider English Spoken: Y


D3. Directorio de proveedores especialistas

Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Hours: M-F
8:00AM-5:00PM


 Website: N/A

PEDIATRIC HEMATOLOGY / ONCOLOGY

CHOO, SUN


Provider ID: 206115
Board Certified Specialty: No
SUN H CHOO

 3010 CHILDRENS WAY STE
2-WEST
SAN DIEGO, CA 92123

 Phone: (858) 966-5811
Fax: (858) 966-8035

 After Hours Phone: (858)
966-5811


Provider Gender: Female
NPI: 1700047628

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM


 Website: N/A

PEDIATRIC HEMATOLOGY / ONCOLOGY

DING, HILDA


Provider ID: 206173
Board Certified Specialty: No
HILDA H DING

 3010 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5811
Fax: (858) 966-8035

 After Hours Phone: (858)
966-5811


Provider Gender: Female
NPI: 1780813923

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

PEDIATRIC HEMATOLOGY / ONCOLOGY

ELSTER, JENNIFER

Provider ID: 205769
Board Certified Specialty: Yes
JENNIFER D ELSTER


 3010 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5811

Fax: (858) 966-8035

 After Hours Phone: (858)
966-5811


Provider Gender: Female
NPI: 1588866115

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

PEDIATRIC HEMATOLOGY / ONCOLOGY

GANESAN, ANUSHA


Provider ID: 205882
Board Certified Specialty: No
ANUSHA P GANESAN

 3010 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5811
Fax: (858) 966-8035

 After Hours Phone: (858)
966-5811

Provider Gender: Female
NPI: 1982091740

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

D3. Directorio de proveedores especialistas

American Sign Language (ASL): **KUO, DENNIS**

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC HEMATOLOGY / ONCOLOGY

JAFFRAY, JULIE

Provider ID: 296760

Board Certified Specialty: No
JULIE A JAFFRAY

 3010 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123

 Phone: (858) 966-5811

Fax: (858) 966-8035

 After Hours Phone: (858)
966-5811

Provider Gender: Female

NPI: 1396942470

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:
CHILDRENS HOSP OF LOS
ANGELES, RADY CHILDRENS
HOSPITAL SAN DIEGO, UCSD
MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

PEDIATRIC HEMATOLOGY / ONCOLOGY


Provider ID: 205433

Board Certified Specialty: No
DENNIS J KUO

 3010 CHILDRENS WAY
SAN DIEGO, CA 92123


 Phone: (858) 966-5811


Fax: (858) 966-8035

 After Hours Phone: (858)
966-5811

Provider Gender: Male

NPI: 1750492146

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese, Spanish
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC HEMATOLOGY / ONCOLOGY

LI, HOJUN

Provider ID: 307300

Board Certified Specialty: No
HOJUN LI

 3010 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123

 Phone: (858) 966-5811

Fax: (858) 966-8035

 After Hours Phone: (858)
966-5811

Provider Gender: Male

NPI: 1730455239


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC HEMATOLOGY / ONCOLOGY

SRIDHAR, SUNITA

Provider ID: 302088

Board Certified Specialty: Yes
SUNITA SRIDHAR

 3010 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123

 Phone: (858) 966-5811

Fax: (858) 966-8035

 After Hours Phone: (858)
966-5811

Provider Gender: Female

NPI: 1649707365

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

D3. Directorio de proveedores especialistas

 Website: N/A


PEDIATRIC HEMATOLOGY / ONCOLOGY

WONG, VICTOR

Provider ID: 206149

Board Certified Specialty: No
VICTOR WONG

 3010 CHILDRENS WAY
SAN DIEGO, CA 92123


 Phone: (858) 966-5811

Fax: (858) 966-8035

 After Hours Phone: (858)
966-5811

Provider Gender: Male

NPI: 1154692473

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC HEMATOLOGY / ONCOLOGY

YU, HELENA

Provider ID: 301583

Board Certified Specialty: No
HELENA YU

 3010 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123


 Phone: (858) 966-5811

Fax: (858) 966-8035

 After Hours Phone: (858)
966-5811

Provider Gender: Female

NPI: 1881127736

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC HEMATOLOGY / ONCOLOGY

YU, JENNIFER

Provider ID: 206148

Board Certified Specialty: No
JENNIFER C YU

 3010 CHILDRENS WAY
SAN DIEGO, CA 92123


 Phone: (858) 966-5811

Fax: (858) 966-8035

 After Hours Phone: (858)
966-5811

Provider Gender: Female

NPI: 1326315599

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC HEMATOLOGY / ONCOLOGY


ZAGE, PETER

Provider ID: 206315

Board Certified Specialty: No
PETER E ZAGE

 3010 CHILDRENS WAY STE
2W

SAN DIEGO, CA 92123

 Phone: (858) 966-5811

Fax: (858) 966-8035

 After Hours Phone: (858)
966-5811

Provider Gender: Male

NPI: 1912003161

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC INFECTIOUS DISEASES

MILDER, EDMUND

D3. Directorio de proveedores especialistas

Provider ID: 289138
Board Certified Specialty: No
EDMUND A MILDER
3030 CHILDRENS WAY FL
2
SAN DIEGO, CA 92123
Phone: (858) 966-7785
Fax: (858) 966-8658
After Hours Phone: (858)
966-7785
Provider Gender: Male
NPI: 1760460026
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PEDIATRIC NEPHROLOGY

CARTER, CAITLIN

Provider ID: 302777
Board Certified Specialty: No
CAITLIN E CARTER
8110 BIRMINGHAM WAY FL
1
SAN DIEGO, CA 92123
Phone: (858) 966-8052
Fax: (858) 966-7789
After Hours Phone: (858)
966-8052
Provider Gender: Female
NPI: 1255514618
Provider English Spoken: Y

Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, SCRIPPS GREEN
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS, SCRIPPS
MEMORIAL HOSPITAL, UCSD
MEDICAL CTR, SHARP
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PEDIATRIC NEPHROLOGY

INGULLI, ELIZABETH

Provider ID: 302778
Board Certified Specialty: No
ELIZABETH G INGULLI
8110 BIRMINGHAM WAY
STE 28
SAN DIEGO, CA 92123
Phone: (858) 966-8052
Fax: (858) 966-7789
After Hours Phone: (858)
966-8052
Provider Gender: Female
NPI: 1811919244
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes

Min/Max Age: 0\19
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PEDIATRIC NEPHROLOGY

MAK, ROBERT

Provider ID: 302776
Board Certified Specialty: No
ROBERT H MAK
8110 BIRMINGHAM WAY FL
1
SAN DIEGO, CA 92123
Phone: (858) 966-8052
Fax: (858) 966-7789
After Hours Phone: (858)
966-8052

Provider Gender: Male
NPI: 1740295252
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON,
RADY CHILDRENS HOSPITAL
SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PEDIATRIC NEPHROLOGY

PERENS, ELLIOT

D3. Directorio de proveedores especialistas

Provider ID: 302765

Board Certified Specialty: No
ELLIOT A PERENS

8110 BIRMINGHAM WAY FL
1
SAN DIEGO, CA 92123

Phone: (858) 966-8052

Fax: (858) 966-7789

After Hours Phone: (858)
966-8052

Provider Gender: Male

NPI: 1922328947

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND, UCSF MEDICAL
CENTER, SHARP MEMORIAL
HOSPITAL, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC PULMONOLOGY

AKONG, KATHRYN

Provider ID: 205673

Board Certified Specialty: No
KATHRYN A AKONG

3030 CHILDRENS WAY STE
2
SAN DIEGO, CA 92123

Phone: (858) 966-5846

Fax: (858) 966-8457

After Hours Phone: (858)
966-5846

Provider Gender: Female

NPI: 1912169061

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC PULMONOLOGY

BHATTACHARJEE, RAKESH

Provider ID: 205950

Board Certified Specialty: No
RAKESH BHATTACHARJEE

3030 CHILDRENS WAY FL
2 NORTH
SAN DIEGO, CA 92123

Phone: (858) 966-5846

Fax: (858) 966-8457

After Hours Phone: (858)
966-5846

Provider Gender: Male

NPI: 1588781173

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRIC PULMONOLOGY

BHATTACHARJEE, RAKESH

Provider ID: 246060

Board Certified Specialty: No
RAKESH BHATTACHARJEE

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 576-1700

After Hours Phone: (858)
576-1700

Provider Gender: Male

NPI: 1588781173

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

PEDIATRIC PULMONOLOGY

CERNELC-KOHAN, MATEJKA

Provider ID: 243042

Board Certified Specialty: No
MATEJKA CERNELC-KOHAN

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5846


Fax: (858) 966-8457

D3. Directorio de proveedores especialistas

 After Hours Phone: (858) 966-5846

Provider Gender: Female

NPI: 1871752451

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSF

BENIOFF CHILDREN'S

HOSPITAL OAKLAND, RADY

CHILDRENS HOSPITAL SAN


DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19


American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

PEDIATRIC PULMONOLOGY

CERNELC-KOHAN, MATEJKA


Provider ID: 243041

Board Certified Specialty: No

MATEJKA CERNELC-KOHAN

 3030 CHILDRENS WAY FL 2

SAN DIEGO, CA 92123

 Phone: (858) 966-5846

Fax: (858) 966-8457

 After Hours Phone: (858) 966-5846

Provider Gender: Female

NPI: 1871752451

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSF

BENIOFF CHILDREN'S

HOSPITAL OAKLAND, RADY

CHILDRENS HOSPITAL SAN

DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

PEDIATRIC PULMONOLOGY

FINCH, CHRISTINA


Provider ID: 302581

Board Certified Specialty: No

CHRISTINA E FINCH

 3030 CHILDRENS WAY FL 2

SAN DIEGO, CA 92123


 Phone: (858) 966-5846

Fax: (858) 966-8457

 After Hours Phone: (858) 966-5846

Provider Gender: Female

NPI: 1598255325

 Provider English Spoken: Y

Cultural Competency: N


Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):  N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

PEDIATRIC PULMONOLOGY

FIREIZEN, YARON


Provider ID: 302329

Board Certified Specialty: No

YARON FIREIZEN

 3030 CHILDRENS WAY FL 2

SAN DIEGO, CA 92123

 Phone: (858) 966-5846


Fax: (858) 966-8457

 After Hours Phone: (858) 966-5846

Provider Gender: Male

NPI: 1699123927

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Hebrew

Cultural Competency: N


Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

PEDIATRIC PULMONOLOGY

LANDEOGUTIERREZ, JEREMY


Provider ID: 284176

Board Certified Specialty: No

JEREMY S

LANDEOGUTIERREZ

 3020 CHILDRENS WAY SAN DIEGO, CA 92123

 Phone: (858) 966-5846

Fax: (858) 569-9052

 After Hours Phone: (858) 966-5846

Provider Gender: Male

D3. Directorio de proveedores especialistas

NPI: 1255750360

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC PULMONOLOGY

LANDEOGUTIERREZ, JEREMY


Provider ID: 284177

Board Certified Specialty: No
JEREMY S

LANDEOGUTIERREZ

 3030 CHILDRENS WAY FL
2

SAN DIEGO, CA 92123

 Phone: (858) 966-5846

Fax: (858) 966-8457

 After Hours Phone: (858)
966-5846

Provider Gender: Male

NPI: 1255750360

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC PULMONOLOGY

LENHART-PENDERGRASS,

PATRICIA


Provider ID: 294641

Board Certified Specialty: Yes
PATRICIA M

LENHART-PENDERGRASS

 3030 CHILDRENS WAY FL
2

SAN DIEGO, CA 92123

 Phone: (858) 966-5846

Fax: (858) 966-8457

 After Hours Phone: (858)
966-5846

Provider Gender: Female

NPI: 1144615659

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:30AM-4:30PM

 Website: N/A


PEDIATRIC PULMONOLOGY

RAO, APARNA

Provider ID: 206123

Board Certified Specialty: No
APARNA R RAO

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5846

Fax: (858) 569-9052

 After Hours Phone: (858)
966-5846

Provider Gender: Female

NPI: 1649222340

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Hindi

Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC PULMONOLOGY


RAO, APARNA

Provider ID: 206124

Board Certified Specialty: No
APARNA R RAO

 3030 CHILDRENS WAY FL
2

SAN DIEGO, CA 92123

 Phone: (858) 966-5846

Fax: (858) 966-5847

 After Hours Phone: (858)
966-5846

Provider Gender: Female

NPI: 1649222340

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Hindi


D3. Directorio de proveedores especialistas


Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


PEDIATRIC PULMONOLOGY

RYU, JULIE

Provider ID: 206218

Board Certified Specialty: No
JULIE RYU

 3030 CHILDRENS WAY FL
2 NORTH
SAN DIEGO, CA 92123

 Phone: (858) 966-5846
Fax: (858) 569-5847

 After Hours Phone: (858)
966-5846

Provider Gender: Female


NPI: 1568533321


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRIC PULMONOLOGY


TANTISIRA, KELAN

Provider ID: 277183

Board Certified Specialty: No

KELAN G TANTISIRA

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5846
Fax: (858) 569-9052

 After Hours Phone: (858)
966-5846

Provider Gender: Male

NPI: 1760420434


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A



PEDIATRIC RHEUMATOLOGY

CHANG, JOHANNA

Provider ID: 246394

Board Certified Specialty: No
JOHANNA C CHANG

 3030 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8082
 After Hours Phone: (858)
966-8082

Provider Gender: Female

NPI: 1821242199


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRIC RHEUMATOLOGY


SHEETS, ROBERT

Provider ID: 255900

Board Certified Specialty: No
ROBERT M SHEETS

 3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123

 Phone: (858) 966-8082
Fax: (858) 966-4067

 After Hours Phone: (858)
966-8082

Provider Gender: Male

NPI: 1013088772

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish



Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

D3. Directorio de proveedores especialistas


 Hours: M-F
8:00AM-4:30PM
 Website: N/A

PEDIATRICS

ALAGIRI, MADHU

Provider ID: 206387
Board Certified Specialty: No
MADHU ALAGIRI

 7920 FROST ST STE 200
SAN DIEGO, CA 92123

 Phone: (858) 966-7484
Fax: (858) 966-4064

 After Hours Phone: (858)
966-7484

Provider Gender: Male

NPI: 1619083961

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, RADY


CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


PEDIATRICS

ALLSUP, VICTORIA

Provider ID: 302344
Board Certified Specialty: No
VICTORIA G ALLSUP

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925
Fax: (858) 633-4680

 After Hours Phone: (858)
279-0925

Provider Gender: Female

NPI: 1437786944


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

PEDIATRICS

ALLSUP, VICTORIA

Provider ID: 302345
Board Certified Specialty: No
VICTORIA G ALLSUP

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700
Fax: (858) 633-4680

 After Hours Phone: (858)
810-8700

Provider Gender: Female

NPI: 1437786944


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

PEDIATRICS

ANDREE, GREGOR

Provider ID: 293220
Board Certified Specialty: No
GREGOR ANDREE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700
Fax: (858) 633-4680

 After Hours Phone: (858)
810-8700

Provider Gender: Male

NPI: 1467436063

 Provider English Spoken: Y
 Provider Language(s)

Spoken: German, Spanish
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


 Website: N/A

PEDIATRICS

ANDREE, GREGOR

Provider ID: 293219
Board Certified Specialty: No
GREGOR ANDREE

 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105

 Phone: (619) 280-2058
Fax: (858) 633-4682

 After Hours Phone: (619)
280-2058

Provider Gender: Male

NPI: 1467436063

 Provider English Spoken: Y
 Provider Language(s)

Spoken: German, Spanish
Cultural Competency: N

D3. Directorio de proveedores especialistas

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

PEDIATRICS


BEAUCHAMP-WALTERS, JULIA

Provider ID: 270063

Board Certified Specialty: No

JULIA BEAUCHAMP-WALTERS

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5841

Fax: (858) 966-6728

 After Hours Phone: (858)
966-5841

Provider Gender: Female

NPI: 1457420713

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

PEDIATRICS


CAMERON, MELISSA

Provider ID: 205965


Board Certified Specialty: No

MELISSA A CAMERON

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5841

Fax: (858) 966-6728

 After Hours Phone: (858)
966-5841

Provider Gender: Female

NPI: 1902983752

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO, PALOMAR MEDICAL
CENTER


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRICS


CANTU, ALICIA


Provider ID: 205752

Board Certified Specialty: No

ALICIA O CANTU

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1922179688

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRICS

CANTU, ALICIA


Provider ID: 205753

Board Certified Specialty: No


ALICIA O CANTU

 3030 CHILDRENS WAY STE
300

SAN DIEGO, CA 92123

 Phone: (858) 966-8974

Fax: (858) 966-6721

 After Hours Phone: (858)
966-8974

Provider Gender: Female

NPI: 1922179688

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRICS

CHONG, AMY


Provider ID: 259993

Board Certified Specialty: Yes

AMY CHONG

D3. Directorio de proveedores especialistas

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5803

Fax: (858) 966-5992

 After Hours Phone: (858)
966-5803

Provider Gender: Female

NPI: 1720423288


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRICS


DOAN STEPHENS, CRYSTAL

Provider ID: 293274

Board Certified Specialty: No
CRYSTAL T DOAN STEPHENS

 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

 Phone: (619) 280-2058

Fax: (858) 633-4682

 After Hours Phone: (619)
280-2058

Provider Gender: Female

NPI: 1730570144

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PEDIATRICS

DOAN STEPHENS, CRYSTAL

Provider ID: 293275

Board Certified Specialty: No
CRYSTAL T DOAN STEPHENS

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

Fax: (858) 633-4680

 After Hours Phone: (858)
810-8700

Provider Gender: Female

NPI: 1730570144


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PEDIATRICS

DOSHI, AMI

Provider ID: 205329

Board Certified Specialty: No
AMI P DOSHI

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123


 Phone: (858) 966-5841

Fax: (858) 966-6728

 After Hours Phone: (858)
966-5841

Provider Gender: Female

NPI: 1801099676

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Gujarati, Spanish


Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, PALOMAR MEDICAL
CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRICS


DOSHI, AMI

Provider ID: 205330


Board Certified Specialty: No
AMI P DOSHI

 3030 CHILDRENS WAY STE
300

SAN DIEGO, CA 92123

 Phone: (858) 966-8974

Fax: (858) 966-6721

 After Hours Phone: (858)
966-8974

Provider Gender: Female

NPI: 1801099676

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Gujarati, Spanish

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, PALOMAR MEDICAL
CENTER


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

D3. Directorio de proveedores especialistas

American Sign Language (ASL): Provider ID: 296241

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRICS

GIBONEY, JENNIFER

Provider ID: 296242

Board Certified Specialty: No
JENNIFER C GIBONEY

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700
Fax: (858) 633-4680

 After Hours Phone: (858)
810-8700

Provider Gender: Female

NPI: 1275895849

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes


Min/Max Age: 0\18

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


 Hours: M 8:30AM-5:30PM
TU 5:30PM-8:30PM
W 8:30AM-5:30PM
TH 5:30PM-8:30PM
F 8:30AM-5:30PM
SA 9:00AM-4:00PM


 Website: N/A

PEDIATRICS

GIBONEY, JENNIFER

Board Certified Specialty: No
JENNIFER C GIBONEY

 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105

 Phone: (619) 280-2058
Fax: (858) 633-4682

 After Hours Phone: (619)
280-2058

Provider Gender: Female

NPI: 1275895849

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\18

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-2:00PM

 Website: N/A


PEDIATRICS

GRAY, SARAH

Provider ID: 284224

Board Certified Specialty: No
SARAH M GRAY


 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5841
Fax: (858) 966-6728

 After Hours Phone: (858)
966-5841

Provider Gender: Female

NPI: 1508210311

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PEDIATRICS


HUANG, MARIA

Provider ID: 205974

Board Certified Specialty: No
MARIA Z HUANG

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5841
Fax: (858) 966-6728

 After Hours Phone: (858)
966-5841

Provider Gender: Female

NPI: 1770841140

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

D3. Directorio de proveedores especialistas

PEDIATRICS

JIMENEZBACARDI, ADRIA

Provider ID: 294640

Board Certified Specialty: No
ADRIA JIMENEZBACARDI

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5841

Fax: (858) 966-6728

After Hours Phone: (858)
966-5841

Provider Gender: Male

NPI: 1467847293

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: ST MARYS
HOSPITAL AND MEDICAL
CENTER, RADY CHILDRENS
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRICS

JINDAL, ANUJA

Provider ID: 303285

Board Certified Specialty: Yes
ANUJA V JINDAL

3030 CHILDRENS WAY FL
4

SAN DIEGO, CA 92123

Phone: (858) 966-5819

Fax: (858) 966-4930

After Hours Phone: (858)
966-5819

Provider Gender: Female

NPI: 1194046581

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRICS

KARMAKAR, KANKA

Provider ID: 213847

Board Certified Specialty: No
KANKA KARMAKAR

10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

Phone: (844) 200-2426

Fax: (858) 578-4417

After Hours Phone: (844)
200-2426

Provider Gender: Female

NPI: 1972536654

Provider English Spoken: Y

Provider Language(s)
Spoken: Bengali, Hindi,
Polish, Spanish, Tagalog
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TU
8:30AM-5:30PM
W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM

Website: N/A

PEDIATRICS

KHARE, MANASWITHA

Provider ID: 206289

Board Certified Specialty: Yes
MANASWITHA KHARE

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5841

Fax: (858) 966-6728

After Hours Phone: (858)
966-5841

Provider Gender: Female

NPI: 1912345307

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PEDIATRICS

LEE, BEGEM

Provider ID: 205923

Board Certified Specialty: No
LEE M BEGEM

3020 CHILDRENS WAY

D3. Directorio de proveedores especialistas

SAN DIEGO, CA 92123
☎ Phone: (858) 966-5841
Fax: (858) 966-6728
🕒 After Hours Phone: (858) 966-5841
Provider Gender: Female
NPI: 1053672444
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSF
BENIOFF CHILDREN'S
HOSPITAL OAKLAND, RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

PEDIATRICS

LOPEZ, XIMENA

Provider ID: 302856
Board Certified Specialty: No
XIMENA LOPEZ
📍 3030 CHILDRENS WAY FL
4
SAN DIEGO, CA 92123
☎ Phone: (858) 966-4032
Fax: (858) 966-6227
🕒 After Hours Phone: (858)
966-4032
Provider Gender: Female
NPI: 1740316405
🗣 Provider English Spoken: Y
🗣 Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

PEDIATRICS

MANNINOAVILA, ELIZABETH

Provider ID: 262161
Board Certified Specialty: No
ELIZABETH E MANNINOAVILA
📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
☎ Phone: (858) 966-5841
Fax: (858) 966-6728
🕒 After Hours Phone: (858)
966-5841
Provider Gender: Female
NPI: 1164747127
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSF
BENIOFF CHILDREN'S
HOSPITAL OAKLAND, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

PEDIATRICS

MARANO, RACHEL


Provider ID: 302438
Board Certified Specialty: No
RACHEL M MARANO
📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
☎ Phone: (858) 966-5841
Fax: (858) 966-6728
🕒 After Hours Phone: (858)
966-5841
Provider Gender: Female
NPI: 1043673528
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
HOLLYWOOD PRESBYTERIAN
MED CTR, RADY CHILDRENS
HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

PEDIATRICS



MARC-AURELE, KRISHELLE

Provider ID: 301719
Board Certified Specialty: No
KRISHELLE L MARC-AURELE
📍 7910 FROST ST STE 230
SAN DIEGO, CA 92123
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1952503435

D3. Directorio de proveedores especialistas

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
UCSD LA JOLLA JOHN SALLY
THORNTON, TRI CITY
MEDICAL CTR, SCRIPPS
MEMORIAL HOSPITAL



Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER
 *Website: N/A*

PEDIATRICS



NGO, MAI

Provider ID: 302113
Board Certified Specialty: No
MAI P NGO

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 *Phone: (858) 966-8974*
Fax: (858) 966-4051

 *After Hours Phone: (858)*
966-8974

Provider Gender: Female
NPI: 1508910787

 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Vietnamese
Cultural Competency: N


Hospital Affiliation: UCSF
BENIOFF CHILDREN'S
HOSPITAL OAKLAND, UCSF
MEDICAL CENTER, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

 *Hours: M-F*
8:00AM-5:00PM


 *Website: N/A*

PEDIATRICS

NGO, MAI



Provider ID: 302114
Board Certified Specialty: No
MAI P NGO

 7910 FROST ST STE 195
SAN DIEGO, CA 92123

 *Phone: (858) 966-8974*
Fax: (858) 966-6721

 *After Hours Phone: (858)*
966-8974

Provider Gender: Female
NPI: 1508910787

 *Provider English Spoken: Y*
 *Provider Language(s)*
Spoken: Vietnamese


Cultural Competency: N
Hospital Affiliation: UCSF
BENIOFF CHILDREN'S
HOSPITAL OAKLAND, UCSF


MEDICAL CENTER, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

 *Hours: M-F*
8:00AM-5:00PM


 *Website: N/A*


PEDIATRICS

PATEL, AARTI


Provider ID: 205865
Board Certified Specialty: No
AARTI R PATEL

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 *Phone: (858) 966-5841*
Fax: (858) 966-6728

 *After Hours Phone: (858)*
966-5841


Provider Gender: Female
NPI: 1871813105

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

 *Hours: M-F*
8:00AM-5:00PM


 *Website: N/A*


PEDIATRICS

PIERCE, HEATHER

Provider ID: 205701
Board Certified Specialty: No
HEATHER PIERCE





 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 *Phone: (858) 966-5841*
Fax: (858) 966-6728

 *After Hours Phone: (858)*
966-5841

Provider Gender: Female
NPI: 1699955542

D3. Directorio de proveedores especialistas

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

PEDIATRICS




POLICH, MICHELLE


Provider ID: 286390
Board Certified Specialty: Yes
MICHELLE A POLICH
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 *Phone: (858) 966-8800*
 *After Hours Phone: (858)*
966-8800
Provider Gender: Female
NPI: 1780118018




 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Website: N/A*

PEDIATRICS

RHEE, KYUNG





Provider ID: 206114
Board Certified Specialty: No
KYUNG E RHEE
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 *Phone: (858) 966-5841*
Fax: (858) 966-6728
 *After Hours Phone: (858)*
966-5841
Provider Gender: Female
NPI: 1013996529




 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

PEDIATRICS




RIES, DAVID





Provider ID: 206082
Board Certified Specialty: No
DAVID C RIES
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 *Phone: (858) 966-5841*
 *After Hours Phone: (858)*
966-5841
Provider Gender: Male
NPI: 1376705483
 *Provider English Spoken: Y*
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

PEDIATRICS

RUNGVIVATJARUS, TIRANUN

Provider ID: 206319
Board Certified Specialty: No
TIRANUN RUNGVIVATJARUS
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 *Phone: (858) 966-5841*
Fax: (858) 966-6728
 *After Hours Phone: (858)*
966-5841
Provider Gender: Female
NPI: 1407276363

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

D3. Directorio de proveedores especialistas

PEDIATRICS

SONG, RICHARD

Provider ID: 301716

Board Certified Specialty: No
RICHARD S SONG

 7910 FROST ST STE 230
SAN DIEGO, CA 92123

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1881893477

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, PALOMAR HEALTH,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
SCRIPPS MEMORIAL

HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, PALOMAR

MEDICAL CENTER,

SOUTHWEST HEALTHCARE

INLAND VALLEY HOSPITAL,

SOUTHWEST HEALTHCARE


INLAND VALLEY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PEDIATRICS


STOVER, LAURIE

Provider ID: 206196

Board Certified Specialty: No
LAURIE B STOVER

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-5841

 After Hours Phone: (858)
966-5841

Provider Gender: Female

NPI: 1659442317

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL): N

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRICS

SUTTNER, DENISE

Provider ID: 301721

Board Certified Specialty: No
DENISE M SUTTNER

 7910 FROST ST STE 230
SAN DIEGO, CA 92123

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1457433799

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, UCSD MEDICAL CTR,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, SOUTHWEST

HEALTHCARE INLAND VALLEY

HOSPITAL, SOUTHWEST

HEALTHCARE RANCHO

SPRINGS HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL, SCRIPPS MERCY

HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PEDIATRICS

WEISS, KATHERINE

Provider ID: 301703

Board Certified Specialty: No
KATHERINE J WEISS

 7910 FROST ST STE 230
SAN DIEGO, CA 92123

 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1053541862

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO

D3. Directorio de proveedores especialistas

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

PHYSICAL MEDICINE / REHABILITATION


ALGRA, JEFFREY


Provider ID: 287524

Board Certified Specialty: No

JEFFREY ALGRA

 7910 FROST ST STE 195
SAN DIEGO, CA 92123

 Phone: (858) 966-8974

 After Hours Phone: (858)
966-8974

Provider Gender: Male

NPI: 1457664518

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICAL MEDICINE / REHABILITATION


BIFFL, SUSAN

Provider ID: 287453


Board Certified Specialty: No

SUSAN E BIFFL

 7910 FROST ST STE 195
SAN DIEGO, CA 92123

 Phone: (858) 966-8974

Fax: (858) 966-6721

 After Hours Phone: (858)
966-8974

Provider Gender: Female

NPI: 1366589640

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICAL MEDICINE / REHABILITATION


DALAL, PRITHA


Provider ID: 287523

Board Certified Specialty: No

PRITHA B DALAL MD

 7910 FROST ST STE 195
SAN DIEGO, CA 92123

 Phone: (858) 966-8974

 After Hours Phone: (858)
966-8974

Provider Gender: Female

NPI: 1609017532

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF

CHILDREN'S HOSPITAL

OAKLAND


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICAL MEDICINE / REHABILITATION


RICHARDSON, HENRY

Provider ID: 295276

Board Certified Specialty: No

HENRY A RICHARDSON

 3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110

 Phone: (619) 325-1161

Fax: (619) 325-1717

 After Hours Phone: (619)
325-1161

Provider Gender: Male

NPI: 1407052459

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, PALOMAR MEDICAL

CENTER


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

D3. Directorio de proveedores especialistas

 Website: N/A


PHYSICAL MEDICINE / REHABILITATION


RYAN, KYLE

Provider ID: 287520

Board Certified Specialty: No
KYLE J RYAN

 7910 FROST ST STE 195
SAN DIEGO, CA 92123

 Phone: (858) 966-8974

 After Hours Phone: (858)
966-8974

Provider Gender: Male


NPI: 1447645742


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICAL MEDICINE / REHABILITATION


SCOTT-WYARD, PHOEBE

Provider ID: 287519

Board Certified Specialty: No
PHOEBE R SCOTT-WYARD

 7910 FROST ST STE 195
SAN DIEGO, CA 92123

 Phone: (858) 966-8974

 After Hours Phone: (858)
966-8974

Provider Gender: Female

NPI: 1336356203

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:


CHILDRENS HOSP OF LOS
ANGELES, RADY CHILDRENS
HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PHYSICAL MEDICINE / REHABILITATION


SKALSKY, ANDREW

Provider ID: 287537

Board Certified Specialty: No
ANDREW J SKALSKY

 7910 FROST ST STE 195
SAN DIEGO, CA 92123

 Phone: (858) 966-8974

 After Hours Phone: (858)
966-8974

Provider Gender: Male

NPI: 1487635272

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT


AINSWORTH, DELISSA

Provider ID: 243367

Board Certified Specialty: No
DELISSA M AINSWORTH

 4510 EXECUTIVE DR
SAN DIEGO, CA 92121

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1750734893

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation:


SOUTHWEST HEALTHCARE
INLAND VALLEY HOSPITAL,
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
UCSD MEDICAL CTR, UCSD LA
JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT


ALBRIGHT, KELSEY

Provider ID: 284763

Board Certified Specialty: No
KELSEY A ALBRIGHT

 200 W ARBOR DR

SAN DIEGO, CA 92103

 Phone: (800) 923-8273

D3. Directorio de proveedores especialistas

Fax: (888) 539-8781

☎ After Hours Phone: (800) 923-8273

Provider Gender: Female

NPI: 1235653148

🗉 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PHYSICIANS ASSISTANT

ARMEEN, GARY

Provider ID: 247035

Board Certified Specialty: No
GARY P ARMEEN JR

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1760774863

🗉 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): Provider ID: 217649

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PHYSICIANS ASSISTANT

BERGEN, SOPHEA

Provider ID: 295518

Board Certified Specialty: No
SOPHEA R BERGEN

📍 6719 ALVARADO RD STE
308

SAN DIEGO, CA 92120

☎ Phone: (619) 265-7912

Fax: (619) 265-7922

☎ After Hours Phone: (619) 265-7912

Provider Gender: Female

NPI: 1558300665

🗉 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: ALVARADO
HOSPITAL LLC, PALOMAR
MEDICAL CENTER, SCRIPPS
MEMORIAL HOSPITAL,

GROSSMONT HOSPITAL,
SHARP MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PHYSICIANS ASSISTANT

BOYD, LISA

Board Certified Specialty: No
LISA N BOYD

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1871859421

🗉 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PHYSICIANS ASSISTANT

BRUECKNER, TAMMIE

Provider ID: 255558

Board Certified Specialty: No
TAMMIE N BRUECKNER

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1407212376

🗉 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

D3. Directorio de proveedores especialistas


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A



PHYSICIANS ASSISTANT

CASTILLO, PATRICIA

Provider ID: 257530

Board Certified Specialty: No
PATRICIA CASTILLO

 3544 30TH ST
SAN DIEGO, CA 92104

 Phone: (619) 515-2424
 After Hours Phone: (619)
515-2424

Provider Gender: Female

NPI: 1376550657

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH
8:30AM-5:30PM
F 8:30AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT


DERISSI, DANA

Provider ID: 301632

Board Certified Specialty: No
DANA A DERISSI


 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1063829505

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi, Persian

Cultural Competency: N

Hospital Affiliation: LOMA

LINDA UNIVERSITY MED CTR,
RADY CHILDRENS HOSPITAL
SAN DIEGO


Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

PHYSICIANS ASSISTANT


GUTH, CARA

Provider ID: 299111

Board Certified Specialty: No
CARA A GUTH

 9333 GENESEE AVE STE
350

SAN DIEGO, CA 92121


 Phone: (858) 455-6460

Fax: (858) 455-5362

 After Hours Phone: (858)
455-6460

Provider Gender: Female

NPI: 1992177182

 Provider English Spoken: Y

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 21\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT


HASEGAWA, CHRIS

Provider ID: 247206

Board Certified Specialty: No
CHRIS HASEGAWA

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1225698962

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT

HASEGAWA, CHRIS

Provider ID: 287349

Board Certified Specialty: No
CHRIS HASEGAWA

 4168 FRONT ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

D3. Directorio de proveedores especialistas

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1225698962

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT

HIGGINS, JOSHUA

Provider ID: 287133

Board Certified Specialty: No

JOSHUA B HIGGINS

 203 W F ST
SAN DIEGO, CA 92101

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1861624181

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):  After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1114459765

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

PHYSICIANS ASSISTANT


HUNTER, JACOB

Provider ID: 287449

Board Certified Specialty: No

JACOB A HUNTER

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1114459765


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT

HUNTER, JACOB


Provider ID: 298430

Board Certified Specialty: No

JACOB A HUNTER

 8899 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122

 Phone: (800) 926-8273

PHYSICIANS ASSISTANT

HUNTER, JACOB

Provider ID: 298428

Board Certified Specialty: No

JACOB A HUNTER

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1114459765


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT

LAM, DAVINA

Provider ID: 295651

D3. Directorio de proveedores especialistas

Board Certified Specialty: No
DAVINA LAM

6719 ALVARADO RD STE
308

SAN DIEGO, CA 92120

Phone: (619) 265-7912

Fax: (619) 265-7922

After Hours Phone: (619)
265-7912

Provider Gender: Female

NPI: 1245863737

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER, SCRIPPS

MEMORIAL HOSPITAL,
GROSSMONT HOSPITAL,

SHARP MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

LAMBERT, GAGE

Provider ID: 214788

Board Certified Specialty: No
GAGE I LAMBERT

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1144672494

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL

HOSPITAL ENCINITAS, UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

LEE, JENNIFER

Provider ID: 309998

Board Certified Specialty: No
JENNIFER C LEE

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1265081871

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

PHYSICIANS ASSISTANT

LINDEMANN, CHRISTINA

Provider ID: 283760

Board Certified Specialty: No
CHRISTINA R LINDEMANN

4510 EXECUTIVE DR STE
325

SAN DIEGO, CA 92121

Phone: (800) 926-8273

Fax: (858) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1194373514

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

MARTIN, HALEY

Provider ID: 305026

Board Certified Specialty: No
HALEY R MARTIN

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1093440836



Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

D3. Directorio de proveedores especialistas

 Accessibility: CONTACT PROVIDER
 Website: N/A



PHYSICIANS ASSISTANT

MCADAMS, JOSEPH

Provider ID: 280611
Board Certified Specialty: No
JOSEPH MCADAMS
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273


Provider Gender: Male

NPI: 1104371251

 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT


MERRILL, COREY

Provider ID: 258040
Board Certified Specialty: No
COREY M MERRILL
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273


Provider Gender: Male

NPI: 1386032308

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N



 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT


NAKAMITSU, ABIGAIL

Provider ID: 268666
Board Certified Specialty: No
ABIGAIL L NAKAMITSU
 3030 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123
 Phone: (858) 966-6789
Fax: (858) 966-8519

 After Hours Phone: (858) 966-6789

Provider Gender: Female

NPI: 1932459179

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM
 Website: N/A

PHYSICIANS ASSISTANT


NGUYEN, KHANH

Provider ID: 310049
Board Certified Specialty: No
KHANH K NGUYEN
 4520 EXECUTIVE DR
SAN DIEGO, CA 92121
 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1427312644

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A

PHYSICIANS ASSISTANT


NGUYEN, KHANH

Provider ID: 310050
Board Certified Specialty: No
KHANH K NGUYEN
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1427312644

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes

D3. Directorio de proveedores especialistas

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

PHYSICIANS ASSISTANT


PAUL, ROBERT

Provider ID: 307945


Board Certified Specialty: No

ROBERT M PAUL

 5395 RUFFIN RD STE 204
SAN DIEGO, CA 92123

 Phone: (858) 571-3630

Fax: (858) 295-3948

 After Hours Phone: (858)
571-3630

Provider Gender: Male

NPI: 1972811412

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MEMORIAL

HOSPITAL ENCINITAS


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:30AM-4:30PM

 Website: N/A

PHYSICIANS ASSISTANT

PELIO, DARREN


Provider ID: 293441

Board Certified Specialty: No

DARREN A PELIO

 200 W ARBOR DR

SAN DIEGO, CA 92103

 Phone: (800) 926-8275

Fax: (888) 539-8783

 After Hours Phone: (800)
926-8275

Provider Gender: Male

NPI: 1386791028

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

PHYSICIANS ASSISTANT

PELIO, DARREN


Provider ID: 293444

Board Certified Specialty: No

DARREN A PELIO

 3900 5TH AVE STE 110

SAN DIEGO, CA 92103

 Phone: (800) 926-8278

Fax: (888) 539-8786

 After Hours Phone: (800)
926-8278

Provider Gender: Male

NPI: 1386791028

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

PHYSICIANS ASSISTANT

PERREAU, MARK


Provider ID: 283586


Board Certified Specialty: No

MARK R PERREAU

 200 W ARBOR DR

SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1356749451


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT

PERREAU, MARK


Provider ID: 283585


Board Certified Specialty: No

MARK R PERREAU

 4520 EXECUTIVE DR


SAN DIEGO, CA 92121

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1356749451

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT

D3. Directorio de proveedores especialistas

PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PHYSICIANS ASSISTANT

PHUNG, AIVI

Provider ID: 293247
Board Certified Specialty: No
AIVI D PHUNG
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
Fax: (858) 633-4680
After Hours Phone: (858)
279-0925

Provider Gender: Female
NPI: 1639528110

Provider English Spoken: Y
Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Website: N/A

PHYSICIANS ASSISTANT

PHUNG, AIVI

Provider ID: 293246
Board Certified Specialty: No
AIVI D PHUNG
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858)
810-8700
Provider Gender: Female

NPI: 1639528110
Provider English Spoken: Y
Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PHYSICIANS ASSISTANT

PRIEST, VIVIAN

Provider ID: 272430
Board Certified Specialty: No
VIVIAN I NGUYEN
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1225581754

Provider English Spoken: Y
Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

PYLE, ALEXANDRA

Provider ID: 297718
Board Certified Specialty: No
ALEXANDRA P PYLE
9333 GENESEE AVE STE
350
SAN DIEGO, CA 92121
Phone: (858) 455-6460
Fax: (858) 455-7197
After Hours Phone: (858)
455-6460

Provider Gender: Female
NPI: 1225416472




Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 20\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:30AM-4:00PM
Website: N/A

PHYSICIANS ASSISTANT

QUIJANO, GLENN

Provider ID: 307067
Board Certified Specialty: No
GLENN QUIJANO
5395 RUFFIN RD STE 204
SAN DIEGO, CA 92123
Phone: (858) 571-3630
Fax: (858) 295-3948
After Hours Phone: (858)
571-3630
Provider Gender: Male
NPI: 1407466030
Provider English Spoken: Y






D3. Directorio de proveedores especialistas




Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-4:30PM*
 *Website: N/A*

PHYSICIANS ASSISTANT

ROBERTS, AUDREY

Provider ID: 253253
Board Certified Specialty: No
AUDREY ELIZABETH ZANZUCCHI

 200 W ARBOR DR
SAN DIEGO, CA 92103
 *Phone: (619) 543-7777*
 *After Hours Phone: (619) 543-7777*
Provider Gender: Female
NPI: 1265960256
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*




Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

PHYSICIANS ASSISTANT

RODRIGUES, ANNETTE

Provider ID: 302452
Board Certified Specialty: No




ANNETTE A RODRIGUES
 3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
 *Phone: (858) 966-4003*
Fax: (858) 560-6798
 *After Hours Phone: (858) 966-4003*
Provider Gender: Female
NPI: 1205381845
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL



Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*




PHYSICIANS ASSISTANT

SCHMITT, EVA

Provider ID: 264176
Board Certified Specialty: No
EVA V SCHMITT

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 *Phone: (858) 966-8800*
 *After Hours Phone: (858) 966-8800*
Provider Gender: Female
NPI: 1174715106




 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: German*



Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

PHYSICIANS ASSISTANT

SCHROEDER, JENNIFER

Provider ID: 256639
Board Certified Specialty: No
JENNIFER K SCHROEDER

 200 W ARBOR DR
SAN DIEGO, CA 92103
 *Phone: (800) 926-8273*
Fax: (858) 453-1469
 *After Hours Phone: (800) 926-8273*
Provider Gender: Female
NPI: 1780851253

 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*

PHYSICIANS ASSISTANT

SCHROEDER, JENNIFER

D3. Directorio de proveedores especialistas

Provider ID: 256640

Board Certified Specialty: No

JENNIFER K SCHROEDER

4520 EXECUTIVE DR
SAN DIEGO, CA 92121

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1780851253

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

SCHULZ, STEFAN

Provider ID: 243419

Board Certified Specialty: No

STEFAN K SCHULZ

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1316102163

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

SHAUL, SHERA

Provider ID: 247974

Board Certified Specialty: No

SHERA M SHAUL

4520 EXECUTIVE DR STE 111
SAN DIEGO, CA 92121

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1336659507

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

SPEH, BRIAN

Provider ID: 305009

Board Certified Specialty: No

BRIAN A SPEH

6655 ALVARADO RD
SAN DIEGO, CA 92120

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1124593926

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

PHYSICIANS ASSISTANT

STALLINGS, ANDREA

Provider ID: 255913

Board Certified Specialty: No

ANDREA M STALLINGS

330 LEWIS ST
SAN DIEGO, CA 92103

Phone: (619) 543-7496

After Hours Phone: (619)
543-7496

Provider Gender: Female

NPI: 1972595478

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PHYSICIANS ASSISTANT

TESFAI, HELEN

Provider ID: 287372

Board Certified Specialty: No

HELEN S TESFAI

4168 FRONT ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

D3. Directorio de proveedores especialistas

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1942724042

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PHYSICIANS ASSISTANT


WAHLIN, TAMARA

Provider ID: 299599

Board Certified Specialty: No
TAMARA A WAHLIN

 8899 UNIVERSITY CENTER
LN

SAN DIEGO, CA 92122

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1083823322


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PHYSICIANS ASSISTANT

WAHLIN, TAMARA

Provider ID: 299600

Board Certified Specialty: No
TAMARA A WAHLIN

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1083823322

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PHYSICIANS ASSISTANT

WAHLIN, TAMARA

Provider ID: 299598

Board Certified Specialty: No
TAMARA A WAHLIN

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1083823322

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PHYSICIANS ASSISTANT

WEBB, SHANNON

Provider ID: 305285

Board Certified Specialty: No
SHANNON L WEBB

 6605 NANCY RIDGE DR
SAN DIEGO, CA 92121

 Phone: (858) 750-2983
Fax: (858) 750-2984

 After Hours Phone: (858)
750-2983

Provider Gender: Female


NPI: 1821271685


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM

 Website: N/A


PHYSICIANS ASSISTANT

WEIR, JACQUELINE

Provider ID: 278203

Board Certified Specialty: No
JACQUELINE R WEIR

 9909 MIRA MESA BLVD
STE 200

 SAN DIEGO, CA 92131
Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)

D3. Directorio de proveedores especialistas

926-8273
Provider Gender: Female
NPI: 1932494499
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

PHYSICIANS ASSISTANT

WEIR, JACQUELINE

Provider ID: 278201
Board Certified Specialty: No
JACQUELINE R WEIR

📍 330 LEWIS ST
SAN DIEGO, CA 92103
☎ Phone: (800) 925-8271
Fax: (888) 539-8781
📞 After Hours Phone: (800)
925-8271

Provider Gender: Female
NPI: 1932494499
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): DEREK J WRIGHT
N

♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

PHYSICIANS ASSISTANT

WEIR, JACQUELINE

Provider ID: 278200
Board Certified Specialty: No

JACQUELINE R WEIR
📍 4168 FRONT ST
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1932494499

☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

PHYSICIANS ASSISTANT

WRIGHT, DEREK

Provider ID: 302388
Board Certified Specialty: No

📍 3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110
☎ Phone: (619) 325-1161
Fax: (619) 325-1717
📞 After Hours Phone: (619)
325-1161

Provider Gender: Male
NPI: 1629674858
☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999

American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

PREVENTATIVE MEDICINE GENERAL

ROMERO, CAMILA

Provider ID: 293290
Board Certified Specialty: No
CAMILA X ROMERO

📍 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
☎ Phone: (858) 810-8700
Fax: (858) 633-4680
📞 After Hours Phone: (858)
810-8700


Provider Gender: Female
NPI: 1508912130
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: French, Spanish
Cultural Competency: N

Hospital Affiliation: SHARP
MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS

D3. Directorio de proveedores especialistas

Medi-Cal Open Panel: Yes
Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

PREVENTATIVE MEDICINE


GENERAL

ROMERO, CAMILA

Provider ID: 293289

Board Certified Specialty: No
CAMILA X ROMERO

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111


 Phone: (858) 279-0925

Fax: (858) 633-4680

 After Hours Phone: (858)
279-0925

Provider Gender: Female

NPI: 1508912130

 Provider English Spoken: Y

 Provider Language(s)
Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP


MARY BIRCH HOSP FOR


WOMEN AND NEWBORNS

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

PREVENTATIVE MEDICINE


GENERAL

ROMERO, CAMILA

Provider ID: 303060

Board Certified Specialty: No
CAMILA X ROMERO

 330 LEWIS ST
SAN DIEGO, CA 92103


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1508912130

 Provider English Spoken: Y

 Provider Language(s)
Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MARY BIRCH HOSP FOR


WOMEN AND NEWBORNS

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A


PSYCHOLOGIST

ABERCROMBIE, SHERI

Provider ID: 290770

Board Certified Specialty: No
SHERI ABERCROMBIE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111


 Phone: (858) 810-8700

Fax: (858) 633-4680

 After Hours Phone: (858)
810-8700

Provider Gender: Female

NPI: 1932292422

 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A


PSYCHOLOGIST

ABERCROMBIE, SHERI

Provider ID: 293400

Board Certified Specialty: No
SHERI ABERCROMBIE

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

Fax: (858) 633-4680

 After Hours Phone: (858)
279-0925

Provider Gender: Female


NPI: 1932292422


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:30AM-5:30PM

SA 8:30AM-4:00PM

 Website: N/A


PSYCHOLOGIST


BANKS, SARAH

Provider ID: 203173

Board Certified Specialty: No
SARAH J BANKS

 200 W ARBOR DR FL 1
SAN DIEGO, CA 92103


 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

D3. Directorio de proveedores especialistas

Provider Gender: Female

NPI: 1164701132

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


PSYCHOLOGIST

BANKS, SARAH

Provider ID: 304195

Board Certified Specialty: No
SARAH J BANKS

 6655 ALVARADO RD
SAN DIEGO, CA 92120

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1164701132

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

PSYCHOLOGIST

BANKS, SARAH


Provider ID: 203174


Board Certified Specialty: No

SARAH J BANKS

 4510 EXECUTIVE DR STE
325

SAN DIEGO, CA 92121

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1164701132

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PSYCHOLOGIST


BASS, GURGIANA


Provider ID: 306550

Board Certified Specialty: No

GURGIANA BASS

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)
279-0925

Provider Gender: Female

NPI: 1639325277


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M 8:00AM-4:30PM
TU 8:00AM-0:00PM

W 8:00AM-4:30PM

TH 8:00AM-0:00PM

 Website: N/A

PSYCHOLOGIST


BASS, GURGIANA

Provider ID: 290752

Board Certified Specialty: No

GURGIANA BASS

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

Fax: (858) 633-4680

 After Hours Phone: (858)
810-8700

Provider Gender: Female

NPI: 1639325277

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

PSYCHOLOGIST



CHESHER, NICHOLAS

Provider ID: 273811

Board Certified Specialty: No

NICHOLAS J CHESHER

D3. Directorio de proveedores especialistas

 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1124539697


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A



PSYCHOLOGIST

CLEMENT, LUIS

Provider ID: 290745

Board Certified Specialty: No

LUIS F CLEMENT

 2630 1ST AVE
SAN DIEGO, CA 92103
 Phone: (619) 234-2158
Fax: (619) 234-0206

 After Hours Phone: (619)
234-2158

Provider Gender: Male

NPI: 1235364712


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A



PSYCHOLOGIST

DIOKNO, RHODA

Provider ID: 290800

Board Certified Specialty: No

ROHDA CARINO DIOKNO

 2630 1ST AVE
SAN DIEGO, CA 92103
 Phone: (619) 234-2158
Fax: (619) 234-0206

 After Hours Phone: (619)
234-2158

Provider Gender: Female

NPI: 1629109483


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A



PSYCHOLOGIST


FIRESTONE, MICHELLE

Provider ID: 290954

Board Certified Specialty: No

MICHELLE E FIRESTONE

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
Fax: (858) 633-4680

 After Hours Phone: (858)
279-0925

Provider Gender: Female

NPI: 1114687803

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

PSYCHOLOGIST

FIRESTONE, MICHELLE

Provider ID: 290773

Board Certified Specialty: No

MICHELLE E FIRESTONE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
Fax: (858) 633-4680

 After Hours Phone: (858)
810-8700

Provider Gender: Female

NPI: 1114687803


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

PSYCHOLOGIST

FORZANI, CHRISTINA

Provider ID: 290780

Board Certified Specialty: No

CHRISTINA A FORZANI

 4290 POLK AVE
SAN DIEGO, CA 92105
 Phone: (619) 563-0250
Fax: (858) 633-4681

 After Hours Phone: (619)

D3. Directorio de proveedores especialistas

563-0250
Provider Gender: Female
NPI: 1902939630
☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A

PSYCHOLOGIST **GIAMONA, KRISTEN**

Provider ID: 294171
Board Certified Specialty: No
KRISTEN M GIAMONA

📍 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
☎ Phone: (858) 279-0925
Fax: (858) 633-4680
🕒 After Hours Phone: (858)
279-0925
Provider Gender: Female
NPI: 1376824383
☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A

PSYCHOLOGIST **GIAMONA, KRISTEN**

Provider ID: 290801
Board Certified Specialty: No
KRISTEN M GIAMONA

📍 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
☎ Phone: (858) 810-8700
Fax: (858) 633-4680
🕒 After Hours Phone: (858)
810-8700
Provider Gender: Female
NPI: 1376824383
☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A

PSYCHOLOGIST **GOMEZ, JUANITA**

Provider ID: 291424
Board Certified Specialty: No
JUANITA GOMEZ

📍 6030 VILLAGE WAY
SAN DIEGO, CA 92130
☎ Phone: (800) 926-8372
Fax: (888) 539-8781
🕒 After Hours Phone: (800)
926-8372
Provider Gender: Female
NPI: 1790915759
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A

PSYCHOLOGIST

KLUEMPER, NICOLE

Provider ID: 296237
Board Certified Specialty: No
NICOLE S KLUEMPER

📍 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
☎ Phone: (858) 279-0925
Fax: (858) 633-4680
🕒 After Hours Phone: (858)
279-0925

Provider Gender: Female
NPI: 1902125818

☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 2\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

PSYCHOLOGIST

KLUEMPER, NICOLE

Provider ID: 290792
Board Certified Specialty: No
NICOLE S KLUEMPER

📍 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
☎ Phone: (858) 810-8700
Fax: (858) 633-4680
🕒 After Hours Phone: (858)
810-8700

Provider Gender: Female
NPI: 1902125818

☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 2\999

D3. Directorio de proveedores especialistas

American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Website: N/A

PSYCHOLOGIST

LABIB, MICHAEL

Provider ID: 301617

Board Certified Specialty: No
MICHAEL LABIB

1666 PRECISION PARK LN
SAN DIEGO, CA 92173

Phone: (619) 662-4100

Fax: (619) 785-3384

After Hours Phone: (619)
662-4100

Provider Gender: Male

NPI: 1609055797

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PSYCHOLOGIST

LEBENSOHN CHIALVO, FLORENCIA

Provider ID: 245225

Board Certified Specialty: No
FLORENCIA LEBENSOHN
CHIALVO

7910 FROST ST STE 350
SAN DIEGO, CA 92123

Phone: (858) 496-4800
After Hours Phone: (858)
496-4800

Provider Gender: Female

NPI: 1134788730

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PSYCHOLOGIST

LEBENSOHN CHIALVO, FLORENCIA

Provider ID: 245224

Board Certified Specialty: No
FLORENCIA LEBENSOHN
CHIALVO

9333 GENESEE AVE STE
200

SAN DIEGO, CA 92121

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1134788730

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PSYCHOLOGIST

LINKE, SARAH

Provider ID: 273638

Board Certified Specialty: No
SARAH E LINKE

9909 MIRA MESA BLVD
STE 200

SAN DIEGO, CA 92131

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1487026415

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A




PSYCHOLOGIST

LINKE, SARAH


Provider ID: 273639

D3. Directorio de proveedores especialistas

Board Certified Specialty: No
SARAH E LINKE

 4910 DIRECTORS PL STE
250
SAN DIEGO, CA 92121
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273




Provider Gender: Female
NPI: 1487026415

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PSYCHOLOGIST

MAGINOT-CHESSER, TAMARA


Provider ID: 273223

Board Certified Specialty: No
TAMARA R MAGINOT
CHESSER

 4510 EXECUTIVE DR
SAN DIEGO, CA 92121
 Phone: (858) 534-8019
Fax: (858) 534-6727

 After Hours Phone: (858)
534-8019

Provider Gender: Female
NPI: 1043441165

 Provider English Spoken: Y


Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM



 Website: N/A

PSYCHOLOGIST

MCCULLUM, TIFFANY

Provider ID: 290689

Board Certified Specialty: No
TIFFANY MCCULLUM

 286 EUCLID AVE STE 302
SAN DIEGO, CA 92114
 Phone: (619) 662-4100
Fax: (619) 428-7952

 After Hours Phone: (619)
662-4100

Provider Gender: Female
NPI: 1528306206


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 13\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

PSYCHOLOGIST

MONTOYA, JESSICA


Provider ID: 274619

Board Certified Specialty: No
JESSICA L MONTOYA

 4168 FRONT ST FL 3
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273


Provider Gender: Female
NPI: 1003421256


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PSYCHOLOGIST

NING, GRACE

Provider ID: 290742

Board Certified Specialty: No
GRACE J NING


 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
Fax: (858) 633-4680

 After Hours Phone: (858)
810-8700



Provider Gender: Female

D3. Directorio de proveedores especialistas

NPI: 1598911315

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Chinese, Mandarin
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Website: N/A

PSYCHOLOGIST

NING, GRACE


Provider ID: 296219

Board Certified Specialty: No
GRACE J NING



 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
Fax: (858) 633-4680
 After Hours Phone: (858)
279-0925

Provider Gender: Female

NPI: 1598911315

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Chinese, Mandarin
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Website: N/A

PSYCHOLOGIST

NORMAN, MARC

Provider ID: 276869


Board Certified Specialty: No

MARC A NORMAN

 350 DICKINSON ST
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273




Provider Gender: Male
NPI: 1922169101

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N




 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PSYCHOLOGIST

NORMAN, MARC


Provider ID: 272916

Board Certified Specialty: No
MARC A NORMAN

 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (619) 543-2827
 After Hours Phone: (619)
543-2827

Provider Gender: Male




NPI: 1922169101

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N




 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PSYCHOLOGIST

ORFF, HENRY


Provider ID: 273009

Board Certified Specialty: No
HENRY J ORFF




 4520 EXECUTIVE DR STE
P2
SAN DIEGO, CA 92121
 Phone: (844) 757-5337
 After Hours Phone: (844)
757-5337

Provider Gender: Male

NPI: 1144685215

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N



 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PSYCHOLOGIST

ORTIZ, MARIA

Provider ID: 290721

Board Certified Specialty: No
MARIA E ORTIZ

 950 S EUCLID AVE
SAN DIEGO, CA 92114
 Phone: (619) 662-4100

D3. Directorio de proveedores especialistas

Fax: (619) 662-4158

☎ After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1497980775

☑ Provider English Spoken: Y

☑ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

PSYCHOLOGIST

**PATTERSON-HYATT,
KIMBERLY**

Provider ID: 290730

Board Certified Specialty: No

KIMBERLY G

PATTERSON-HYATT

📍 4690 EL CAJON BLVD
SAN DIEGO, CA 92115

☎ Phone: (619) 662-4100

Fax: (619) 205-6305

☎ After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1780997742

☑ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PSYCHOLOGIST

PRINCE, RENEE

Provider ID: 303603

Board Certified Specialty: No

RENEE K PRINCE

📍 10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126

☎ Phone: (844) 200-2426

Fax: (619) 474-4008

☎ After Hours Phone: (844)
200-2426

Provider Gender: Female

NPI: 1467737908

☑ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-6:00PM

🌐 Website: N/A

PSYCHOLOGIST

RADOJEVIC, NATASHA

Provider ID: 290690

Board Certified Specialty: No

NATASHA RADOJEVIC

📍 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

☎ Phone: (858) 810-8700

Fax: (858) 633-4680

☎ After Hours Phone: (858)
810-8700

Provider Gender: Female

NPI: 1821365008

☑ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-TU
8:30AM-5:30PM

TH-F 8:30AM-5:30PM

🌐 Website: N/A

PSYCHOLOGIST

RADOJEVIC, NATASHA

Provider ID: 306574

Board Certified Specialty: No

NATASHA RADOJEVIC

📍 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

☎ Phone: (858) 279-0925

Fax: (858) 633-4680

☎ After Hours Phone: (858)
279-0925

Provider Gender: Female

NPI: 1821365008

☑ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-TU
8:30AM-5:30PM

TH-F 8:30AM-5:30PM

🌐 Website: N/A

PSYCHOLOGIST

SALO, STEPHANIE

Provider ID: 307831

Board Certified Specialty: No

D3. Directorio de proveedores especialistas

STEPHANIE P SALO

4290 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 563-0250
Fax: (858) 633-4681
After Hours Phone: (619)
563-0250

Provider Gender: Female

NPI: 1477967784

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 17\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PSYCHOLOGIST

SHELLINGER, KRISTON

Provider ID: 213752

Board Certified Specialty: No

KRISTON B SHELLINGER

330 LEWIS ST
SAN DIEGO, CA 92103
Phone: (858) 246-1979
After Hours Phone: (858)
246-1979

Provider Gender: Female

NPI: 1710234273

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD LA JOLLA JOHN
SALLY THORNTON, UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): KRISTON B SCHELLINGER
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PSYCHOLOGIST

SHELLINGER, KRISTON

Provider ID: 213751

Board Certified Specialty: No

KRISTON B SCHELLINGER

9909 MIRA MESA BLVD
STE 200

SAN DIEGO, CA 92131

Phone: (858) 246-1979

After Hours Phone: (858)
246-1979

Provider Gender: Female

NPI: 1710234273

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD LA JOLLA JOHN
SALLY THORNTON, UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PSYCHOLOGIST

SHELLINGER, KRISTON

Provider ID: 213750

Board Certified Specialty: No

9333 GENESEE AVE STE
200

SAN DIEGO, CA 92121

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1710234273

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD LA JOLLA JOHN
SALLY THORNTON, UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

PSYCHOLOGIST

TARLE, STEPHANIE

Provider ID: 303115

Board Certified Specialty: No

STEPHANIE J TARLE

6655 ALVARADO RD
SAN DIEGO, CA 92120

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1659920403


Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

D3. Directorio de proveedores especialistas

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PSYCHOLOGIST

TO, TUAN

Provider ID: 290284

Board Certified Specialty: No
TUAN TO

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111


 Phone: (858) 810-8700

Fax: (858) 633-4680

 After Hours Phone: (858)
810-8700

Provider Gender: Male

NPI: 1255696183

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 5\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PSYCHOLOGIST

TO, TUAN

Provider ID: 290285

Board Certified Specialty: No
TUAN TO

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925


Fax: (858) 633-4680


 After Hours Phone: (858)

279-0925

Provider Gender: Male

NPI: 1255696183

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 5\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PSYCHOLOGIST

TO, TUAN

Provider ID: 290283

Board Certified Specialty: No
TUAN TO

 4290 POLK AVE
SAN DIEGO, CA 92105


 Phone: (619) 563-0250

Fax: (858) 633-4681

 After Hours Phone: (619)
563-0250

Provider Gender: Male

NPI: 1255696183

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Vietnamese


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 5\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


PSYCHOLOGIST

TWAMLEY, ELIZABETH

Provider ID: 290717

Board Certified Specialty: No
ELIZABETH W TWAMLEY

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 Phone: (619) 233-8500

Fax: (619) 687-1067

 After Hours Phone: (619)
233-8500

Provider Gender: Female


NPI: 1700089141


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-W
8:30AM-5:00PM
TH 8:30AM-9:00PM
F 8:30AM-5:00PM

 Website: N/A

PULMONARY DISEASES

BAILEY, JACOB

Provider ID: 299924

Board Certified Specialty: No
JACOB A BAILEY

 4520 EXECUTIVE DR
SAN DIEGO, CA 92121

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male




NPI: 1598150039

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes




Min/Max Age: 0\999

D3. Directorio de proveedores especialistas




American Sign Language (ASL):  Provider Language(s)
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

PULMONARY DISEASES

BAILEY, JACOB
Provider ID: 299923
Board Certified Specialty: No
JACOB A BAILEY

 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1598150039

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A


PULMONARY DISEASES

JOSHUA, JISHA

Provider ID: 238062
Board Certified Specialty: No
JISHA K JOSHUA




 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1023436417

 Provider English Spoken: Y

Spoken: Hindi, Malayalam
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR



Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A



PULMONARY DISEASES

JOSHUA, JISHA

Provider ID: 238061
Board Certified Specialty: No
JISHA K JOSHUA

 4520 EXECUTIVE DR STE
P2
SAN DIEGO, CA 92121
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1023436417

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Hindi, Malayalam
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR



Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

PULMONARY DISEASES



LE, HUAN

Provider ID: 27358
Board Certified Specialty: No
HUAN A LE



 5507 EL CAJON BLVD STE
C
SAN DIEGO, CA 92115
 Phone: (619) 582-1448
Fax: (619) 582-1081

 After Hours Phone: (619)
582-1448

Provider Gender: Male
NPI: 1780797381

 Provider English Spoken: Y
 Provider Language(s)
Spoken: French, Spanish,
Vietnamese

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, PARADISE VALLEY
HOSPITAL, SHARP CHULA
VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\99
American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER
 Hours: M-W
9:00AM-5:00PM
TH 8:00AM-1:00PM
F 9:00AM-6:00PM
SA 8:00AM-11:00AM

D3. Directorio de proveedores especialistas


 Website: N/A


PULMONARY DISEASES

LE, HUAN

Provider ID: 300636

Board Certified Specialty: No
HUAN A LE

 5507 EL CAJON BLVD STE
C
SAN DIEGO, CA 92115


 Phone: (619) 582-1448


Fax: (619) 582-1081

 After Hours Phone: (619)
582-1448

Provider Gender: Male

NPI: 1780797381

 Provider English Spoken: Y

 Provider Language(s)
Spoken: French, Spanish,
Vietnamese

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL CHULA
VISTA, PARADISE VALLEY
HOSPITAL, SHARP CHULA
VISTA MED CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-W
9:00AM-5:00PM
TH 8:00AM-1:00PM
F 9:00AM-6:00PM
SA 8:00AM-11:00AM

 Website: N/A


PULMONARY DISEASES

MCGUIRE, WILLIAM

Provider ID: 299986

Board Certified Specialty: No
WILLIAM C MCGUIRE

 200 W ARBOR DR
SAN DIEGO, CA 92103


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1841684081

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR, SHARP


MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS,
SHARP CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

PULMONARY DISEASES

PEARCE, ALEX

Provider ID: 300055

Board Certified Specialty: No
ALEX K PEARCE

 200 W ARBOR DR
SAN DIEGO, CA 92103


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1265896856

 Provider English Spoken: Y

Cultural Competency: N
Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


RADIATION ONCOLOGY

CARMONA, RUBEN

Provider ID: 303100

Board Certified Specialty: No
RUBEN CARMONA

 7901 FROST ST
SAN DIEGO, CA 92123

 Phone: (858) 939-5010

Fax: (619) 740-8499

 After Hours Phone: (858)
939-5010

Provider Gender: Male

NPI: 1275929242

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP
CHULA VISTA MED CTR, Sharp
Grossmont Hospital, SHARP


MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

RADIATION ONCOLOGY

D3. Directorio de proveedores especialistas

COLEMAN, LORI

Provider ID: 221091

Board Certified Specialty: No

LORI A COLEMAN

3075 HEALTH CENTER DR
SAN DIEGO, CA 92123

Phone: (858) 939-5010

Fax: (858) 939-5021

After Hours Phone: (858)
939-5010

Provider Gender: Female

NPI: 1053348920

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

SHARP MEMORIAL HOSPITAL,

GROSSMONT HOSPITAL,

PALOMAR MEDICAL CENTER,

Sharp Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 19\100

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

RADIATION ONCOLOGY

HATTANGADI-GLUTH, JONA

Provider ID: 262270

Board Certified Specialty: No

JONA A HATTANGADI-GLUTH

16918 DOVE CANYON RD
STE 103

SAN DIEGO, CA 92127

Phone: (858) 649-5100

Fax: (858) 649-5099

After Hours Phone: (858)
649-5100

Provider Gender: Female

NPI: 1467625491

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
8:00AM-5:00PM
F 8:00AM-8:00PM

Website: N/A

RADIATION ONCOLOGY

HATTANGADI-GLUTH, JONA

Provider ID: 254496

Board Certified Specialty: No

JONA A HATTANGADI-GLUTH

16918 DOVE CANYON RD
STE 103

SAN DIEGO, CA 92127

Phone: (858) 649-5100

Fax: (858) 649-5099

After Hours Phone: (858)
649-5100

Provider Gender: Female

NPI: 1467625491

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
8:00AM-5:00PM
F 8:00AM-8:00PM

Website: N/A

RADIATION ONCOLOGY

HOOPES, DAVID

Provider ID: 269725

Board Certified Specialty: No

DAVID J HOOPES

16918 DOVE CANYON RD
STE 103

SAN DIEGO, CA 92127

Phone: (858) 649-5100

Fax: (858) 649-5099

After Hours Phone: (858)
649-5100

Provider Gender: Male

NPI: 1962520080

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-5:00PM

Website: N/A

RADIATION ONCOLOGY

HOOPES, DAVID

Provider ID: 262206

Board Certified Specialty: No

D3. Directorio de proveedores especialistas

DAVID J HOOPES

16918 DOVE CANYON RD
STE 103

SAN DIEGO, CA 92127

Phone: (858) 649-5100

Fax: (858) 649-5099

After Hours Phone: (858)
649-5100

Provider Gender: Male

NPI: 1962520080

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:30AM-5:00PM

Website: N/A

RADIATION ONCOLOGY

TRINGALE, KATHRYN

Provider ID: 306883

Board Certified Specialty: No

KATHRYN R TRINGALE

9730 SUMMERS RIDGE RD
STE 101

SAN DIEGO, CA 92121

Phone: (858) 345-2445

Fax: (858) 578-1144

After Hours Phone: (858)
345-2445

Provider Gender: Female

NPI: 1780172031

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

RADIATION ONCOLOGY

VOLPP, PAUL

Provider ID: 221105

Board Certified Specialty: No

PAUL B VOLPP

3075 HEALTH CENTER DR
SAN DIEGO, CA 92123

Phone: (858) 939-5010

Fax: (858) 939-5021

After Hours Phone: (858)
939-5010

Provider Gender: Male

NPI: 1225186232

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, SHARP

CHULA VISTA MED CTR,

GROSSMONT HOSPITAL,

PALOMAR MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 19\100

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

RADIOLOGY DIAGNOSTIC

BERMAN, ZACHARY

Provider ID: 304163

Board Certified Specialty: No

ZACHARY T BERMAN

6655 ALVARADO RD
SAN DIEGO, CA 92120

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1033521190

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

RADIOLOGY DIAGNOSTIC

BERMAN, ZACHARY

Provider ID: 269318

Board Certified Specialty: No

ZACHARY T BERMAN

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1033521190

Provider English Spoken: Y

D3. Directorio de proveedores especialistas

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY


THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*

8:00AM-5:00PM


 *Website: N/A*

RADIOLOGY DIAGNOSTIC BRANCH, CODY

Provider ID: 283675

*Board Certified Specialty: No
CODY BRANCH*

 200 W ARBOR DR
SAN DIEGO, CA 92103

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Male

NPI: 1851770622

 *Provider English Spoken: Y
Cultural Competency: N*

Hospital Affiliation: UCSD

*MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999


American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*

8:00AM-5:00PM

 *Website: N/A*


RADIOLOGY DIAGNOSTIC BRANCH, CODY

Provider ID: 304199

Board Certified Specialty: No

CODY BRANCH

 6655 ALVARADO RD
SAN DIEGO, CA 92120

 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

Provider Gender: Male

NPI: 1851770622

 *Provider English Spoken: Y
Cultural Competency: N*

Hospital Affiliation: UCSD

*MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*


RADIOLOGY DIAGNOSTIC CARSWELL, AIMEE

Provider ID: 304194


Board Certified Specialty: No

AIMEE P CARSWELL

 6655 ALVARADO RD
SAN DIEGO, CA 92120


 *Phone: (858) 554-1212*

Fax: (858) 795-1195

 *After Hours Phone: (858)
554-1212*

Provider Gender: Female

NPI: 1619156635

 *Provider English Spoken: Y*

Cultural Competency: N

Hospital Affiliation:

EISENHOWER MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*


RADIOLOGY DIAGNOSTIC CARSWELL, AIMEE

Provider ID: 303054

Board Certified Specialty: No

AIMEE P CARSWELL

 200 W ARBOR DR
SAN DIEGO, CA 92103

 *Phone: (858) 554-1212*

Fax: (858) 795-1195

 *After Hours Phone: (858)
554-1212*

Provider Gender: Female

NPI: 1619156635

 *Provider English Spoken: Y
Cultural Competency: N*

Hospital Affiliation:

EISENHOWER MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*







RADIOLOGY DIAGNOSTIC CARSWELL, AIMEE

Provider ID: 303055

Board Certified Specialty: No

AIMEE P CARSWELL




D3. Directorio de proveedores especialistas

 330 LEWIS ST
SAN DIEGO, CA 92103
 Phone: (858) 554-1212
Fax: (858) 795-1195
 After Hours Phone: (858)
554-1212
Provider Gender: Female
NPI: 1619156635
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
EISENHOWER MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

RADIOLOGY DIAGNOSTIC

CHENG, KAREN

Provider ID: 283226
Board Certified Specialty: No
KAREN Y CHENG
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1427430511
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

RADIOLOGY DIAGNOSTIC







CHENG, KAREN

Provider ID: 304207
Board Certified Specialty: No
KAREN Y CHENG
 6655 ALVARADO RD
SAN DIEGO, CA 92120
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1427430511
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

RADIOLOGY DIAGNOSTIC

CHENG, KAREN

Provider ID: 283228
Board Certified Specialty: No
KAREN Y CHENG
 330 LEWIS ST STE 202

SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1427430511
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

RADIOLOGY DIAGNOSTIC

CHEWNING, RUSH

Provider ID: 301914
Board Certified Specialty: No
RUSH CHEWNING
 3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123
 Phone: (858) 966-8863
Fax: (858) 966-8863
 After Hours Phone: (858)
966-8863
Provider Gender: Male
NPI: 1083872212
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

D3. Directorio de proveedores especialistas


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

RADIOLOGY DIAGNOSTIC

FAZELI, SOUDABEH

Provider ID: 299991


Board Certified Specialty: No

SOUDABEH FAZELI

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1639553613


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

RADIOLOGY DIAGNOSTIC


FAZELI, SOUDABEH

Provider ID: 299992

Board Certified Specialty: No

SOUDABEH FAZELI

 330 LEWIS ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1639553613

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

RADIOLOGY DIAGNOSTIC


FAZELI, SOUDABEH

Provider ID: 304171

Board Certified Specialty: No

SOUDABEH FAZELI

 6655 ALVARADO RD
SAN DIEGO, CA 92120

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1639553613

 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

RADIOLOGY DIAGNOSTIC


FORCIER, NANCY

Provider ID: 286956

Board Certified Specialty: No

NANCY J FORCIER

 330 LEWIS ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1497721724

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL,

Providence Mission Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

RADIOLOGY DIAGNOSTIC

FORCIER, NANCY

Provider ID: 286954

Board Certified Specialty: No

NANCY J FORCIER

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1497721724

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
GREEN HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL,

D3. Directorio de proveedores especialistas

Providence Mission Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Website: N/A


RADIOLOGY DIAGNOSTIC


FOWLER, KATHRYN

Provider ID: 201289

Board Certified Specialty: No
KATHRYN J FOWLER

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1255457941

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR, SCRIPPS MEMORIAL

HOSPITAL, SCRIPPS MERCY
HOSPITAL, SCRIPPS MERCY

HOSPITAL CHULA VISTA,
SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,
SCRIPPS GREEN HOSPITAL,


SCRIPPS GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999


American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

RADIOLOGY DIAGNOSTIC


FOWLER, KATHRYN

Provider ID: 201291

Board Certified Specialty: No
KATHRYN J FOWLER

 330 LEWIS ST STE 202
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1255457941

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR, SCRIPPS MEMORIAL

HOSPITAL, SCRIPPS MERCY
HOSPITAL, SCRIPPS MERCY

HOSPITAL CHULA VISTA,
SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,
SCRIPPS GREEN HOSPITAL,


SCRIPPS GREEN HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


RADIOLOGY DIAGNOSTIC

GRISSOM, MURRAY

Provider ID: 271569

Board Certified Specialty: No
MURRAY J GRISSOM

 330 LEWIS ST STE 202
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1720465396

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,
Stanford Health Care,

STANFORD HEALTH CARE
TRI-VALLEY


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


RADIOLOGY DIAGNOSTIC

GRISSOM, MURRAY

Provider ID: 271567

Board Certified Specialty: No
MURRAY J GRISSOM

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273




Provider Gender: Male

NPI: 1720465396

D3. Directorio de proveedores especialistas




 *Provider English Spoken:* Y N
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON,
Stanford Health Care,
STANFORD HEALTH CARE
TRI-VALLEY

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N



 *Accessibility:* CONTACT PROVIDER
 *Hours:* M-F
8:00AM-5:00PM
 *Website:* N/A

RADIOLOGY DIAGNOSTIC **HANNSUN, GEMMY**




Provider ID: 282789
Board Certified Specialty: No
GEMMY HANNSUN

 200 W ARBOR DR
SAN DIEGO, CA 92103
 *Phone:* (800) 926-8273
Fax: (888) 539-8781
 *After Hours Phone:* (800)
926-8273

Provider Gender: Male
NPI: 1992120026

 *Provider English Spoken:* Y
 *Provider Language(s)*
Spoken: Khmer, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):



 *Accessibility:* CONTACT PROVIDER
 *Hours:* M-F
8:00AM-5:00PM
 *Website:* N/A

RADIOLOGY DIAGNOSTIC **HANNSUN, GEMMY**




Provider ID: 282791
Board Certified Specialty: No
GEMMY HANNSUN

 330 LEWIS ST STE 202
SAN DIEGO, CA 92103
 *Phone:* (800) 926-8273
Fax: (888) 539-8781
 *After Hours Phone:* (800)
926-8273

Provider Gender: Male
NPI: 1992120026

 *Provider English Spoken:* Y
 *Provider Language(s)*
Spoken: Khmer, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N


 *Accessibility:* CONTACT PROVIDER
 *Hours:* M-F
8:00AM-5:00PM
 *Website:* N/A

RADIOLOGY DIAGNOSTIC **HORKY, LAURA**




Provider ID: 241853
Board Certified Specialty: No
LAURA L HORKY

 200 W ARBOR DR
SAN DIEGO, CA 92103
 *Phone:* (800) 926-8273
 *After Hours Phone:* (800)
926-8273

Provider Gender: Female
NPI: 1598967812




 *Provider English Spoken:* Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N


 *Accessibility:* CONTACT PROVIDER
 *Hours:* M-F
8:00AM-5:00PM
 *Website:* N/A

RADIOLOGY DIAGNOSTIC **JAFFRAY, PAUL**



Provider ID: 299957
Board Certified Specialty: No
PAUL M JAFFRAY

 200 W ARBOR DR
SAN DIEGO, CA 92103
 *Phone:* (800) 926-8273
Fax: (888) 539-8781
 *After Hours Phone:* (800)
926-8273

Provider Gender: Male
NPI: 1275700999

 *Provider English Spoken:* Y
Cultural Competency: N
Hospital Affiliation: Los Angeles
General Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):

D3. Directorio de proveedores especialistas


N
 Accessibility: CONTACT PROVIDER
 Website: N/A

RADIOLOGY DIAGNOSTIC

JAFFRAY, PAUL

Provider ID: 299958
Board Certified Specialty: No
PAUL M JAFFRAY

 330 LEWIS ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1275700999

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Los Angeles
General Medical Center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


RADIOLOGY DIAGNOSTIC

JAFFRAY, PAUL

Provider ID: 304165

Board Certified Specialty: No
PAUL M JAFFRAY

 6655 ALVARADO RD
SAN DIEGO, CA 92120

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1275700999

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Los Angeles
General Medical Center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

RADIOLOGY DIAGNOSTIC

JAZBEH, SAMMER

Provider ID: 304167

Board Certified Specialty: No
SAMMER JAZBEH

 6655 ALVARADO RD
SAN DIEGO, CA 92120



 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1770825457

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON,
PROVIDENCE LITTLE CO OF
MARY MED CTR TORRANCE,
PROVIDENCE LITTLE CO OF
MARY MED CTR SAN PEDRO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


RADIOLOGY DIAGNOSTIC

JAZBEH, SAMMER

Provider ID: 271127

Board Certified Specialty: No
SAMMER JAZBEH

 330 LEWIS ST STE 202
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1770825457

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,
PROVIDENCE LITTLE CO OF


MARY MED CTR TORRANCE,
PROVIDENCE LITTLE CO OF


MARY MED CTR SAN PEDRO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

RADIOLOGY DIAGNOSTIC

JAZBEH, SAMMER

Provider ID: 271126

D3. Directorio de proveedores especialistas

Board Certified Specialty: No
SAMMER JAZBEH

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1770825457

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,

PROVIDENCE LITTLE CO OF

MARY MED CTR TORRANCE,

PROVIDENCE LITTLE CO OF

MARY MED CTR SAN PEDRO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

RADIOLOGY DIAGNOSTIC

KHURANA, AMAN

Provider ID: 307768

Board Certified Specialty: No

AMAN KHURANA

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1427496710

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

RADIOLOGY DIAGNOSTIC

KHURANA, AMAN

Provider ID: 307766

Board Certified Specialty: No

AMAN KHURANA

330 LEWIS ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1427496710

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

RADIOLOGY DIAGNOSTIC

KHURANA, AMAN

Provider ID: 307765

Board Certified Specialty: No

AMAN KHURANA

6655 ALVARADO RD

SAN DIEGO, CA 92120

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1427496710

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

RADIOLOGY DIAGNOSTIC

KONDILI, DHIMITER

Provider ID: 283145

Board Certified Specialty: No

DHIMITER KONDILI

330 LEWIS ST STE 202
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1699125450

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

EISENHOWER MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

D3. Directorio de proveedores especialistas

 Website: N/A

RADIOLOGY DIAGNOSTIC

KONDILI, DHIMITER

Provider ID: 283143

Board Certified Specialty: No

DHIMITER KONDILI

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1699125450

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation:


EISENHOWER MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

RADIOLOGY DIAGNOSTIC


MARKS, ROBERT

Provider ID: 300064

Board Certified Specialty: No

ROBERT M MARKS

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1952389934

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: ST MARY
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

RADIOLOGY DIAGNOSTIC


MARKS, ROBERT

Provider ID: 300065

Board Certified Specialty: No

ROBERT M MARKS

 330 LEWIS ST
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1952389934

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: ST MARY
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

RADIOLOGY DIAGNOSTIC

RITCHIE, DAVID

Provider ID: 300031

Board Certified Specialty: No

DAVID J RITCHIE

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male


NPI: 1407201916

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

RADIOLOGY DIAGNOSTIC

SADAT, SAYED


Provider ID: 299968

Board Certified Specialty: No

SAYED W SADAT

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male


NPI: 1679000806

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

RADIOLOGY DIAGNOSTIC

D3. Directorio de proveedores especialistas

SADAT, SAYED

Provider ID: 299969

Board Certified Specialty: No
SAYED W SADAT

330 LEWIS ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1679000806

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

RADIOLOGY DIAGNOSTIC

SADAT, SAYED

Provider ID: 304202

Board Certified Specialty: No
SAYED W SADAT

6655 ALVARADO RD
SAN DIEGO, CA 92120

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1679000806

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

Website: N/A

RADIOLOGY DIAGNOSTIC

SCHULTZ, HEATHER

Provider ID: 240344

Board Certified Specialty: No
HEATHER M SCHULTZ

330 LEWIS ST STE 202
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1871910810

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

RADIOLOGY DIAGNOSTIC

SCHULTZ, HEATHER

Provider ID: 240342

Board Certified Specialty: No
HEATHER M SCHULTZ

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1871910810

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

RADIOLOGY DIAGNOSTIC

SEARLEMAN, ADAM

Provider ID: 299948

Board Certified Specialty: No
ADAM C SEARLEMAN

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1134570641

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

RADIOLOGY DIAGNOSTIC

SEARLEMAN, ADAM

Provider ID: 299949

D3. Directorio de proveedores especialistas

Board Certified Specialty: No
ADAM C SEARLEMAN

📍 330 LEWIS ST
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
📠 Fax: (888) 539-8781
🕒 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1134570641

🗣 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

RADIOLOGY DIAGNOSTIC

SLATER, JERRY

Provider ID: 283312

Board Certified Specialty: No
JERRY SLATER

📍 330 LEWIS ST STE 202
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
📠 Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1851746382

🗣 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,
LOMA LINDA UNIVERSITY
MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

RADIOLOGY DIAGNOSTIC

SLATER, JERRY

Provider ID: 283310

Board Certified Specialty: No
JERRY SLATER

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273
📠 Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1851746382

🗣 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,
LOMA LINDA UNIVERSITY
MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

RADIOLOGY DIAGNOSTIC

SPENGLER, NATHAN

Provider ID: 303049

Board Certified Specialty: No
NATHAN M SPENGLER

📍 330 LEWIS ST
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273
📠 Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1992919666

🗣 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:
UNIVERSITY OF CALIFORNIA
IRVINE MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

RADIOLOGY DIAGNOSTIC

SPENGLER, NATHAN

Provider ID: 303048

Board Certified Specialty: No
NATHAN M SPENGLER

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273
📠 Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1992919666

🗣 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:

UNIVERSITY OF CALIFORNIA

D3. Directorio de proveedores especialistas

IRVINE MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

RADIOLOGY DIAGNOSTIC

STEPENOSKY, JAMES


Provider ID: 309702
Board Certified Specialty: No
JAMES E STEPENOSKY





 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1598738577
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

RADIOLOGY DIAGNOSTIC

STEPENOSKY, JAMES




Provider ID: 309703
Board Certified Specialty: No
JAMES E STEPENOSKY




 330 LEWIS ST
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781



 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1598738577
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

RADIOLOGY DIAGNOSTIC

STRAKA, CHRISTOPHER

Provider ID: 276875
Board Certified Specialty: No
CHRISTOPHER A STRAKA
 16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
 Phone: (858) 649-5100
Fax: (858) 649-5099
 After Hours Phone: (858)
649-5100
Provider Gender: Male
NPI: 1801281399

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 17\120
American Sign Language (ASL):
N
 Accessibility: CONTACT

PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

RADIOLOGY DIAGNOSTIC

SWEET, JASON

Provider ID: 305028
Board Certified Specialty: No
JASON D SWEET


 6655 ALVARADO RD
SAN DIEGO, CA 92120
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273


Provider Gender: Male
NPI: 1326197393
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

RADIOLOGY DIAGNOSTIC




TADDONIO, MICHAEL

Provider ID: 240408
Board Certified Specialty: No
MICHAEL A TADDONIO

 4168 FRONT ST
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273




Provider Gender: Male
NPI: 1386987261
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA

D3. Directorio de proveedores especialistas

JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

RADIOLOGY DIAGNOSTIC



TADDONIO, MICHAEL

Provider ID: 304179
Board Certified Specialty: No
MICHAEL A TADDONIO
 6655 ALVARADO RD
SAN DIEGO, CA 92120
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1386987261

 Provider English Spoken: Y
Cultural Competency: N





Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Website: N/A




RADIOLOGY DIAGNOSTIC

TADDONIO, MICHAEL

Provider ID: 240405
Board Certified Specialty: No
MICHAEL A TADDONIO
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1386987261
 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

RADIOLOGY DIAGNOSTIC

TADDONIO, MICHAEL

Provider ID: 240407
Board Certified Specialty: No
MICHAEL A TADDONIO
 16950 VIA TAZON
SAN DIEGO, CA 92127
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273




Provider Gender: Male
NPI: 1386987261



 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

RADIOLOGY DIAGNOSTIC



TADROS, ANTHONY

Provider ID: 268546
Board Certified Specialty: No
ANTHONY S TADROS
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1306112057

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F

D3. Directorio de proveedores especialistas

8:00AM-5:00PM
Website: N/A

RADIOLOGY DIAGNOSTIC

TADROS, ANTHONY

Provider ID: 304150

Board Certified Specialty: No
ANTHONY S TADROS

6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1306112057

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

RADIOLOGY DIAGNOSTIC

UNSDORFER, KYLE

Provider ID: 300035

Board Certified Specialty: No
KYLE M UNSDORFER

330 LEWIS ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1285165183

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

RADIOLOGY DIAGNOSTIC

UNSDORFER, KYLE

Provider ID: 300034

Board Certified Specialty: No
KYLE M UNSDORFER

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1285165183

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

RADIOLOGY DIAGNOSTIC

VAHDAT, NOUSHIN

Provider ID: 300071

Board Certified Specialty: No

NOUSHIN VAHDAT

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1396700852

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

RADIOLOGY DIAGNOSTIC

VAHDAT, NOUSHIN

Provider ID: 300070

Board Certified Specialty: No
NOUSHIN VAHDAT

330 LEWIS ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1396700852

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

RADIOLOGY DIAGNOSTIC

VAKILIAN, SIAVOSH

D3. Directorio de proveedores especialistas

Provider ID: 283205
Board Certified Specialty: No
SIAVOSH VAKILIAN

3366 5TH AVE
SAN DIEGO, CA 92103
Phone: (619) 230-0400
Fax: (858) 429-7936

After Hours Phone: (619)
230-0400

Provider Gender: Male

NPI: 1427456151

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PIONEERS
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

RADIOLOGY DIAGNOSTIC

VAKILIAN, SIAVOSH

Provider ID: 283207
Board Certified Specialty: No
SIAVOSH VAKILIAN

5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123
Phone: (858) 505-4100
Fax: (858) 429-7939

After Hours Phone: (858)
505-4100

Provider Gender: Male

NPI: 1427456151

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PIONEERS
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

RADIOLOGY DIAGNOSTIC

YORK, VINCENT

Provider ID: 283517
Board Certified Specialty: No
VINCENT M YORK

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1790146611

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

RADIOLOGY DIAGNOSTIC

YORK, VINCENT

Provider ID: 283519
Board Certified Specialty: No
VINCENT M YORK

330 LEWIS ST STE 202
SAN DIEGO, CA 92103

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1790146611

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

RADIOLOGY DIAGNOSTIC

ZAPALA, MATTHEW

Provider ID: 307676
Board Certified Specialty: No
MATTHEW A ZAPALA

330 LEWIS ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273
After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1346482809

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSF
BENIOFF CHILDREN'S
HOSPITAL OAKLAND, UCSF
MEDICAL CENTER, UCSF
Medical Center At Mission Bay,
UCSF MEDICAL CENTER AT
MOUNT ZION

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

D3. Directorio de proveedores especialistas

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

RADIOLOGY DIAGNOSTIC


ZAPALA, MATTHEW

Provider ID: 307675

Board Certified Specialty: No
MATTHEW A ZAPALA

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1346482809

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSF

BENIOFF CHILDREN'S
HOSPITAL OAKLAND, UCSF
MEDICAL CENTER, UCSF


Medical Center At Mission Bay,
UCSF MEDICAL CENTER AT
MOUNT ZION

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

RADIOLOGY DIAGNOSTIC


ZAPALA, MATTHEW


Provider ID: 307678

Board Certified Specialty: No
MATTHEW A ZAPALA

 200 W ARBOR DR

SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1346482809

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSF

BENIOFF CHILDREN'S
HOSPITAL OAKLAND, UCSF
MEDICAL CENTER, UCSF

Medical Center At Mission Bay,
UCSF MEDICAL CENTER AT
MOUNT ZION

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

REGISTERED PHYSICAL

THERAPIST


AGUERO, PETER

Provider ID: 258299

Board Certified Specialty: No
PETER D AGUERO

 9333 GENESEE AVE STE
310

SAN DIEGO, CA 92121

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1982120861


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

REGISTERED PHYSICAL

THERAPIST

AGUERO, PETER

Provider ID: 258298

Board Certified Specialty: No
PETER D AGUERO

 8929 UNIVERSITY CENTER
LN STE 200

SAN DIEGO, CA 92122

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male


NPI: 1982120861


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

REGISTERED PHYSICAL

THERAPIST

BARTZ, BRYAN

Provider ID: 273381

Board Certified Specialty: No
BRYAN M BARTZ

D3. Directorio de proveedores especialistas

8929 UNIVERSITY CENTER
LN STE 200
SAN DIEGO, CA 92122
Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1669818993

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

REGISTERED PHYSICAL

THERAPIST

BARTZ, BRYAN

Provider ID: 273380

Board Certified Specialty: No

BRYAN M BARTZ

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1669818993

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

REGISTERED PHYSICAL

THERAPIST

BERGERON, PATRICK

Provider ID: 206534

Board Certified Specialty: No

PATRICK BERGERON

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1285061390

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

REGISTERED PHYSICAL

THERAPIST

BUNOSKY, ABIGAIL

Provider ID: 246022

Board Certified Specialty: No

ABIGAIL S BUNOSKY

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1780018416

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

REGISTERED PHYSICAL

THERAPIST

BUNOSKY, ABIGAIL

Provider ID: 258304

Board Certified Specialty: No

ABIGAIL S BUNOSKY

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1780018416

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes


D3. Directorio de proveedores especialistas

Min/Max Age: 0\999

American Sign Language (ASL): Provider ID: 295634

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


REGISTERED PHYSICAL THERAPIST

CORTEZ, AARON

Provider ID: 279194

Board Certified Specialty: No
AARON J CORTEZ

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1639693187

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


REGISTERED PHYSICAL THERAPIST

COSTELLO, MARK

Provider ID: 295634

Board Certified Specialty: No
MARK A COSTELLO



 7510 CLAIREMONT MESA
BLVD STE 103
SAN DIEGO, CA 92111

 Phone: (818) 894-2273
Fax: (818) 357-2505

 After Hours Phone: (818)
894-2273

Provider Gender: Male

NPI: 1710193602

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, Armenian,
Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 5\999

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

 Website: N/A


REGISTERED PHYSICAL THERAPIST

DANG, ERIC

Provider ID: 258363

Board Certified Specialty: No
ERIC A DANG


 8929 UNIVERSITY CENTER
LN STE 200
SAN DIEGO, CA 92122

 Phone: (858) 543-3333
Fax: (858) 657-1809

 After Hours Phone: (858)
543-3333

Provider Gender: Male

NPI: 1891237756

 Provider English Spoken: Y


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


REGISTERED PHYSICAL THERAPIST


DANG, KAYLEE

Provider ID: 279261

Board Certified Specialty: No
KAYLEE T DANG

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1316426356

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

D3. Directorio de proveedores especialistas

REGISTERED PHYSICAL THERAPIST

FARRAR, COURTNEY

Provider ID: 303843

Board Certified Specialty: No
COURTNEY L FARRAR

3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110

Phone: (619) 325-1161

Fax: (619) 325-1717

After Hours Phone: (619)
325-1161

Provider Gender: Male

NPI: 1124577952

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

REGISTERED PHYSICAL THERAPIST

FARRAR, COURTNEY

Provider ID: 295259

Board Certified Specialty: No
COURTNEY L FARRAR

3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110

Phone: (619) 325-1161

Fax: (619) 325-1717

After Hours Phone: (619)
325-1161

Provider Gender: Male

NPI: 1124577952

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 13\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

REGISTERED PHYSICAL THERAPIST

JOHNSON, KENNADY

Provider ID: 305041

Board Certified Specialty: No
KENNADY L JOHNSON

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1730834417

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

REGISTERED PHYSICAL THERAPIST

MC ELROY, CARTER

Provider ID: 206522

Board Certified Specialty: No
CARTER J MC ELROY

8929 UNIVERSITY CENTER
LN STE 200

SAN DIEGO, CA 92122

Phone: (855) 543-0333

Fax: (858) 657-6873

After Hours Phone: (855)
543-0333

Provider Gender: Male

NPI: 1114472230

Provider English Spoken: Y

Provider Language(s)
Spoken: Thai

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

REGISTERED PHYSICAL THERAPIST

MC ELROY, CARTER

Provider ID: 206523

Board Certified Specialty: No
CARTER J MC ELROY

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1114472230

Provider English Spoken: Y

Provider Language(s)
Spoken: Thai

Cultural Competency: N

Hospital Affiliation: UCSD

D3. Directorio de proveedores especialistas


MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


REGISTERED PHYSICAL THERAPIST


NGUYEN, HARRY

Provider ID: 271871

Board Certified Specialty: No
HARRY D NGUYEN

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1629558499

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

REGISTERED PHYSICAL THERAPIST

RICKERTS, MATTHEW

Provider ID: 287652

Board Certified Specialty: No

MATTHEW RICKERTS PT

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1063882579


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

REGISTERED PHYSICAL THERAPIST

RUDD, CHRISTOPHER


Provider ID: 207560

Board Certified Specialty: No

CHRISTOPHER D RUDD

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1831539337

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

REGISTERED PHYSICAL THERAPIST

SKINNER, NICOLE


Provider ID: 206547

Board Certified Specialty: No

NICOLE J SKINNER

 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1386964997

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

REGISTERED PHYSICAL THERAPIST

VANDEWIELE, EMILY

D3. Directorio de proveedores especialistas

Provider ID: 285183
Board Certified Specialty: No
EMILY R VANDEWIELE

📍 16950 VIA TAZON
SAN DIEGO, CA 92127
☎ Phone: (800) 926-8273
Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1942818505

🗨 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

REGISTERED PHYSICAL THERAPIST

VASQUEZ, BENJAMIN

Provider ID: 302870
Board Certified Specialty: No
BENJAMIN P VASQUEZ

📍 4910 DIRECTORS PL
SAN DIEGO, CA 92121
☎ Phone: (800) 926-8273
Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1568938413

🗨 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

REGISTERED PHYSICAL THERAPIST

WALKER, JULIE

Provider ID: 258489
Board Certified Specialty: No
JULIE C WALKER

📍 8929 UNIVERSITY CENTER
LN STE 200
SAN DIEGO, CA 92122
☎ Phone: (855) 543-0333
Fax: (858) 535-6422

🕒 After Hours Phone: (855)
543-0333

Provider Gender: Female
NPI: 1720489503

🗨 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

REGISTERED PHYSICAL THERAPIST

WILLIAMS, STACY

Provider ID: 259683
Board Certified Specialty: No
STACY M WILLIAMS

📍 200 W ARBOR DR
SAN DIEGO, CA 92103
☎ Phone: (800) 926-8273
Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1689962169

🗨 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

REGISTERED PHYSICAL THERAPIST

WILLIAMS, STACY

Provider ID: 259684
Board Certified Specialty: No
STACY M WILLIAMS

📍 4520 EXECUTIVE DR STE 1
SAN DIEGO, CA 92121
☎ Phone: (800) 926-8273
Fax: (888) 539-8781




🕒 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1689962169

🗨 Provider English Spoken: Y
Cultural Competency: N

D3. Directorio de proveedores especialistas



Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

SPEECH PATHOLOGIST


AROCHO-SALGADO, MIRELIS

Provider ID: 296929
Board Certified Specialty: No
MIRELIS AROCHO-SALGADO



 11440 W BERNARDO CT
STE 300
SAN DIEGO, CA 92127
 Phone: (877) 757-8353
Fax: (818) 357-2505

 After Hours Phone: (877)
757-8353

Provider Gender: Female
NPI: 1063660165

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Website: N/A


SPEECH PATHOLOGIST

AROCHO-SALGADO, MIRELIS

Provider ID: 296930
Board Certified Specialty: No

MIRELIS AROCHO-SALGADO
 9655 GRANITE RIDGE DR
STE 200
SAN DIEGO, CA 92123
 Phone: (877) 757-8353
Fax: (818) 357-2505
 After Hours Phone: (877)
757-8353

Provider Gender: Female
NPI: 1063660165

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999

American Sign Language (ASL):
N



 Accessibility: CONTACT
PROVIDER

 Website: N/A

SPEECH PATHOLOGIST


AROCHO-SALGADO, MIRELIS

Provider ID: 296932
Board Certified Specialty: No
MIRELIS AROCHO-SALGADO

 7510 CLAIREMONT MESA
BLVD STE 103
SAN DIEGO, CA 92111
 Phone: (877) 757-8353
Fax: (818) 357-2505

 After Hours Phone: (877)
757-8353

Provider Gender: Female
NPI: 1063660165

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999

American Sign Language (ASL):
N



 Accessibility: CONTACT
PROVIDER

 Website: N/A

SPEECH PATHOLOGIST



CLARK, MELISSA

Provider ID: 296922
Board Certified Specialty: No
MELISSA A CLARK

 7510 CLAIREMONT MESA
BLVD STE 102
SAN DIEGO, CA 92111
 Phone: (877) 757-8353
Fax: (818) 357-2505

 After Hours Phone: (877)
757-8353

Provider Gender: Female
NPI: 1760546428


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, Armenian,
Farsi, Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 7:00AM-9:00PM
M-F 7:00AM-9:00PM

 Website: N/A

SPEECH PATHOLOGIST

CLARK, MELISSA

Provider ID: 296921
Board Certified Specialty: No
MELISSA A CLARK

 9655 GRANITE RIDGE DR
STE 200
SAN DIEGO, CA 92123
 Phone: (877) 757-8353
Fax: (818) 357-2505

 After Hours Phone: (877)

D3. Directorio de proveedores especialistas

757-8353
Provider Gender: Female
NPI: 1760546428
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, Armenian,
Farsi, Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: SU 7:00AM-7:00PM
M-F 7:00AM-7:00PM
Website: N/A

SPEECH PATHOLOGIST

CLARK, MELISSA

Provider ID: 296920
Board Certified Specialty: No
MELISSA A CLARK
 11440 W BERNARDO CT
STE 300
SAN DIEGO, CA 92127
 Phone: (877) 757-8353
Fax: (818) 357-2505
 After Hours Phone: (877)
757-8353
Provider Gender: Female
NPI: 1760546428
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic, Armenian,
Farsi, Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N
 Accessibility: CONTACT

PROVIDER
Hours: SU 7:00AM-7:00PM
M-F 7:00AM-7:00PM
Website: N/A

SPEECH PATHOLOGIST

DURNAN, CASSANDRA

Provider ID: 307882
Board Certified Specialty: No
CASSANDRA L DURNAN
 11440 W BERNARDO CT
STE 300
SAN DIEGO, CA 92127
 Phone: (877) 757-8353
Fax: (818) 357-2505
 After Hours Phone: (877)
757-8353
Provider Gender: Female
NPI: 1073873501
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 7:00AM-7:00PM
Website: N/A

PROVIDER
NPI: 1073873501

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 7:00AM-7:00PM
Website: N/A

SPEECH PATHOLOGIST

DURNAN, CASSANDRA

Provider ID: 307883
Board Certified Specialty: No
CASSANDRA L DURNAN
 9655 GRANITE RIDGE DR
STE 200
SAN DIEGO, CA 92123
 Phone: (877) 757-8353
Fax: (818) 357-2505

After Hours Phone: (877)
757-8353

Provider Gender: Female
NPI: 1073873501
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 7:00AM-7:00PM
Website: N/A

SPEECH PATHOLOGIST

DURNAN, CASSANDRA

Provider ID: 307885
Board Certified Specialty: No
CASSANDRA L DURNAN
 8929 AERO DR STE E
SAN DIEGO, CA 92123
 Phone: (877) 757-8353
Fax: (818) 357-2505
 After Hours Phone: (877)
757-8353
Provider Gender: Female
NPI: 1073873501
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Hours: M-F 7:00AM-7:00PM
Website: N/A

D3. Directorio de proveedores especialistas

SPEECH PATHOLOGIST

SCHIEDERMAYER, BENJAMIN

Provider ID: 288937

Board Certified Specialty: No
BENJAMIN F

SCHIEDERMAYER

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1164979837

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SPEECH PATHOLOGIST

UNGER, LINDSEY

Provider ID: 207202

Board Certified Specialty: No
LINDSEY A UNGER

8929 UNIVERSITY CENTER
LN STE 200
SAN DIEGO, CA 92122

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1972936813

Provider English Spoken: Y

Provider Language(s)
Spoken: Sign Language

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY COLON SURGERY

EISENSTEIN, SAMUEL

Provider ID: 286384

Board Certified Specialty: No
SAMUEL EISENSTEIN

4520 EXECUTIVE DR
SAN DIEGO, CA 92121

Phone: (858) 657-7237

After Hours Phone: (858)
657-7237

Provider Gender: Male

NPI: 1194983932

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY COLON SURGERY

EISENSTEIN, SAMUEL

Provider ID: 286364

Board Certified Specialty: No
SAMUEL EISENSTEIN

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1194983932

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY COLON SURGERY

EISENSTEIN, SAMUEL

Provider ID: 286363

Board Certified Specialty: No
SAMUEL EISENSTEIN

4303 LA JOLLA VILLAGE
DR STE 2110

SAN DIEGO, CA 92122

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male



NPI: 1194983932

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

D3. Directorio de proveedores especialistas

American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Website: N/A

SURGERY COLON SURGERY

LIU, SHANGLEI

Provider ID: 273363

Board Certified Specialty: No
SHANGLEI LIU

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1043558653

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY


THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY COLON SURGERY


LOPEZ, NICOLE

Provider ID: 286387

Board Certified Specialty: No
NICOLE E LOPEZ


 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (619) 543-6886

 After Hours Phone: (619)
543-6886

Provider Gender: Female

NPI: 1518163005

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY COLON SURGERY

LOPEZ, NICOLE

Provider ID: 286366

Board Certified Specialty: No

NICOLE E LOPEZ

 4303 LA JOLLA VILLAGE
DR STE 2110

SAN DIEGO, CA 92122

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1518163005

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY COLON SURGERY

PARRY, LISA

Provider ID: 286341

Board Certified Specialty: No

LISA A PARRY

 4303 LA JOLLA VILLAGE
DR STE 2110

SAN DIEGO, CA 92122

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1235369067

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY COLON SURGERY

PARRY, LISA


Provider ID: 278553

Board Certified Specialty: No




LISA A PARRY

D3. Directorio de proveedores especialistas

 16950 VIA TAZON
SAN DIEGO, CA 92127
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1235369067

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999




American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

SURGERY COLON SURGERY

RAMAMOORTHY, SONIA




Provider ID: 286370
Board Certified Specialty: No
SONIA L RAMAMOORTHY

 4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122
 Phone: (800) 926-8273
Fax: (888) 529-8781
 After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1801812656
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR
Medi-Cal Open Panel: Yes

Min/Max Age: 0\999


American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A



SURGERY GENERAL

AL-NOURI, OMAR

Provider ID: 211903
Board Certified Specialty: No
OMAR AL-NOURI




 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

Provider Gender: Male
NPI: 1770742264

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic

Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

SURGERY GENERAL


ARMANI, AVA

Provider ID: 282141




Board Certified Specialty: Yes
AVA ARMANI

 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (858) 822-6100
 After Hours Phone: (858)
822-6100

Provider Gender: Female
NPI: 1861759383

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSF
MEDICAL CENTER, UCSF
Medical Center At Mission Bay,
UCSF MEDICAL CENTER AT
MOUNT ZION, UCSD LA JOLLA
JOHN SALLY THORNTON,
UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

SURGERY GENERAL


BARNES, RYAN

Provider ID: 299904
Board Certified Specialty: No
RYAN M BARNES




 7910 FROST ST STE 250
SAN DIEGO, CA 92123
 Phone: (858) 565-0104
Fax: (858) 565-0194
 After Hours Phone: (858)
565-0104

Provider Gender: Male
NPI: 1831493501

D3. Directorio de proveedores especialistas

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR, PALOMAR
HEALTH

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
9:00AM-4:30PM
 *Website: N/A*

SURGERY GENERAL


BARNES, RYAN

Provider ID: 129062
Board Certified Specialty: No
RYAN M BARNES

 7910 FROST ST STE 250
SAN DIEGO, CA 92123
 *Phone: (858) 565-0104*
Fax: (858) 565-0194


 *After Hours Phone: (858)*
565-0104

Provider Gender: Male
NPI: 1831493501

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR, PALOMAR
HEALTH

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

 *Hours: M-F*
9:00AM-4:30PM

 *Website: N/A*

SURGERY GENERAL


BENCH, SHAWN

Provider ID: 129060
Board Certified Specialty: Yes
SHAWN R BENCH

 7910 FROST ST STE 250
SAN DIEGO, CA 92123
 *Phone: (858) 565-0104*
Fax: (858) 565-0194


 *After Hours Phone: (858)*
565-0104


Provider Gender: Male
NPI: 1669700753


 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR, KERN
MEDICAL CENTER

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

 *Hours: M-TH*
9:00AM-5:00PM
F 9:00AM-4:00PM


 *Website: N/A*

SURGERY GENERAL

BENCH, SHAWN


Provider ID: 299895
Board Certified Specialty: Yes
SHAWN R BENCH

 7910 FROST ST STE 250
SAN DIEGO, CA 92123

 *Phone: (858) 565-0104*
Fax: (858) 565-0194


 *After Hours Phone: (858)*
565-0104


Provider Gender: Male
NPI: 1669700753

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR, KERN
MEDICAL CENTER

Medi-Cal Open Panel: Yes
Min/Max Age: 18\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

 *Hours: M-TH*
9:00AM-5:00PM
F 9:00AM-4:00PM

 *Website: N/A*

SURGERY GENERAL


BERUMEN, JENNIFER

Provider ID: 260052
Board Certified Specialty: No
JENNIFER A BERUMEN


 8001 FROST ST
SAN DIEGO, CA 92123
 *Phone: (858) 966-5811*
Fax: (858) 966-8035

 *After Hours Phone: (858)*
966-5811

Provider Gender: Female
NPI: 1558566372

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD

D3. Directorio de proveedores especialistas


MEDICAL CTR, UCSD LA JOLLA  Website: N/A


JOHN SALLY THORNTON,
RADY CHILDRENS HOSPITAL
SAN DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY GENERAL


BRODERICK, RYAN

Provider ID: 247073

Board Certified Specialty: No
RYAN C BRODERICK

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1619252418


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


SURGERY GENERAL

BRODERICK, RYAN


Provider ID: 286342

Board Certified Specialty: No

RYAN C BRODERICK

 4303 LA JOLLA VILLAGE
DR STE 2110

SAN DIEGO, CA 92122

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1619252418

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY GENERAL


BRODERICK, RYAN


Provider ID: 201617

Board Certified Specialty: Yes

RYAN C BRODERICK

 4520 EXECUTIVE DR STE 111
SAN DIEGO, CA 92121

 Phone: (858) 657-8860

 After Hours Phone: (858)
657-8860

Provider Gender: Male

NPI: 1619252418

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY GENERAL

BRUBAKER, ALEAH

Provider ID: 285272

Board Certified Specialty: No
ALEAH LIN BRUBAKER

 4510 EXECUTIVE DR STE 7
SAN DIEGO, CA 92121

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1790104305

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Stanford
Health Care, LUCILE SALTER
PACKARD CHILDRENS HOSP,
UCSD LA JOLLA JOHN SALLY
THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT

D3. Directorio de proveedores especialistas

PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

SURGERY GENERAL

BRUBAKER, ALEAH

Provider ID: 289164
Board Certified Specialty: No
ALEAH LIN BRUBAKER
8001 FROST ST
SAN DIEGO, CA 92123
Phone: (858) 966-8354
Fax: (858) 966-5815
After Hours Phone: (858) 966-8354
Provider Gender: Female
NPI: 1790104305
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Stanford Health Care, LUCILE SALTER PACKARD CHILDRENS HOSP, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):

N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

SURGERY GENERAL

CASILLAS BERUMEN, SERGIO

Provider ID: 304608
Board Certified Specialty: No
SERGIO G CASILLAS BERUMEN

6719 ALVARADO RD STE 303
SAN DIEGO, CA 92120
Phone: (619) 500-7699
Fax: (619) 483-3997
After Hours Phone: (619) 500-7699

Provider Gender: Male
NPI: 1437470762
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR HEALTH, PARADISE VALLEY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):

N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

SURGERY GENERAL

CASILLAS BERUMEN, SERGIO

Provider ID: 304609
Board Certified Specialty: No
SERGIO G CASILLAS BERUMEN

6402 EL CAJON BLVD STE 100
SAN DIEGO, CA 92115
Phone: (619) 582-4490
Fax: (619) 501-9702
After Hours Phone: (619) 582-4490

Provider Gender: Male
NPI: 1437470762
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR HEALTH, PARADISE VALLEY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

SURGERY GENERAL

FAIRBANKS, TIMOTHY

Provider ID: 260842
Board Certified Specialty: No
TIMOTHY J FAIRBANKS
3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123
Phone: (858) 966-7711
Fax: (858) 966-7712
After Hours Phone: (858) 966-7711
Provider Gender: Male
NPI: 1407010556
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, SHARP MEMORIAL HOSPITAL,

D3. Directorio de proveedores especialistas

SCRIPPS MEMORIAL

HOSPITAL, UCSF BENIOFF

CHILDREN'S HOSPITAL

OAKLAND


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY GENERAL


HORGAN, SANTIAGO


Provider ID: 286379

Board Certified Specialty: No

SANTIAGO HORGAN


 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (619) 471-0700

 After Hours Phone: (619)
471-0700

Provider Gender: Male

NPI: 1932297231

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY GENERAL

HORGAN, SANTIAGO

Provider ID: 286367

Board Certified Specialty: No

SANTIAGO HORGAN

 4303 LA JOLLA VILLAGE
DR STE 2110

SAN DIEGO, CA 92122


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1932297231

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY GENERAL

IGNACIO, ROMEO


Provider ID: 217053

Board Certified Specialty: No

ROBERT C IGNACIO

 8110 BIRMINGHAM WAY FL
2

SAN DIEGO, CA 92123


 Phone: (858) 966-7711

 After Hours Phone: (858)

966-7711

Provider Gender: Male

NPI: 1538147145

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY GENERAL


JACOBSEN, GARTH

Provider ID: 286356

Board Certified Specialty: No

GARTH R JACOBSEN

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1265649966

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

D3. Directorio de proveedores especialistas

PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

SURGERY GENERAL

JACOBSEN, GARTH

Provider ID: 286355
Board Certified Specialty: No
GARTH R JACOBSEN
4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1265649966

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

SURGERY GENERAL

JACOBSEN, GARTH

Provider ID: 201729
Board Certified Specialty: No
GARTH R JACOBSEN
4520 EXECUTIVE DR STE 111
SAN DIEGO, CA 92121
Phone: (858) 657-8860

After Hours Phone: (858)
657-8860

Provider Gender: Male

NPI: 1265649966

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY GENERAL

MUELLER, GEORGE

Provider ID: 300091
Board Certified Specialty: No
GEORGE A MUELLER

7910 FROST ST STE 250
SAN DIEGO, CA 92123

Phone: (858) 565-0104
Fax: (858) 565-0194

After Hours Phone: (858)
565-0104

Provider Gender: Male

NPI: 1629179684

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish,
Vietnamese

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
8:30AM-5:00PM
F 8:30AM-4:00PM

Website: N/A

SURGERY GENERAL

MUELLER, GEORGE

Provider ID: 54298
Board Certified Specialty: No
GEORGE A MUELLER

7910 FROST ST STE 250
SAN DIEGO, CA 92123

Phone: (858) 565-0104
Fax: (858) 565-0194

After Hours Phone: (858)
565-0104

Provider Gender: Male

NPI: 1629179684

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish,
Vietnamese

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
8:30AM-5:00PM
F 8:30AM-4:00PM

Website: N/A

SURGERY GENERAL

POLLACK, LARRY

Provider ID: 54346

D3. Directorio de proveedores especialistas

Board Certified Specialty: Yes
LARRY H POLLACK

📍 7910 FROST ST STE 250
SAN DIEGO, CA 92123

☎ Phone: (858) 565-0104

Fax: (858) 565-0194

🕒 After Hours Phone: (858)
565-0104

Provider Gender: Male

NPI: 1104998400

🗣 Provider English Spoken: Y

🗣 Provider Language(s)

Spoken: German, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-TH

9:00AM-5:00PM

F 9:00AM-4:00PM

🌐 Website: N/A

SURGERY GENERAL

SANDLER, BRYAN

Provider ID: 286383

Board Certified Specialty: No

BRYAN J SANDLER

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1043410186

🗣 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

🌐 Website: N/A

SURGERY GENERAL

SANDLER, BRYAN

Provider ID: 286357

Board Certified Specialty: No

BRYAN J SANDLER

📍 4303 LA JOLLA VILLAGE
DR STE 2110

SAN DIEGO, CA 92122

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1043410186

🗣 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

🌐 Website: N/A

SURGERY GENERAL

SANTORELLI, JARRETT

Provider ID: 272303

Board Certified Specialty: No

JARRETT E SANTORELLI

📍 200 W ARBOR DR
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1033529201

🗣 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

🌐 Website: N/A

SURGERY GENERAL

VASCULAR

AL-NOURI, OMAR

Provider ID: 275349

Board Certified Specialty: No

OMAR AL-NOURI

📍 4510 EXECUTIVE DR STE
215

SAN DIEGO, CA 92121

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1770742264

D3. Directorio de proveedores especialistas



 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

SURGERY GENERAL

VASCULAR




BARLEBEN, ANDREW



Provider ID: 275372
Board Certified Specialty: No
ANDREW R BARLEBEN
 4510 EXECUTIVE DR STE
215
SAN DIEGO, CA 92121
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Male
NPI: 1497936900
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999



American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

SURGERY HAND

CAGE, DORI

Provider ID: 296731
Board Certified Specialty: No
DORI CAGE
 8008 FROST ST STE 403
SAN DIEGO, CA 92123
 Phone: (858) 715-9200
Fax: (858) 715-9202
 After Hours Phone: (858)
715-9200
Provider Gender: Female
NPI: 1871592253



 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, Sharp
Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A
Email: DCAGE@SDHAND.ORG

SURGERY NEUROLOGICAL **BARBA, DAVID**

Provider ID: 244087
Board Certified Specialty: No
DAVID BARBA
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (619) 543-5720
 After Hours Phone: (619)
543-5720




Provider Gender: Male
NPI: 1093730251

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
UCSD LA JOLLA JOHN SALLY
THORNTON, SCRIPPS
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

SURGERY NEUROLOGICAL

BELVERUD, SHAWN

Provider ID: 202333
Board Certified Specialty: No
SHAWN A BELVERUD
 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

D3. Directorio de proveedores especialistas

Provider Gender: Male

NPI: 1073817268

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


SURGERY NEUROLOGICAL

BEN-HAIM, SHARONA

Provider ID: 304129

Board Certified Specialty: No
SHARONA BEN-HAIM

 6655 ALVARADO RD
SAN DIEGO, CA 92120


 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1942469663

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hebrew, Spanish
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

 Website: N/A


SURGERY NEUROLOGICAL

HATEFI, DUSTIN

Provider ID: 310033

Board Certified Specialty: No
DUSTIN HATEFI

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1790072106

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation:
UNIVERSITY OF CALIFORNIA
IRVINE MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


SURGERY NEUROLOGICAL

LEVY, MICHAEL


Provider ID: 298705

Board Certified Specialty: No
MICHAEL L LEVY

 7910 FROST ST STE 180
SAN DIEGO, CA 92123


 Phone: (858) 966-8574

Fax: (858) 966-7930

 After Hours Phone: (858)
966-8574

Provider Gender: Male

NPI: 1164593927

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
CHILDRENS HOSP OF LOS
ANGELES

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

SURGERY NEUROLOGICAL


MARSHALL, LAWRENCE

Provider ID: 244150

Board Certified Specialty: No
LAWRENCE F MARSHALL

 200 W ARBOR DR
SAN DIEGO, CA 92103


 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1750306171

 Provider English Spoken: Y


 Provider Language(s)
Spoken: German, Spanish
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

D3. Directorio de proveedores especialistas

SURGERY NEUROLOGICAL

OSORIO, JOSEPH

Provider ID: 242007

Board Certified Specialty: No

JOSEPH A OSORIO

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1437416591

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY NEUROLOGICAL

OSORIO, JOSEPH

Provider ID: 304170

Board Certified Specialty: No

JOSEPH A OSORIO

6655 ALVARADO RD
SAN DIEGO, CA 92120

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1437416591

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

SURGERY NEUROLOGICAL

PHAM, MARTIN

Provider ID: 244158

Board Certified Specialty: No

MARTIN H PHAM

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1609130921

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY NEUROLOGICAL

SOUMEKH, MASSOUD

Provider ID: 257468

Board Certified Specialty: Yes

MASSOUD HERTZEL

SOUMEKH

8008 FROST ST STE 401
SAN DIEGO, CA 92123

Phone: (858) 560-8544

Fax: (858) 560-8546

After Hours Phone: (858)
560-8544

Provider Gender: Male

NPI: 1265495014

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: ALVARADO
HOSPITAL LLC, SHARP

MEMORIAL HOSPITAL, SHARP

CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
9:00AM-4:30PM

Website: N/A

Email: JSOUMEKH@AOL.COM

SURGERY NEUROLOGICAL

TOMLIN, JEFFREY

Provider ID: 272950

Board Certified Specialty: No

JEFFREY M TOMLIN

200 W ARBOR DR FL 1
SAN DIEGO, CA 92103

Phone: (858) 657-8540

After Hours Phone: (858)

D3. Directorio de proveedores especialistas

657-8540

Provider Gender: Male

NPI: 1366530321

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

SURGERY NEUROLOGICAL

U, HOI

Provider ID: 244132

Board Certified Specialty: No

HOI S U

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1164468146

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

SURGERY ORTHOPEDIC

ANDRY, JAMES

Provider ID: 302086

Board Certified Specialty: No

JAMES P ANDRY

7910 FROST ST STE 340
SAN DIEGO, CA 92123

Phone: (858) 824-1703

Fax: (858) 455-6473

After Hours Phone: (858)
824-1703

Provider Gender: Male

NPI: 1679726103

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PARADISE

VALLEY HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, SCRIPPS MERCY

HOSPITAL, SHARP CHULA

VISTA MED CTR, SHARP

CORONADO HOSP AND

HEALTHCARE CTR, Sharp

Grossmont Hospital, SHARP

MEMORIAL HOSPITAL, SHARP

MEMORIAL HOSPITAL, TRI

CITY MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

SURGERY ORTHOPEDIC

BALLARD, BROOKE

Provider ID: 262204

Board Certified Specialty: No

BROOKE L BALLARD

5555 RESERVOIR DR STE
104

SAN DIEGO, CA 92120

Phone: (619) 286-9480

Fax: (619) 286-4568

After Hours Phone: (619)
286-9480

Provider Gender: Female

NPI: 1841447950

Provider English Spoken: Y

Provider Language(s)
Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: ALVARADO

HOSPITAL LLC, SHARP

CORONADO HOSP AND

HEALTHCARE CTR, SHARP

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F

9:00AM-5:00PM

Website: N/A

SURGERY ORTHOPEDIC

BUI, CHRISTOPHER





Provider ID: 241162

Board Certified Specialty: No

CHRISTOPHER N BUI

200 W ARBOR DR
SAN DIEGO, CA 92103

D3. Directorio de proveedores especialistas


 Phone: (800) 926-8273
 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1619231537
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

SURGERY ORTHOPEDIC

BUKATA, SUSAN

Provider ID: 304181
Board Certified Specialty: No
SUSAN V BUKATA

 6655 ALVARADO RD
SAN DIEGO, CA 92120

 Phone: (800) 926-8273
Fax: (888) 539-8781


 After Hours Phone: (800) 926-8273


Provider Gender: Female
NPI: 1932140639

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


 Website: N/A

SURGERY ORTHOPEDIC

BUKATA, SUSAN

Provider ID: 277948
Board Certified Specialty: No
SUSAN V BUKATA

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273


Provider Gender: Female
NPI: 1932140639

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

SURGERY ORTHOPEDIC

CAMPBELL, TANNER

Provider ID: 301633
Board Certified Specialty: No
TANNER R CAMPBELL

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-6789
Fax: (858) 966-8519

 After Hours Phone: (858) 966-6789

Provider Gender: Male
NPI: 1821593096

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER


 Website: N/A

SURGERY ORTHOPEDIC

CHENG, YU-TSUN

Provider ID: 301903
Board Certified Specialty: No
YU-TSUN CHENG

 3030 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123

 Phone: (858) 966-6789
Fax: (858) 966-6706

 After Hours Phone: (858) 966-6789

Provider Gender: Male
NPI: 1992982854


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST
HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST
HEALTHCARE RANCHO SPRINGS HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

D3. Directorio de proveedores especialistas

 Website: N/A

SURGERY ORTHOPEDIC

CHIARAPPA, FRANK

Provider ID: 304174

Board Certified Specialty: No
FRANK E CHIARAPPA

 6655 ALVARADO RD
SAN DIEGO, CA 92120

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1932536828

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

SURGERY ORTHOPEDIC

CHOI, JIHOON

Provider ID: 284788

Board Certified Specialty: No
JIHOON CHOI

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1285097741

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

SURGERY ORTHOPEDIC


CIDAMBI, EMILY

Provider ID: 246466

Board Certified Specialty: No
EMILY O CIDAMBI

 3030 CHILDRENS WAY FL
3

SAN DIEGO, CA 92123

 Phone: (858) 966-6789

Fax: (858) 966-6706

 After Hours Phone: (858)
966-6789

Provider Gender: Female

NPI: 1659634699


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY ORTHOPEDIC


CIDAMBI, EMILY

Provider ID: 296446

Board Certified Specialty: No
EMILY O CIDAMBI

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Female


NPI: 1659634699

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


SURGERY ORTHOPEDIC


EDMONDS, ERIC

Provider ID: 205495

Board Certified Specialty: No
ERIC W EDMONDS

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)
966-8800

Provider Gender: Male

NPI: 1013048412

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, UCSF BENIOFF

CHILDREN'S HOSPITAL

OAKLAND

D3. Directorio de proveedores especialistas

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL): JAMES H FLINT

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

SURGERY ORTHOPEDIC

EDMONDS, ERIC


Provider ID: 260841

Board Certified Specialty: No

ERIC W EDMONDS

 3030 CHILDRENS WAY FL 3

SAN DIEGO, CA 92123

 Phone: (858) 966-6789

Fax: (858) 966-6706

 After Hours Phone: (858) 966-6789

Provider Gender: Male

NPI: 1013048412


 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8:00AM-5:00PM

 Website: N/A

SURGERY ORTHOPEDIC

FLINT, JAMES


Provider ID: 203178

Board Certified Specialty: No

JAMES H FLINT

 200 W ARBOR DR

SAN DIEGO, CA 92103

 Phone: (858) 657-8200

 After Hours Phone: (858) 657-8200

Provider Gender: Male

NPI: 1629239140

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8:00AM-5:00PM

 Website: N/A

SURGERY ORTHOPEDIC

FLINT, JAMES


Provider ID: 304177

Board Certified Specialty: No

JAMES H FLINT

 6655 ALVARADO RD

SAN DIEGO, CA 92120

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1629239140

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A

SURGERY ORTHOPEDIC

GOEB, YANNICK


Provider ID: 284794

Board Certified Specialty: No

YANNICK L GOEB

 200 W ARBOR DR

SAN DIEGO, CA 92103

 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1730542747

 Provider English Spoken: Y

 Provider Language(s) Spoken: German, Spanish
Cultural Competency: N


Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8:00AM-5:00PM

 Website: N/A

D3. Directorio de proveedores especialistas

SURGERY ORTHOPEDIC

JACKSON, MADELEINE

Provider ID: 301818

Board Certified Specialty: No
MADELEINE E JACKSON

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8800

After Hours Phone: (858)
966-8800

Provider Gender: Female

NPI: 1386140085

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

SURGERY ORTHOPEDIC

KUSNEZOV, NICHOLAS

Provider ID: 303196

Board Certified Specialty: No
NICHOLAS A KUSNEZOV

7910 FROST ST STE 340
SAN DIEGO, CA 92123

Phone: (858) 824-1703

Fax: (858) 455-6473

After Hours Phone: (858)
824-1703

Provider Gender: Male

NPI: 1396185161

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: TWIN

CITIES COMMUNITY

HOSPITAL, TRI CITY MEDICAL
CTR, PARADISE VALLEY

HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, SHARP CHULA

VISTA MED CTR, SHARP

CORONADO HOSP AND

HEALTHCARE CTR, Sharp

Grossmont Hospital, Sharp

Grossmont Hospital, SHARP

MEMORIAL HOSPITAL, UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY ORTHOPEDIC

PRUSS, ERIKA

Provider ID: 303797

Board Certified Specialty: No
ERIKA L PRUSS

3030 CHILDRENS WAY FL
3

SAN DIEGO, CA 92123

Phone: (858) 966-6789

Fax: (858) 966-6706

After Hours Phone: (858)
966-6789

Provider Gender: Female

NPI: 1538402441

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY ORTHOPEDIC

SULLIVAN, THOMAS

Provider ID: 285247

Board Certified Specialty: No
THOMAS B SULLIVAN

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1437565488

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY ORTHOPEDIC

D3. Directorio de proveedores especialistas

SULLIVAN, THOMAS

Provider ID: 304164

Board Certified Specialty: No

THOMAS B SULLIVAN

📍 6655 ALVARADO RD
SAN DIEGO, CA 92120

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

📞 After Hours Phone: (800)
926-8273

Provider Gender: Male

NPI: 1437565488

🗨 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

SURGERY ORTHOPEDIC

UPASANI, VIDYADHAR

Provider ID: 260953

Board Certified Specialty: No

VIDYADHAR V UPASANI

📍 3030 CHILDRENS WAY FL
3

SAN DIEGO, CA 92123

☎ Phone: (858) 966-6789

Fax: (858) 966-6706

📞 After Hours Phone: (858)
966-6789

Provider Gender: Male

NPI: 1548417652

🗨 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

SURGERY ORTHOPEDIC

UPASANI, VIDYADHAR

Provider ID: 205914

Board Certified Specialty: No

VIDYADHAR V UPASANI

📍 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

☎ Phone: (858) 966-8800

📞 After Hours Phone: (858)
966-8800

Provider Gender: Male

NPI: 1548417652

🗨 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

SURGERY PEDIATRIC

BICKLER, STEPHEN

Provider ID: 270090

Board Certified Specialty: No

STEPHEN W BICKLER

📍 3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123

☎ Phone: (858) 966-7711

Fax: (858) 966-7712

📞 After Hours Phone: (858)
966-7711

Provider Gender: Male

NPI: 1891866653

🗨 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

SURGERY PEDIATRIC

GOSMAN, AMANDA

Provider ID: 205841

Board Certified Specialty: Yes

AMANDA A GOSMAN

📍 7920 FROST ST STE 200
SAN DIEGO, CA 92123

☎ Phone: (858) 966-5999

Fax: (858) 966-4064




📞 After Hours Phone: (858)
966-5999

Provider Gender: Female

NPI: 1164436291






🗨 Provider English Spoken: Y
Provider Language(s)



D3. Directorio de proveedores especialistas

Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
UCSD LA JOLLA JOHN SALLY
THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

SURGERY PEDIATRIC




KELLER, BENJAMIN


Provider ID: 285941
Board Certified Specialty: No
BENJAMIN A KELLER
 *3020 CHILDRENS WAY*
SAN DIEGO, CA 92123
 *Phone: (858) 966-7711*
Fax: (858) 966-7712
 *After Hours Phone: (858)*
966-7711
Provider Gender: Male
NPI: 1285953364
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER




 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

SURGERY PEDIATRIC

KELLER, BENJAMIN




Provider ID: 272196
Board Certified Specialty: Yes
BENJAMIN A KELLER
 *7920 FROST ST STE 200*
SAN DIEGO, CA 92123
 *Phone: (858) 966-5999*
Fax: (858) 966-4064
 *After Hours Phone: (858)*
966-5999
Provider Gender: Male
NPI: 1285953364





 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

SURGERY PEDIATRIC

KLING, KAREN

Provider ID: 283380
Board Certified Specialty: No
KAREN M KLING
 *3030 CHILDRENS WAY FL 1*
SAN DIEGO, CA 92123
 *Phone: (858) 966-7711*
Fax: (858) 966-7712
 *After Hours Phone: (858)*

966-7711
Provider Gender: Female
NPI: 1982775144
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
SHARP MARY BIRCH HOSP
FOR WOMEN AND
NEWBORNS, NATIONAL
NAVAL MED CTR, SHARP
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

SURGERY PEDIATRIC

KLING, KAREN

Provider ID: 205340
Board Certified Specialty: No
KAREN M KLING
 *8110 BIRMINGHAM WAY FL*
2
SAN DIEGO, CA 92123
 *Phone: (858) 966-7711*
Fax: (858) 966-7712
 *After Hours Phone: (858)*
966-7711
Provider Gender: Female
NPI: 1982775144
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN

D3. Directorio de proveedores especialistas


DIEGO, UCSD MEDICAL CTR,
SHARP MARY BIRCH HOSP
FOR WOMEN AND


NEWBORNS, NATIONAL
NAVAL MED CTR, SHARP
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY PEDIATRIC

LAZAR, DAVID

Provider ID: 283140

Board Certified Specialty: No
DAVID A LAZAR

 3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123

 Phone: (858) 966-7711

Fax: (858) 966-7712

 After Hours Phone: (858)
966-7711

Provider Gender: Male

NPI: 1538365002

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

 Website: N/A

SURGERY PEDIATRIC


LAZAR, DAVID

Provider ID: 205606

Board Certified Specialty: No
DAVID A LAZAR

 8110 BIRMINGHAM WAY FL
2

SAN DIEGO, CA 92123

 Phone: (858) 966-7711

Fax: (858) 966-7712

 After Hours Phone: (858)
966-7711

Provider Gender: Male

NPI: 1538365002


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

SURGERY PEDIATRIC


THANGARAJAH, HARIHARAN

Provider ID: 206172

Board Certified Specialty: No
HARIHARAN THANGARAJAH

 8110 BIRMINGHAM WAY FL
2

SAN DIEGO, CA 92123

 Phone: (858) 966-7711

Fax: (858) 966-7712

 After Hours Phone: (858)
966-7711

Provider Gender: Male

NPI: 1598979593


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


SURGERY PEDIATRIC


THANGARAJAH, HARIHARAN

Provider ID: 256194

Board Certified Specialty: No
HARIHARAN THANGARAJAH

 3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123

 Phone: (858) 966-7711

 After Hours Phone: (858)
966-7711

Provider Gender: Male

NPI: 1598979593

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT

D3. Directorio de proveedores especialistas

PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

SURGERY PLASTIC

HINCHCLIFF, KATHARINE

Provider ID: 277965
Board Certified Specialty: No
KATHARINE M HINCHCLIFF
7920 FROST ST STE 200
SAN DIEGO, CA 92123
Phone: (858) 966-5999
Fax: (858) 966-8394
After Hours Phone: (858)
966-5999
Provider Gender: Female
NPI: 1346674561

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

SURGERY PLASTIC

HINCHCLIFF, KATHARINE

Provider ID: 277288
Board Certified Specialty: Yes
KATHARINE M HINCHCLIFF
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1346674561

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY PLASTIC

KOLB, FREDERIC

Provider ID: 246240
Board Certified Specialty: No
FREDERIC J KOLB

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1790341832

Provider English Spoken: Y
Provider Language(s)
Spoken: French
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY PLASTIC

KOLB, FREDERIC

Provider ID: 246239
Board Certified Specialty: No
FREDERIC J KOLB

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1790341832

Provider English Spoken: Y
Provider Language(s)
Spoken: French
Cultural Competency: N

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY PLASTIC

KOLB, FREDERIC

Provider ID: 255576
Board Certified Specialty: No

D3. Directorio de proveedores especialistas

FREDERIC J KOLB

7920 FROST ST STE 200
SAN DIEGO, CA 92123

Phone: (858) 966-5999

Fax: (858) 966-8394

After Hours Phone: (858)
966-5999

Provider Gender: Female

NPI: 1790341832

Provider English Spoken: Y

Provider Language(s)

Spoken: French

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY PLASTIC

KOLB, FREDERIC

Provider ID: 255575

Board Certified Specialty: No

FREDERIC J KOLB

4520 EXECUTIVE DR
SAN DIEGO, CA 92121

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1790341832

Provider English Spoken: Y

Provider Language(s)

Spoken: French

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY PLASTIC

LEWIS, PRIYA

Provider ID: 302132

Board Certified Specialty: No

PRIYA G LEWIS

7920 FROST ST STE 200
SAN DIEGO, CA 92123

Phone: (858) 966-5999

Fax: (858) 966-8394

After Hours Phone: (858)
966-5999

Provider Gender: Female

NPI: 1720465024

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

SURGERY PLASTIC

REID, CHRISTOPHER

Provider ID: 245523

Board Certified Specialty: No

CHRISTOPHER M REID

7920 FROST ST STE 200
SAN DIEGO, CA 92123

Phone: (858) 966-5999

Fax: (858) 966-8394

After Hours Phone: (858)
966-5999

Provider Gender: Male

NPI: 1982964276

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Website: N/A

SURGERY PLASTIC

REID, CHRISTOPHER

Provider ID: 255564

Board Certified Specialty: No

CHRISTOPHER M REID

4520 EXECUTIVE DR
SAN DIEGO, CA 92121


Phone: (800) 926-8273

After Hours Phone: (800)
926-8273


Provider Gender: Male

NPI: 1982964276

D3. Directorio de proveedores especialistas



 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*





SURGERY PLASTIC **REID, CHRISTOPHER**

Provider ID: 224795
Board Certified Specialty: No
CHRISTOPHER M REID
 *200 W ARBOR DR*
SAN DIEGO, CA 92103
 *Phone: (800) 926-8273*
 *After Hours Phone: (800)*
926-8273
Provider Gender: Male
NPI: 1982964276



 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*


SURGERY THORACIC **FOX, KENNETH**




Provider ID: 257841
Board Certified Specialty: No
KENNETH A FOX
 *3020 CHILDRENS WAY*
SAN DIEGO, CA 92123
 *Phone: (858) 966-8030*
 *After Hours Phone: (858)*
966-8030
Provider Gender: Male
NPI: 1235153552

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*


SURGERY THORACIC **GANTA, SRUJAN**





Provider ID: 256383
Board Certified Specialty: No
SRUJAN GANTA
 *3020 CHILDRENS WAY*
SAN DIEGO, CA 92123
 *Phone: (858) 966-8030*
 *After Hours Phone: (858)*
966-8030
Provider Gender: Male
NPI: 1265071005

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

SURGERY THORACIC **GANTA, SRUJAN**

Provider ID: 275611
Board Certified Specialty: No
SRUJAN GANTA
 *3020 CHILDRENS WAY*
SAN DIEGO, CA 92123
 *Phone: (858) 966-8030*
 *After Hours Phone: (858)*
966-8030
Provider Gender: Male
NPI: 1265071005

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

SURGERY THORACIC **LEWIS, MICHAEL**

D3. Directorio de proveedores especialistas

Provider ID: 296906

Board Certified Specialty: Yes

MICHAEL J LEWIS

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-8030

Fax: (858) 966-8032

After Hours Phone: (858)
966-8030

Provider Gender: Male

NPI: 1780847533

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY THORACIC

NIGRO, JOHN

Provider ID: 205367

Board Certified Specialty: Yes

JOHN J NIGRO

3030 CHILDRENS WAY STE
202
SAN DIEGO, CA 92123

Phone: (858) 966-8030

Fax: (858) 966-8032

After Hours Phone: (858)
966-8030

Provider Gender: Male

NPI: 1881707818

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

SURGERY THORACIC

VOSSLER, JOHN

Provider ID: 306389

Board Certified Specialty: No

JOHN D VOSSLER

3020 CHILDRENS WAY
SAN DIEGO, CA 92123

Phone: (858) 966-5855

Fax: (858) 966-7903

After Hours Phone: (858)
966-5855

Provider Gender: Male

NPI: 1659630572

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

TRANSPLANT SURGERY

MEKEEL, KRISTIN

Provider ID: 262109

Board Certified Specialty: Yes

KRISTIN L MEKEEL

3020 CHILDRENS WAY STE
107

SAN DIEGO, CA 92123

Phone: (858) 966-7711

After Hours Phone: (858)
966-7711

Provider Gender: Female

NPI: 1104861947

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

TRANSPLANT SURGERY

SCHNICKEL, GABRIEL

Provider ID: 262192

Board Certified Specialty: No

GABRIEL T SCHNICKEL

8001 FROST ST
SAN DIEGO, CA 92123

Phone: (858) 966-8354





Fax: (858) 966-5815

After Hours Phone: (858)
966-8354

Provider Gender: Male

NPI: 1619111440

D3. Directorio de proveedores especialistas

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON,
RADY CHILDRENS HOSPITAL
SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

UROLOGY

AHMADIEH, KIAN

Provider ID: 309729
Board Certified Specialty: No
KIAN AHMADIEH
 200 W ARBOR DR
SAN DIEGO, CA 92103
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800)*
926-8273

Provider Gender: Male

NPI: 1932697190

 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Website: N/A*





UROLOGY

CHEN, TONY

Provider ID: 283960
Board Certified Specialty: No
TONY T CHEN
 200 W ARBOR DR
SAN DIEGO, CA 92103
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800)*
926-8273

Provider Gender: Male

NPI: 1245684497

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR, PALOMAR MEDICAL
CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*




UROLOGY

KATZ, JONATHAN

Provider ID: 299918
Board Certified Specialty: No
JONATHAN E KATZ
 16950 VIA TAZON
SAN DIEGO, CA 92127
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800)*
926-8273


Provider Gender: Male

NPI: 1952756207

 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Website: N/A*

UROLOGY

MONGA, MANOJ

Provider ID: 274480
Board Certified Specialty: No
MANOJ MONGA
 16950 VIA TAZON
SAN DIEGO, CA 92127
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800)*
926-8273
Provider Gender: Female
NPI: 1174609127
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

UROLOGY

MONGA, MANOJ

D3. Directorio de proveedores especialistas

Provider ID: 256847
Board Certified Specialty: No
MANOJ MONGA

200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
926-8273

Provider Gender: Female
NPI: 1174609127

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

UROLOGY

PATEL, DEVIN

Provider ID: 246094
Board Certified Specialty: No
DEVIN N PATEL

200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (858) 657-7876
After Hours Phone: (858)
657-7876

Provider Gender: Male
NPI: 1437505559

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,
CEDARS SINAI MEDICAL
CENTER

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

UROLOGY

SWORDS, KELLY

Provider ID: 206183
Board Certified Specialty: No
KELLY SWORDS

7920 FROST ST STE 200
SAN DIEGO, CA 92123

Phone: (858) 966-7484
Fax: (858) 966-4064

After Hours Phone: (858)
966-7484

Provider Gender: Female
NPI: 1316101256

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO, UCSF BENIOFF
CHILDREN'S HOSPITAL
OAKLAND

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

UROLOGY

UNTERBERG, STEPHEN

Provider ID: 284665
Board Certified Specialty: No
STEPHEN H UNTERBERG

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128

Phone: (858) 485-0554
Fax: (858) 429-7933

After Hours Phone: (858)
485-0554

Provider Gender: Male
NPI: 1215374210

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, PALOMAR MEDICAL
CENTER

Medi-Cal Open Panel: Yes
Min/Max Age: 16\110

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

UROLOGY

UNTERBERG, STEPHEN

Provider ID: 295834
Board Certified Specialty: No
STEPHEN H UNTERBERG

11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128

Phone: (858) 485-0554
Fax: (858) 429-7933

D3. Directorio de proveedores especialistas

☎ After Hours Phone: (858) 485-0554

Provider Gender: Male

NPI: 1215374210

🗨 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, PALOMAR MEDICAL

CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

🌐 Website: N/A

UROLOGY

UNTERBERG, STEPHEN

Provider ID: 295833

Board Certified Specialty: Yes

STEPHEN H UNTERBERG

📍 4060 4TH AVE STE 310

SAN DIEGO, CA 92103

☎ Phone: (619) 297-4707

Fax: (858) 429-7927

☎ After Hours Phone: (619) 297-4707

Provider Gender: Male

NPI: 1215374210

🗨 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, PALOMAR MEDICAL

CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL): LUKE L WANG

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

🌐 Website: N/A

UROLOGY

UNTERBERG, STEPHEN

Provider ID: 284664

Board Certified Specialty: Yes

STEPHEN H UNTERBERG

📍 4060 4TH AVE STE 310

SAN DIEGO, CA 92103

☎ Phone: (619) 297-4707

Fax: (858) 429-7927

☎ After Hours Phone: (619) 297-4707

Provider Gender: Male

NPI: 1215374210

🗨 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, PALOMAR MEDICAL

CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 16\110

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F

8:00AM-5:00PM

🌐 Website: N/A

UROLOGY

WANG, LUKE

Provider ID: 299933

Board Certified Specialty: No

📍 200 W ARBOR DR

SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1033630173

🗨 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

SAN MARCOS

CARDIOVASCULAR DISEASE

LERNER, JONATHAN

Provider ID: 303448

Board Certified Specialty: No

JONATHAN H LERNER

📍 955 BOARDWALK STE 100

SAN MARCOS, CA 92078

☎ Phone: (760) 798-8855

Fax: (619) 616-2104

☎ After Hours Phone: (760) 798-8855

Provider Gender: Male

NPI: 1962899823

🗨 Provider English Spoken: Y

🗨 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

D3. Directorio de proveedores especialistas

American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

CERTIFIED ACUPUNCTURIST

CARRA, BARBARA

Provider ID: 303128

Board Certified Specialty: No
BARBARA CARRA

1595 GRAND AVE STE 100
SAN MARCOS, CA 92078

Phone: (760) 736-6767

Fax: (760) 736-8740

After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1588173629

Provider English Spoken: Y

Provider Language(s)
Spoken: French, Italian,
Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED ACUPUNCTURIST

CARRA, BARBARA

Provider ID: 308116

Board Certified Specialty: No
BARBARA CARRA

150 VALPRED A RD

SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1588173629

Provider English Spoken: Y

Provider Language(s)
Spoken: French, Italian,
Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED ACUPUNCTURIST

GONZALEZ, ANDRES

Provider ID: 298658

Board Certified Specialty: No
ANDRES D GONZALEZ

1595 GRAND AVE STE 100
SAN MARCOS, CA 92078

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)
736-6767

Provider Gender: Male

NPI: 1841857729

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese, Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

BLAND, JACELIS

Provider ID: 296766

Board Certified Specialty: No
JACELIS BLAND

150 VALPRED A RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1801522859

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM
SA 8:00AM-4:30PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER


CABRAL, ALEJANDRA

Provider ID: 297888

Board Certified Specialty: No
ALEJANDRA P CABRAL

D3. Directorio de proveedores especialistas

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1699222620

Provider English Spoken: Y


Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


FODDA, RAMI

Provider ID: 296603

Board Certified Specialty: No

RAMI M FODDA

 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

Provider Gender: Male

NPI: 1164660452

Provider English Spoken: Y

Provider Language(s)
Spoken: Arabic


Cultural Competency: N

Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-6:00PM

SA 8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


FREEMAN, WANDA

Provider ID: 305751

Board Certified Specialty: No

WANDA FREEMAN

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1659504264

Provider English Spoken: Y


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

SA 8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


GARCIA, REGINA

Provider ID: 297837

Board Certified Specialty: No

REGINA J GARCIA

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1639673858

Provider English Spoken: Y


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

CERTIFIED NURSE

PRACTITIONER


HAN, ANGELA

Provider ID: 300215

Board Certified Specialty: No

ANGELA D HAN

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1629242839

Provider English Spoken: Y

Provider Language(s)
Spoken: Korean

Cultural Competency: N

Hospital Affiliation: JOHN

MUIR MEDICAL CENTER


WALNUT CREEK CAMPUS


Medi-Cal Open Panel: Yes

D3. Directorio de proveedores especialistas

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE PRACTITIONER

KOHOUT, KATHRYN

Provider ID: 291105

Board Certified Specialty: No
KATHRYN KOHOUT

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

Provider Gender: Female


NPI: 1316544331


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 14\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-8:00PM

SA 8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE PRACTITIONER

MOONEY, PATRICIA

Provider ID: 280382

Board Certified Specialty: No
PATRICIA J MOONEY

 838 NORDAHL RD STE 300
SAN MARCOS, CA 92069

 Phone: (760) 747-8935

Fax: (760) 466-0078

 After Hours Phone: (760)
747-8935

Provider Gender: Female

NPI: 1700470200


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE PRACTITIONER

NGUYEN, VANESSA

Provider ID: 306716

Board Certified Specialty: No
VANESSA T NGUYEN

 838 NORDAHL RDSTE 200
SAN MARCOS, CA 92069

 Phone: (760) 281-3662

Fax: (760) 316-5268

 After Hours Phone: (760)
281-3662

Provider Gender: Female

NPI: 1376219246


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:30AM-5:30PM

 Website: N/A


CERTIFIED NURSE PRACTITIONER

PARSONS, MEKRAE

Provider ID: 303220

Board Certified Specialty: No
MEKRAE L PARSONS

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

Provider Gender: Female


NPI: 1972090306


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE PRACTITIONER

VAHDAT, VALERIE


Provider ID: 294758

Board Certified Specialty: No
VALERIE K VAHDAT

 2085 MONTIEL RD STE 102
SAN MARCOS, CA 92069

 Phone: (833) 867-4642

Fax: (360) 462-5827

 After Hours Phone: (833)
867-4642

D3. Directorio de proveedores especialistas

Provider Gender: Female

NPI: 1093474090


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE PRACTITIONER

YCASAS, EMILY

Provider ID: 307853

Board Certified Specialty: No
EMILY JO YCASAS

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767
Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1033841861


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED REGISTERED NURSE MIDWIFE

BELANGER, TANYA

Provider ID: 290739

Board Certified Specialty: No
TANYA M BELANGER

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767
Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1407287469

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


CHIROPRACTOR

JIMENEZ, CLARIBEL

Provider ID: 307941

Board Certified Specialty: No
CLARIBEL JIMENEZ



 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767
Fax: (760) 736-8740

 After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1801255484

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


DERMATOLOGY

BROWN, REGINA

Provider ID: 309982

Board Certified Specialty: No
REGINA E BROWN

 838 NORDAHL RD STE 250
SAN MARCOS, CA 92069

 Phone: (760) 738-7600
Fax: (760) 738-7616

 After Hours Phone: (760)
738-7600

Provider Gender: Female

NPI: 1801424692


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INTERNAL MEDICINE

NGUYEN, MINH

Provider ID: 308467

Board Certified Specialty: No
MINH Q NGUYEN

 1595 GRAND AVE STE 100
SAN MARCOS, CA 92078

 Phone: (760) 736-6767

D3. Directorio de proveedores especialistas

☎ After Hours Phone: (760) 736-6767

Provider Gender: Male

NPI: 1154403640

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL): Provider ID: 295941

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

INTERNAL MEDICINE

TOLENTINO, ARTURO

Provider ID: 298696

Board Certified Specialty: No

ARTURO M TOLENTINO

📍 2085 MONTIEL RD STE 102
SAN MARCOS, CA 92069

☎ Phone: (833) 867-4642

Fax: (360) 462-5827

☎ After Hours Phone: (833) 867-4642

Provider Gender: Male

NPI: 1609066018

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: PALOMAR

HEALTH, PALOMAR MEDICAL

CENTER, LAKEWOOD

REGIONAL MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\17

American Sign Language (ASL): Board Certified Specialty: No
HULBERT N DO

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

INTERVENTIONAL

CARDIOLOGY

DO, HULBERT

Provider ID: 295941

Board Certified Specialty: No
HULBERT N DO

📍 955 BOARDWALK STE 100
SAN MARCOS, CA 92078

☎ Phone: (760) 798-8855

Fax: (619) 616-2104

☎ After Hours Phone: (760) 798-8855

Provider Gender: Male

NPI: 1679733760

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR, Sharp

Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): Provider ID: 245578
N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

INTERVENTIONAL

CARDIOLOGY

DO, HULBERT

Provider ID: 291583

Board Certified Specialty: No
HULBERT N DO

📍 150 VALPREDA RD
SAN MARCOS, CA 92069

☎ Phone: (760) 736-6767

Fax: (760) 736-6744

☎ After Hours Phone: (760) 736-6767

Provider Gender: Male

NPI: 1679733760

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR, Sharp

Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): Provider ID: 245578
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-8:00PM

SA 8:00AM-8:00PM

🌐 Website: N/A

INTERVENTIONAL

CARDIOLOGY

MOHAMEDALI, BURHAN

Provider ID: 245578

Board Certified Specialty: No
BURHAN MOHAMEDALI

📍 955 BOARDWALK STE 100
SAN MARCOS, CA 92078

☎ Phone: (760) 798-8855

Fax: (760) 755-5245

☎ After Hours Phone: (760) 798-8855

Provider Gender: Male

D3. Directorio de proveedores especialistas

NPI: 1831393289

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish, Swahili

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

Adventist Health and Rideout

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
9:00AM-5:00PM

🌐 Website: N/A

INTERVENTIONAL

CARDIOLOGY

SUDHAKAR, DEEPTHI

Provider ID: 291607

Board Certified Specialty: No
DEEPTHI SUDHAKAR

📍 150 VALPRED A RD
SAN MARCOS, CA 92069

☎ Phone: (760) 736-6767

Fax: (760) 736-6744

📞 After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1811307051

☐ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Sharp

Grossmont Hospital, SHARP

CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 15\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

INTERVENTIONAL

CARDIOLOGY

SUDHAKAR, DEEPTHI

Provider ID: 295847

Board Certified Specialty: No
DEEPTHI SUDHAKAR

📍 955 BOARDWALK STE 100
SAN MARCOS, CA 92078

☎ Phone: (760) 798-8855

Fax: (619) 616-2104

📞 After Hours Phone: (760)
798-8855

Provider Gender: Female

NPI: 1811307051

☐ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Sharp
Grossmont Hospital, SHARP

CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 15\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

INTERVENTIONAL

CARDIOLOGY

SUDHAKAR, DEEPTHI

Provider ID: 296052

Board Certified Specialty: No
DEEPTHI SUDHAKAR

📍 955 BOARDWALK STE 100
SAN MARCOS, CA 92078

☎ Phone: (760) 798-8855

Fax: (619) 616-2104

📞 After Hours Phone: (760)
798-8855

Provider Gender: Female

NPI: 1811307051

☐ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: Sharp
Grossmont Hospital, SHARP

CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 15\99

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

NEUROLOGY

ANDER, AZIZ

Provider ID: 290382

Board Certified Specialty: No

AZIZ N ANDER

📍 838 NORDAHL RD STE 310
SAN MARCOS, CA 92069

☎ Phone: (442) 999-5977

Fax: (442) 999-5914

📞 After Hours Phone: (442)
999-5977

Provider Gender: Male

NPI: 1316131832

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Faroese, Pashto,
Persian, Urdu

Cultural Competency: N

Hospital Affiliation: DESERT


D3. Directorio de proveedores especialistas

REGIONAL MED CTR, JOHN F
KENNEDY MEMORIAL HOSP,
PALOMAR HEALTH, PALOMAR
MEDICAL CENTER

Medi-Cal Open Panel: Yes
Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:30AM-4:30PM

 Website: N/A


NEUROLOGY

GUPTA, MONIKA

Provider ID: 307938

Board Certified Specialty: No
MONIKA A GUPTA

 838 NORDAHL RD STE 200
SAN MARCOS, CA 92069


 Phone: (760) 281-3662


Fax: (760) 316-5268

 After Hours Phone: (760)
281-3662

Provider Gender: Female

NPI: 1922243401

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hindi, Spanish

Cultural Competency: N

Hospital Affiliation: TEMECULA
VALLEY HOSPITAL INC, UCSD

LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL
CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 16\999

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

NEUROLOGY


HOSSEINZADEHMALEKI, ANA

Provider ID: 304998

Board Certified Specialty: No

ANA HOSSEINZADEHMALEKI

 838 NORDAHL RD STE 200
SAN MARCOS, CA 92069


 Phone: (760) 281-3662


Fax: (760) 316-5268

 After Hours Phone: (760)
281-3662

Provider Gender: Female

NPI: 1316471485

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Arabic, Persian

Cultural Competency: N


Hospital Affiliation: TEMECULA
VALLEY HOSPITAL INC

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

NEUROLOGY


MANDEVILLE, ROSS

Provider ID: 309933


Board Certified Specialty: No

ROSS M MANDEVILLE

 838 NORDAHL RD STE 200
SAN MARCOS, CA 92069


 Phone: (760) 281-3662

Fax: (760) 316-5268

 After Hours Phone: (760)
281-3662

Provider Gender: Male

NPI: 1205084183

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON,


MAYERS MEMORIAL HOSP


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

NEUROLOGY


MAREK, MAKSYM

Provider ID: 306708


Board Certified Specialty: No

MAKSYM S MAREK

 838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

 Phone: (760) 281-3662


Fax: (619) 425-3842

 After Hours Phone: (760)
281-3662

Provider Gender: Male

NPI: 1881182079

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Hindi, Spanish,
Tagalog

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

D3. Directorio de proveedores especialistas

HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-6:00PM

SA 9:00AM-0:30PM

 Website: N/A

NEUROLOGY


SORIALOPEZ, JOSE

Provider ID: 295745


Board Certified Specialty: No

JOSE A SORIALOPEZ

 838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

 Phone: (760) 281-3662

Fax: (760) 316-5268

 After Hours Phone: (760)
281-3662

Provider Gender: Male

NPI: 1225474034

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, TEMECULA

VALLEY HOSPITAL INC


Medi-Cal Open Panel: Yes


Min/Max Age: 16\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-6:00PM

 Website: N/A

OBSTETRICS / GYNECOLOGY


CABRERA, MICHELLE

Provider ID: 303025

Board Certified Specialty: No

MICHELLE M CABRERA

 150 VALPRED A RD
SAN MARCOS, CA 92069


 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1174774723

 Provider English Spoken: Y

 Provider Language(s)
Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: Adventist

Health and Rideout


Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

OBSTETRICS / GYNECOLOGY


HINSHAW, PAUL

Provider ID: 288907

Board Certified Specialty: No

PAUL W HINSHAW

 120 CRAVEN RD STE 101
SAN MARCOS, CA 92078

 Phone: (760) 740-2710

Fax: (858) 207-0003

 After Hours Phone: (760)
740-2710

Provider Gender: Male

NPI: 1215170717

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PALOMAR


MEDICAL CENTER


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

PEDIATRICS


LUMHO, RACHEL

Provider ID: 303150

Board Certified Specialty: No

RACHEL L LUMHO

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

Provider Gender: Female

NPI: 1215469283

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PALOMAR


MEDICAL CENTER

Medi-Cal Open Panel: Yes



Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

D3. Directorio de proveedores especialistas


 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-5:00PM
 Website: N/A

PEDIATRICS

LUMHO, RACHEL

Provider ID: 304047
Board Certified Specialty: No
RACHEL L LUMHO

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767
Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767


Provider Gender: Female
NPI: 1215469283


 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: PALOMAR
MEDICAL CENTER

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-5:00PM


 Website: N/A

PEDIATRICS

POSADAS, EMERITO



Provider ID: 257536
Board Certified Specialty: No
EMERITO D POSADAS

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767
Fax: (760) 566-1501

 After Hours Phone: (760)
736-6767

Provider Gender: Male
NPI: 1720093198

 Provider English Spoken: Y
 Provider Language(s)


Spoken: Spanish, Tagalog
Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, PALOMAR
MEDICAL CENTER

Medi-Cal Open Panel: Yes
Min/Max Age: 0\18

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-6:00PM


 Website: N/A

PEDIATRICS

QUINTERO, CAROLYN



Provider ID: 303142
Board Certified Specialty: No
CAROLYN S QUINTERO

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767
Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

Provider Gender: Female
NPI: 1023033156


 Provider English Spoken: Y
 Provider Language(s)

Spoken: Afar, Spanish
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\18

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-6:00PM
SA 8:00AM-5:00PM


 Website: N/A

PHYSICIANS ASSISTANT

CELESTINO, MISHEL



Provider ID: 302439
Board Certified Specialty: No
MISHEL N CELESTINO

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767
Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767


Provider Gender: Female
NPI: 1578263760

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A

PHYSICIANS ASSISTANT

HERNANDEZ, MIRIAM

Provider ID: 298336
Board Certified Specialty: No
MIRIAM HERNANDEZ

 150 VALPRED A RD
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

D3. Directorio de proveedores especialistas

Fax: (760) 736-6744

☎ After Hours Phone: (760) 736-6767

Provider Gender: Female

NPI: 1457903700

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

PHYSICIANS ASSISTANT

POLLEY, SHANNON

Provider ID: 296093

Board Certified Specialty: No
SHANNON POLLEY

📍 150 VALPRED A RD
SAN MARCOS, CA 92069

☎ Phone: (760) 736-6767

Fax: (760) 736-6744

☎ After Hours Phone: (760) 736-6767

Provider Gender: Female

NPI: 1225608722

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-8:00PM
SA 8:00AM-5:00PM

🌐 Website: N/A

PHYSICIANS ASSISTANT

RUBIO, HALEY

Provider ID: 301290

Board Certified Specialty: No
HALEY M RUBIO

📍 1595 GRAND AVE STE 106
SAN MARCOS, CA 92078

☎ Phone: (760) 736-6767

Fax: (760) 736-6744

☎ After Hours Phone: (760) 736-6767

Provider Gender: Female

NPI: 1598394371

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 2\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PSYCHOLOGIST

ALTAMIRANO, LEON

Provider ID: 290362

Board Certified Specialty: No
LEON ALTAMIRANO

📍 150 VALPRED A RD
SAN MARCOS, CA 92069

☎ Phone: (760) 736-6767

Fax: (760) 736-6744

☎ After Hours Phone: (760) 736-6767

Provider Gender: Male

NPI: 1619271517

☑ Provider English Spoken: Y
☑ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🌐 Website: N/A

PSYCHOLOGIST

ARIELLA, LYNDA

Provider ID: 299716

Board Certified Specialty: No
LYNDA R ARIELLA

📍 150 VALPRED A RD
SAN MARCOS, CA 92069

☎ Phone: (760) 736-6767

Fax: (760) 736-6744

☎ After Hours Phone: (760) 736-6767

Provider Gender: Female

NPI: 1073518965

☑ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 5\50

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PSYCHOLOGIST

FLYNN, DANIELLE

Provider ID: 290795

Board Certified Specialty: No
DANIELLE I FLYNN

📍 150 VALPRED A RD
SAN MARCOS, CA 92069

☎ Phone: (760) 736-6767

Fax: (760) 736-6744

☎ After Hours Phone: (760)

D3. Directorio de proveedores especialistas

736-6767
Provider Gender: Female
NPI: 1477785137
☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A

PSYCHOLOGIST

GEORGIEV, MARY-JO

Provider ID: 290793
Board Certified Specialty: No
MARY-JO GEORGIEV
📍 150 VALPRED A RD
SAN MARCOS, CA 92069
☎ Phone: (760) 736-6767
Fax: (760) 736-6744
⌚ After Hours Phone: (760)
736-6767

Provider Gender: Female
NPI: 1518996875
☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A

PSYCHOLOGIST

IMAM, SYED

Provider ID: 298174
Board Certified Specialty: No
SYED IMAM

📍 150 VALPRED A RD
SAN MARCOS, CA 92069
☎ Phone: (760) 736-6767
Fax: (760) 736-6744
⌚ After Hours Phone: (760)
736-6767
Provider Gender: Male
NPI: 1447428271
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Hindi, Urdu
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 15\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
⌚ Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

PSYCHOLOGIST

SIMPSON, ERIC

Provider ID: 290803
Board Certified Specialty: No
ERIC SIMPSON
📍 150 VALPRED A RD
SAN MARCOS, CA 92069
☎ Phone: (760) 736-6767
Fax: (760) 736-6744
⌚ After Hours Phone: (760)
736-6767

Provider Gender: Male
NPI: 1710110416
☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT

PROVIDER
🌐 Website: N/A

PSYCHOLOGIST

TORRES, HECTOR

Provider ID: 290788
Board Certified Specialty: No
HECTOR M TORRES
📍 150 VALPRED A RD
SAN MARCOS, CA 92069
☎ Phone: (760) 736-6767
Fax: (760) 736-6744
⌚ After Hours Phone: (760)
736-6767


Provider Gender: Male
NPI: 1720265614
☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🌐 Website: N/A

RHEUMATOLOGY

ALNAHLAWI, BASMA

Provider ID: 290068
Board Certified Specialty: No
BASMA ALNAHLAWI
📍 334 VIA VERA CRUZ STE 251
SAN MARCOS, CA 92078
☎ Phone: (760) 736-8091
Fax: (760) 736-8092
⌚ After Hours Phone: (760)
736-8091
Provider Gender: Female
NPI: 1144455262
☐ Provider English Spoken: Y

D3. Directorio de proveedores especialistas




 *Provider Language(s)
Spoken: Arabic
Cultural Competency: N
Hospital Affiliation: LOMA
LINDA UNIVERSITY MED CTR
MURRIETA, PALOMAR
MEDICAL CENTER, LOMA
LINDA UNIVERSITY MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):*

*N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A*



RHEUMATOLOGY



ALNAHLAWI, BASMA

*Provider ID: 295532
Board Certified Specialty: No
BASMA ALNAHLAWI*

 960 W SAN MARCOS BLVD
STE 210
SAN MARCOS, CA 92078
 Phone: (760) 736-8091
Fax: (760) 736-8092
 After Hours Phone: (760)
736-8091

*Provider Gender: Female
NPI: 1144455262*

 *Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic
Cultural Competency: N
Hospital Affiliation: LOMA
LINDA UNIVERSITY MED CTR
MURRIETA, PALOMAR
MEDICAL CENTER, LOMA
LINDA UNIVERSITY MED CTR*

*Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
9:00AM-5:00PM
 Website: N/A*



SAN YSIDRO

CERTIFIED NURSE

PRACTITIONER


KANTAS, PARIS

*Provider ID: 306684
Board Certified Specialty: No
PARIS KANTAS*




 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
Fax: (619) 205-6341

 After Hours Phone: (619)
662-4100

*Provider Gender: Male
NPI: 1114329612*

 *Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
CORONADO HOSP AND
HEALTHCARE CTR
Medi-Cal Open Panel: Yes*

*Min/Max Age: 2\999
American Sign Language (ASL):
N*


 *Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A*


CERTIFIED NURSE

PRACTITIONER

ROSCOE, SYDNEY


*Provider ID: 306249
Board Certified Specialty: No
SYDNEY R ROSCOE*

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100
Fax: (619) 205-5305


 After Hours Phone: (619)
662-4100


*Provider Gender: Female
NPI: 1992448864*

 *Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999*

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*


 *Website: N/A*

FAMILY PRACTICE

ALVAREZ-ESTRADA, MIGUEL



*Provider ID: 294925
Board Certified Specialty: No
MIGUEL ALVAREZ-ESTRADA*

 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100
Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

*Provider Gender: Male
NPI: 1588197826*

 *Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N*

D3. Directorio de proveedores especialistas

Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MERCY
HOSPITAL, PARADISE VALLEY
HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Website: N/A


FAMILY PRACTICE

ARRIETA, NOEMI

Provider ID: 297794

Board Certified Specialty: No
NOEMI J ARRIETA

 4004 BEYER BLVD
SAN YSIDRO, CA 92173


 Phone: (619) 662-4100

Fax: (619) 205-6341

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1912223496

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


FAMILY PRACTICE

DALUGDUGAN, ESTHER

Provider ID: 302285

Board Certified Specialty: No
ESTHER D DALUGDUGAN

 4004 BEYER BLVD
SAN YSIDRO, CA 92173


 Phone: (619) 662-4100


Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1962662718

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Tagalog

Cultural Competency: N


Hospital Affiliation: SHARP
CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:30AM-5:00PM

 Website: N/A


FAMILY PRACTICE

NAVARRO, VANESSAMARIA

Provider ID: 297756

Board Certified Specialty: No
VANESSAMARIA M NAVARRO

 1666 PRECISION PARK LN
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100


Fax: (619) 785-3384

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1952563421

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Filipino, Spanish,
Tagalog

Cultural Competency: N


Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SHARP CHULA VISTA
MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:30AM-5:30PM

SA 8:00AM-2:30PM


 Website: N/A


FAMILY PRACTICE

ORTEGA, LUIS

Provider ID: 295225

Board Certified Specialty: No
LUIS M ORTEGA

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100


Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

Provider Gender: Male

NPI: 1558924936

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

D3. Directorio de proveedores especialistas

American Sign Language (ASL): Fax: (619) 205-6305

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:30AM-5:00PM

 Website: N/A


FAMILY PRACTICE

QURESHI, SOFIA

Provider ID: 308756

Board Certified Specialty: No
SOFIA H QURESHI

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1902197544


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM


 Website: N/A


FAMILY PRACTICE GERIATRIC MEDICINE


BULOW, KWI

Provider ID: 302346

Board Certified Specialty: No
KWI Y BULOW

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1073608576

 Provider English Spoken: Y
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:30AM-5:00PM

 Website: N/A


GENERAL PRACTICE

SAMI, REMAN


Provider ID: 305484

Board Certified Specialty: No
REMAN A SAMI

 4004 BEYER BLVD
SAN YSIDRO, CA 92173



 Phone: (619) 662-4100

Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1295362242

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


INFECTIOUS DISEASE

ALDOUS, JEANNETTE

Provider ID: 290421

Board Certified Specialty: No
JEANNETTE L ALDOUS

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100
Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1073650339

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A


INFECTIOUS DISEASE

RAMIREZSANCHEZ, CLAUDIA

Provider ID: 296122

Board Certified Specialty: Yes
CLAUDIA C RAMIREZSANCHEZ

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100
Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

D3. Directorio de proveedores especialistas

Provider Gender: Female
NPI: 1659720555
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-8:00PM
SA 8:00AM-2:00PM
 Website: N/A

OBSTETRICS / GYNECOLOGY

DINH, MY

Provider ID: 290490
Board Certified Specialty: No
DINH, MY T
 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
Fax: (619) 205-6305
 After Hours Phone: (619)
662-4100
Provider Gender: Female
NPI: 1316146996
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL):
N
 Accessibility: CONTACT

PROVIDER
 Hours: M-F
9:00AM-5:00PM
 Website: N/A

OBSTETRICS / GYNECOLOGY

GOMEZ, DANIELA

Provider ID: 294885
Board Certified Specialty: No
DANIELA GOMEZ
 4004 BEYER BLVD STE 400
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
Fax: (619) 205-6305
 After Hours Phone: (619)
662-4100
Provider Gender: Female
NPI: 1255878997

Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-8:00PM
SA 8:00AM-2:00PM
 Website: N/A

OBSTETRICS / GYNECOLOGY

GOMEZ, DANIELA

Provider ID: 294886
Board Certified Specialty: No
DANIELA GOMEZ
 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
Fax: (619) 205-1967



After Hours Phone: (619)
662-4100
Provider Gender: Female
NPI: 1255878997
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-8:00PM
SA 8:00AM-2:00PM
 Website: N/A

PEDIATRICS

FUJII, CINDY

Provider ID: 298309
Board Certified Specialty: No
CINDY M FUJII
 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
Fax: (619) 205-6305
 After Hours Phone: (619)
662-4100
Provider Gender: Female
NPI: 1871664821
 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

D3. Directorio de proveedores especialistas



 Hours: SU 10:00AM-4:00PM
M-F 8:30AM-5:30PM
SA 8:00AM-2:30PM
 Website: N/A

PEDIATRICS

RODRIGUEZ, ALDO

Provider ID: 295779



Board Certified Specialty: No
ALDO E RODRIGUEZ

 4050 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

Provider Gender: Male

NPI: 1508209651


 Provider English Spoken: Y
 Provider Language(s)
Spoken: Portuguese,
Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 10:00AM-4:00PM
M 8:30AM-8:00PM
W-F 8:30AM-5:30PM
SA 8:00AM-2:30PM

 Website: N/A


PEDIATRICS

TAYLOR, TASHA

Provider ID: 290077

Board Certified Specialty: No
TASHA K TAYLOR



 4050 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100
Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1528144433

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\18

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER



 Website: N/A

PSYCHOLOGIST

IBANEZ, BERENICE

Provider ID: 290465



Board Certified Specialty: No
BERENICE B IBANEZ

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1740394386

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR, SCRIPPS


MEMORIAL HOSPITAL

ENCINITAS

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

REGISTERED PHYSICAL THERAPIST

SHAUF, JOANN


Provider ID: 296045

Board Certified Specialty: No
JOANN SHAUF

 3364 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1134732522

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER



 Website: N/A

RHEUMATOLOGY

LWIN, THUTHIRI

Provider ID: 307650

Board Certified Specialty: No
THUTHIRI T LWIN

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
Fax: (619) 205-6305

D3. Directorio de proveedores especialistas

☎ After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1174010896

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Burmese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

SANTEE

PEDIATRICS

IKE, ERICA

Provider ID: 309723

Board Certified Specialty: No

ERICA L IKE

📍 120 TOWN CENTER PKWY
SANTEE, CA 92071

☎ Phone: (619) 662-4100

Fax: (619) 873-3476

☎ After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1821413907

☐ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: ST JOHNS
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):
N

♿ Accessibility: CONTACT

PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

PHYSICIANS ASSISTANT

ROSENBLATT, SHERILYN

Provider ID: 295738

Board Certified Specialty: No

SHERILYN ROSENBLATT

📍 120 TOWN CENTER PKWY
SANTEE, CA 92071

☎ Phone: (619) 662-4100

Fax: (619) 205-6305

☎ After Hours Phone: (619)
662-4100

Provider Gender: Female

NPI: 1114041621

☐ Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: SU 10:00AM-4:00PM
M-F 8:30AM-5:30PM
SA 10:00AM-2:30PM

🌐 Website: N/A

TEMECULA

CERTIFIED ACUPUNCTURIST

CRAFT, KEVIN

Provider ID: 290944

Board Certified Specialty: No

KEVIN E CRAFT

📍 41840 ENTERPRISE CIR N
TEMECULA, CA 92590

☎ Phone: (951) 225-6400
Fax: (360) 462-2751

☎ After Hours Phone: (951)
225-6400

Provider Gender: Male

NPI: 1659745610

☐ Provider English Spoken: Y

☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: TU-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE

PRACTITIONER

MIRACLE, ANGELYN

Provider ID: 300260

Board Certified Specialty: No

ANGELYN M MIRACLE

📍 31170 TEMECULA PKWY
STE 200

TEMECULA, CA 92592

☎ Phone: (951) 699-3299

Fax: (951) 302-1313

☎ After Hours Phone: (951)
699-3299

Provider Gender: Female

NPI: 1144539842

☐ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):
N

♿ Accessibility: CONTACT

D3. Directorio de proveedores especialistas

PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER

VAHDAT, VALERIE

Provider ID: 306580
Board Certified Specialty: No
VALERIE K VAHDAT

41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Phone: (951) 225-6400
Fax: (360) 462-2751
After Hours Phone: (951)
225-6400

Provider Gender: Female
NPI: 1093474090

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PHYSICIANS ASSISTANT

ANWAR, YASMIN

Provider ID: 300846
Board Certified Specialty: No
YASMIN ANWAR

31515 RANCHO PUEBLO RD
STE 102
TEMECULA, CA 92592
Phone: (951) 225-7873
Fax: (951) 305-9117
After Hours Phone: (951)

225-7873
Provider Gender: Female
NPI: 1588602247
Provider English Spoken: Y
Provider Language(s)
Spoken: Persian, Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PSYCHOLOGIST

WOODWORTH, JENNIFER

Provider ID: 290633
Board Certified Specialty: No
JENNIFER WOODWORTH

41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Phone: (951) 225-6400
Fax: (360) 462-2751
After Hours Phone: (951)
225-6400

Provider Gender: Female
NPI: 1639362494
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-TH
8:00AM-5:00PM
Website: N/A

SURGERY GENERAL

VASCULAR

HOWE, STEVEN

Provider ID: 206759
Board Certified Specialty: No
STEVEN C HOWE

31700 TEMECULA VALLEY
PARKWAY
TEMECULA, CA 92592
Phone: (951) 303-2349
Fax: (951) 303-8591

After Hours Phone: (951)
303-2349
Provider Gender: Male
NPI: 1497702740

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON, TRI
CITY MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

VISTA

ANESTHESIOLOGY PAIN

MANAGEMENT

GUPTA, ANUJ

Provider ID: 297703
Board Certified Specialty: No
ANUJ GUPTA

2023 W VISTA WAY STE D
VISTA, CA 92083

D3. Directorio de proveedores especialistas

Phone: (619) 330-8771

Fax: (619) 330-8772

After Hours Phone: (619)
330-8771

Provider Gender: Male

NPI: 1073629549

Provider English Spoken: Y

Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: POMONA

VALLEY HOSP MED CTR,

PARADISE VALLEY HOSPITAL,

TRI CITY MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A

Email:

CARAMEDBILL@AOL.COM

CARDIOVASCULAR DISEASE

ABELHAD, NADIA

Provider ID: 306896

Board Certified Specialty: No

NADIA I ABELHAD

1000 VALE TERRACE DR
VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1619400801

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR, Sharp

Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

Website: N/A

CARDIOVASCULAR DISEASE

ABELHAD, NADIA

Provider ID: 306897

Board Certified Specialty: No

NADIA I ABELHAD

1000 VALE TERRACE DR
VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1619400801

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR, Sharp

Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

Website: N/A

CARDIOVASCULAR DISEASE

DO, HULBERT

Provider ID: 290574

Board Certified Specialty: No

HULBERT N DO

1000 VALE TERRACE DR
VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1679733760

Provider English Spoken: Y

Provider Language(s)
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR, Sharp

Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: SU 9:00AM-8:00PM
M-TH 9:00AM-8:00PM
F 9:00AM-5:00PM
SA 9:00AM-4:00PM

Website: N/A

CERTIFIED ACUPUNCTURIST

SONG, CAROL

Provider ID: 290550

Board Certified Specialty: No

CAROL U SONG

1000 VALE TERRACE DR
VISTA, CA 92084

Phone: (760) 631-5000

D3. Directorio de proveedores especialistas

Fax: (760) 414-3892

📞 After Hours Phone: (760) 631-5000

Provider Gender: Female

NPI: 1518166685

☐ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-TH
8:00AM-8:00PM
F 9:00AM-5:00PM
SA 9:00AM-4:00PM

🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

APRIL, MONIQUE

Provider ID: 306980

Board Certified Specialty: No
MONIQUE APRIL

📍 134 GRAPEVINE RD
VISTA, CA 92083

📞 Phone: (760) 631-5000
Fax: (760) 414-3892

📞 After Hours Phone: (760) 631-5000

Provider Gender: Female

NPI: 1093288730

☐ Provider English Spoken: Y
☐ Provider Language(s)

Spoken: Spanish
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT

PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

APRIL, MONIQUE

Provider ID: 307939

Board Certified Specialty: No
MONIQUE APRIL

📍 1000 VALE TERRACE DR
VISTA, CA 92084

📞 Phone: (760) 631-5000
Fax: (760) 414-3892

📞 After Hours Phone: (760) 631-5000

Provider Gender: Female

NPI: 1093288730

☐ Provider English Spoken: Y
☐ Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

APRIL, MONIQUE

Provider ID: 306977

Board Certified Specialty: No
MONIQUE APRIL

📍 1000 VALE TERRACE DR
VISTA, CA 92084

📞 Phone: (760) 631-5000

Fax: (760) 414-3892

📞 After Hours Phone: (760) 631-5000

Provider Gender: Female

NPI: 1093288730

☐ Provider English Spoken: Y
☐ Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER

AYELE, MAHOGANY

Provider ID: 257586

Board Certified Specialty: No
MAHOGANY A AYELE

📍 1000 VALE TERRACE DR
VISTA, CA 92084

📞 Phone: (760) 631-5000
Fax: (760) 414-3892

📞 After Hours Phone: (760) 631-5000

Provider Gender: Female

NPI: 1902120421

☐ Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

🕒 Hours: M-TH

D3. Directorio de proveedores especialistas

8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

 Website: N/A


CERTIFIED NURSE **PRACTITIONER**

AYELE, MAHOGANY

Provider ID: 257587

Board Certified Specialty: No
MAHOGANY A AYELE

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (844) 308-5003

Fax: (760) 414-3763

 After Hours Phone: (844)
308-5003

Provider Gender: Female

NPI: 1902120421


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M 8:00AM-5:00PM
TU 10:30AM-7:30PM

W-F 8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE **PRACTITIONER**

BERNETICH, MEGHAN

Provider ID: 304506

Board Certified Specialty: No
MEGHAN A BERNETICH

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000

Fax: (760) 414-3702

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1629354360


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM

SA 9:00AM-4:00PM

 Website: N/A


CERTIFIED NURSE **PRACTITIONER**

BERNETICH, MEGHAN

Provider ID: 302526

Board Certified Specialty: No
MEGHAN A BERNETICH

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000

Fax: (760) 414-3702

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1629354360


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\24

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
9:00AM-5:00PM

SA 9:00AM-4:00PM

 Website: N/A

CERTIFIED NURSE **PRACTITIONER**

CARDINELL, ANNA

Provider ID: 291411

Board Certified Specialty: No
ANNA C CARDINELL

 910 SYCAMORE AVE STE
270

VISTA, CA 92081

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1306978614

 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


CERTIFIED NURSE **PRACTITIONER**

CHILAKA, SAMUEL

Provider ID: 301312

Board Certified Specialty: No
SAMUEL U CHILAKA

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000





Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1679140644

D3. Directorio de proveedores especialistas




 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-TH*
8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM
 *Website: N/A*

CERTIFIED NURSE **PRACTITIONER**

CHILAKA, SAMUEL

Provider ID: 301311
Board Certified Specialty: No
SAMUEL U CHILAKA
 1000 VALE TERRACE DR
VISTA, CA 92084
 *Phone: (760) 631-5000*
Fax: (760) 414-3892
 *After Hours Phone: (760)*
631-5000

Provider Gender: Male
NPI: 1679140644


 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-TH*
8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM
 *Website: N/A*




CERTIFIED NURSE **PRACTITIONER**

CHRISTY, TYLER

Provider ID: 303928
Board Certified Specialty: No
TYLER D CHRISTY
 517 N HORNE ST
VISTA, CA 92083
 *Phone: (760) 631-5000*
Fax: (760) 414-3892
 *After Hours Phone: (760)*
631-5000



Provider Gender: Male
NPI: 1689094971

 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*




CERTIFIED NURSE **PRACTITIONER**

CHRISTY, TYLER

Provider ID: 307298
Board Certified Specialty: No
TYLER D CHRISTY
 1000 VALE TERRACE DR
VISTA, CA 92084
 *Phone: (760) 631-5000*
Fax: (760) 414-3892
 *After Hours Phone: (760)*
631-5000




Provider Gender: Male
NPI: 1689094971

 *Provider English Spoken: Y*
Cultural Competency: N


Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*




CERTIFIED NURSE **PRACTITIONER**

CHRISTY, TYLER

Provider ID: 303927
Board Certified Specialty: No
TYLER D CHRISTY
 1000 VALE TERRACE DR
VISTA, CA 92084
 *Phone: (760) 631-5000*
Fax: (760) 414-3892
 *After Hours Phone: (760)*
631-5000

Provider Gender: Male
NPI: 1689094971

 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM
 *Website: N/A*

CERTIFIED NURSE **PRACTITIONER**

CHRISTY, TYLER

Provider ID: 303932
Board Certified Specialty: No

D3. Directorio de proveedores especialistas

TYLER D CHRISTY

134 GRAPEVINE RD
VISTA, CA 92083

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1689094971

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

CHRISTY, TYLER

Provider ID: 303929

Board Certified Specialty: No
TYLER D CHRISTY

105 DURIAN ST STE A
VISTA, CA 92083

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1689094971

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

CORY, ALLISON

Provider ID: 245207

Board Certified Specialty: No
ALLISON H CORY

134 GRAPEVINE RD
VISTA, CA 92083

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1194027706

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-5:00PM
TU 10:30AM-7:30PM
W-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

HALGEDAHL, YI TING

Provider ID: 241907

Board Certified Specialty: No
YI TING T HALGEDAHL

1000 VALE TERRACE DR
VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1619246907

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese, Mandarin

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
8:00AM-8:00PM
F 9:00AM-5:00PM
SA 9:00AM-4:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

HERNANDEZ, JESSICA

Provider ID: 304492

Board Certified Specialty: No
JESSICA A HERNANDEZ

1000 VALE TERRACE DR
VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1013668680

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT

D3. Directorio de proveedores especialistas

PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE

PRACTITIONER

HERNANDEZ, JESSICA

Provider ID: 302296
Board Certified Specialty: No
JESSICA A HERNANDEZ

1000 VALE TERRACE DR
VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1013668680

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

HERNANDEZ, JESSICA

Provider ID: 304493
Board Certified Specialty: No
JESSICA A HERNANDEZ

134 GRAPEVINE RD
VISTA, CA 92083

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)

631-5000
Provider Gender: Female
NPI: 1013668680
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

HERNANDEZ, JESSICA

Provider ID: 302297
Board Certified Specialty: No
JESSICA A HERNANDEZ

134 GRAPEVINE RD
VISTA, CA 92083

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1013668680

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

HERNANDEZ, JESSICA

Provider ID: 302301
Board Certified Specialty: No
JESSICA A HERNANDEZ

105 DURIAN ST STE A
VISTA, CA 92083

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1013668680

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

CERTIFIED NURSE

PRACTITIONER

HUERTA, STEVEN

Provider ID: 307933
Board Certified Specialty: No
STEVEN T HUERTA

134 GRAPEVINE RD
VISTA, CA 92083

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1558607440


Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

D3. Directorio de proveedores especialistas

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE PRACTITIONER

HUERTA, STEVEN

Provider ID: 307931

Board Certified Specialty: No
STEVEN T HUERTA

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Male


NPI: 1558607440


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CERTIFIED NURSE PRACTITIONER


KELLEHER, BRIDGET

Provider ID: 298085

Board Certified Specialty: No
BRIDGET M KELLEHER



 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1245695006

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: TRI CITY
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


CERTIFIED NURSE PRACTITIONER


KELLEHER, BRIDGET

Provider ID: 298083

Board Certified Specialty: No
BRIDGET M KELLEHER



 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1245695006

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Website: N/A


CERTIFIED NURSE PRACTITIONER

KELLEHER, BRIDGET

Provider ID: 305737

Board Certified Specialty: No
BRIDGET M KELLEHER

 105 DURIAN ST STE B
VISTA, CA 92083

 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1245695006

 Provider English Spoken: Y
 Provider Language(s)

Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: TRI CITY
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A

CERTIFIED NURSE PRACTITIONER




KORMANIK, PATRICIA

Provider ID: 282072

Board Certified Specialty: No
PATRICIA A KORMANIK

 910 SYCAMORE AVE STE

D3. Directorio de proveedores especialistas

102
VISTA, CA 92081
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
Provider Gender: Female
NPI: 1093895047
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A


CERTIFIED NURSE

PRACTITIONER

MONTGOMERY JR, KEITH

Provider ID: 295288
Board Certified Specialty: No
KEITH MONTGOMERY JR JR

 134 GRAPEVINE RD
VISTA, CA 92083
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000

Provider Gender: Male
NPI: 1790978617
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 6\999
American Sign Language (ASL):

N
 Accessibility: CONTACT
PROVIDER
 Hours: M-TU
8:00AM-5:00PM
W 10:00AM-7:00PM
TH-F 8:00AM-5:00PM
SA 9:00AM-4:00PM
 Website: N/A


CERTIFIED NURSE




PRACTITIONER

MONTGOMERY JR, KEITH

Provider ID: 295284
Board Certified Specialty: No
KEITH MONTGOMERY JR JR

 1000 VALE TERRACE DR
VISTA, CA 92084
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000

Provider Gender: Male
NPI: 1790978617
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 6\999
American Sign Language (ASL):



N
 Accessibility: CONTACT
PROVIDER
 Hours: M-TU
8:00AM-5:00PM
W 10:00AM-7:00PM
TH-F 8:00AM-5:00PM
SA 9:00AM-4:00PM
 Website: N/A

CERTIFIED NURSE

PRACTITIONER



NICHOLAS, ESTELA

Provider ID: 239866
Board Certified Specialty: No
ESTELA M NICHOLAS

 1000 VALE TERRACE DR
VISTA, CA 92084
 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female
NPI: 1558384792

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Spanish

Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):



N
 Accessibility: CONTACT
PROVIDER
 Hours: M 8:00AM-5:00PM
TU-TH 8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM
 Website: N/A

CERTIFIED NURSE

PRACTITIONER

PRITZKER, JOELY

Provider ID: 239773
Board Certified Specialty: No
JOELY R PRITZKER

 1000 VALE TERRACE DR
VISTA, CA 92084
 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female
NPI: 1619384351

 Provider English Spoken: Y

D3. Directorio de proveedores especialistas

 *Provider Language(s)*
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 12\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*
8:00AM-5:00PM
SA 9:00AM-4:00PM

 *Website: N/A*

CERTIFIED NURSE


PRACTITIONER

SRILASAK, MICHELE

Provider ID: 281857

Board Certified Specialty: No
MICHELE SRILASAK

 910 SYCAMORE AVE STE
102
VISTA, CA 92081

 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800)*
926-8273

Provider Gender: Female

NPI: 1265487326


 *Provider English Spoken: Y*
Cultural Competency: N


Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*
8:00AM-5:00PM

 *Website: N/A*

CERTIFIED NURSE


PRACTITIONER

TAYLOR, CHRISTOPHER

Provider ID: 295507

Board Certified Specialty: No
CHRISTOPHER TAYLOR

 134 GRAPEVINE RD
VISTA, CA 92083

 *Phone: (760) 631-5000*
Fax: (760) 414-3892

 *After Hours Phone: (760)*
631-5000

Provider Gender: Male


NPI: 1851747166


 *Provider English Spoken: Y*
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 12\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*
8:00AM-2:00PM
SA 9:00AM-4:00PM

 *Website: N/A*


CERTIFIED NURSE


PRACTITIONER

TAYLOR, CHRISTOPHER

Provider ID: 295504

Board Certified Specialty: No
CHRISTOPHER TAYLOR

 105 DURIAN ST STE A
VISTA, CA 92083

 *Phone: (760) 631-5000*
Fax: (760) 414-3892

 *After Hours Phone: (760)*
631-5000

Provider Gender: Male

NPI: 1851747166


 *Provider English Spoken: Y*
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 12\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*
8:00AM-2:00PM
SA 9:00AM-4:00PM

 *Website: N/A*


CERTIFIED NURSE


PRACTITIONER

TAYLOR, CHRISTOPHER

Provider ID: 295502

Board Certified Specialty: No
CHRISTOPHER TAYLOR


 1000 VALE TERRACE DR
VISTA, CA 92084

 *Phone: (760) 631-5000*
Fax: (760) 414-3892

 *After Hours Phone: (760)*
631-5000

Provider Gender: Male

NPI: 1851747166


 *Provider English Spoken: Y*
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 12\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*
8:00AM-2:00PM
SA 9:00AM-4:00PM

 *Website: N/A*

CERTIFIED NURSE


D3. Directorio de proveedores especialistas


PRACTITIONER

YCASAS, EMILY

Provider ID: 298837

Board Certified Specialty: No
EMILY JO YCASAS

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1033841861


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-8:00PM

 Website: N/A


CERTIFIED REGISTERED NURSE MIDWIFE

GUIDI, CASEY

Provider ID: 303315

Board Certified Specialty: No
CASEY L GUIDI

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1013349919


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH
8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

 Website: N/A


CERTIFIED REGISTERED NURSE MIDWIFE

GUIDI, CASEY


Provider ID: 300224

Board Certified Specialty: No
CASEY L GUIDI

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1013349919


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 12\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH
8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

 Website: N/A


CHIROPRACTOR

CORTEZ, JAIME

Provider ID: 290483

Board Certified Specialty: No
CORTEZ, JAIME

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1508195348

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A


CHIROPRACTOR

JU, NATHANIEL

Provider ID: 290222

Board Certified Specialty: No
NATHANIEL JU

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000


Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Male

NPI: 1972883882



 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese

Cultural Competency: N

Medi-Cal Open Panel: Yes

D3. Directorio de proveedores especialistas

Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
 *Website: N/A*

CHIROPRACTOR

JU, NATHANIEL

Provider ID: 290220
Board Certified Specialty: No
NATHANIEL JU

 1000 VALE TERRACE DR
VISTA, CA 92084
 *Phone: (760) 631-5000*
Fax: (760) 414-3892
 *After Hours Phone: (760) 631-5000*




Provider Gender: Male
NPI: 1972883882
 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Chinese*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999


American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-TH 8:00AM-8:00PM F 9:00AM-5:00PM SA 9:00AM-4:00PM*
 *Website: N/A*




HOSPICE AND PALLIATIVE MEDICINE

RUBENZIK, TAMARA

Provider ID: 282128
Board Certified Specialty: No
TAMARA T RUBENZIK

 910 SYCAMORE AVE STE 102
VISTA, CA 92081
 *Phone: (619) 543-6397*
Fax: (888) 539-8781
 *After Hours Phone: (619) 543-6397*

Provider Gender: Female
NPI: 1811200652
 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999


American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*




INFECTIOUS DISEASE

HALPERIN, JASON

Provider ID: 296420
Board Certified Specialty: No
JASON I HALPERIN

 134 GRAPEVINE RD
VISTA, CA 92083
 *Phone: (760) 631-5000*
Fax: (760) 414-3892
 *After Hours Phone: (760) 631-5000*



Provider Gender: Male
NPI: 1952626228
 *Provider English Spoken: Y*
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999


American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M 8:00AM-5:00PM TU 10:30AM-7:30PM W-F 8:00AM-5:00PM*
 *Website: N/A*



INTERNAL MEDICINE

DAO, MARC


Provider ID: 297754
Board Certified Specialty: No
MARC DAO

 1000 VALE TERRACE DR
VISTA, CA 92084
 *Phone: (760) 631-5000*
Fax: (760) 414-3763

 *After Hours Phone: (760) 631-5000*
Provider Gender: Male
NPI: 1467542175

 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: French, Vietnamese*

Cultural Competency: N
Hospital Affiliation: PIONEERS MEMORIAL HOSPITAL, PALOMAR MEDICAL CENTER, SHARP MEMORIAL HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, EL CENTRO REGIONAL MEDICAL CENTER, PALOMAR HEALTH
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999

American Sign Language (ASL):
N
 *Accessibility: CONTACT*

D3. Directorio de proveedores especialistas

PROVIDER
Hours: M-TH
8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM
Website: N/A

INTERNAL MEDICINE

SHABANIAN, LEILA

Provider ID: 307216
Board Certified Specialty: No
LEILA SHABANIAN

134 GRAPEVINE RD
VISTA, CA 92083
Phone: (760) 631-5000
Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female
NPI: 1013963073

Provider English Spoken: Y
Provider Language(s)
Spoken: Farsi, French,
Persian

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, TRI CITY MEDICAL CTR,
PALOMAR HEALTH, SCRIPPS
MERCY HOSPITAL, PALOMAR
MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Hours: TU 10:30AM-7:30PM
F 8:00AM-5:00PM
Website: N/A

INTERNAL MEDICINE

SHABANIAN, LEILA

Provider ID: 307214
Board Certified Specialty: No
LEILA SHABANIAN

1000 VALE TERRACE DR
VISTA, CA 92084
Phone: (760) 631-5000
Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female
NPI: 1013963073

Provider English Spoken: Y
Provider Language(s)
Spoken: Farsi, French,
Persian

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, TRI CITY MEDICAL CTR,
PALOMAR HEALTH, SCRIPPS
MERCY HOSPITAL, PALOMAR
MEDICAL CENTER

Medi-Cal Open Panel: Yes
Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INTERNAL MEDICINE

SHABANIAN, LEILA

Provider ID: 306766
Board Certified Specialty: No
LEILA SHABANIAN

1000 VALE TERRACE DR
VISTA, CA 92084
Phone: (760) 631-5000
Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female
NPI: 1013963073

Provider English Spoken: Y
Provider Language(s)
Spoken: Farsi, French,
Persian

Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, TRI CITY MEDICAL CTR,
PALOMAR HEALTH, SCRIPPS
MERCY HOSPITAL, PALOMAR
MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

INTERVENTIONAL CARDIOLOGY

PARKS, MONICA

Provider ID: 302414
Board Certified Specialty: No
MONICA M PARKS

906 SYCAMORE AVE STE
104
VISTA, CA 92081

Phone: (760) 630-2550
Fax: (760) 726-2305

After Hours Phone: (760)
630-2550




Provider Gender: Female
NPI: 1740634971

Provider English Spoken: Y
Provider Language(s)

D3. Directorio de proveedores especialistas

Spoken: Spanish, Vietnamese
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, TRI CITY MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
 *Website: N/A*



OBSTETRICS / GYNECOLOGY

ARRIETA, IRIS

Provider ID: 290607
Board Certified Specialty: No
IRIS R ARRIETA

 1000 VALE TERRACE DR VISTA, CA 92084
 *Phone: (760) 631-5000*
Fax: (760) 414-3892
 *After Hours Phone: (760) 631-5000*

Provider Gender: Female
NPI: 1659614303


 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-TH 8:00AM-8:00PM F 9:00AM-5:00PM SA 9:00AM-4:00PM*


 *Website: N/A*

OBSTETRICS / GYNECOLOGY

BINDER, PRATIBHA


Provider ID: 282168
Board Certified Specialty: No
PRATIBHA S BINDER

 910 SYCAMORE AVE STE 102 VISTA, CA 92081

 *Phone: (800) 926-8273*
Fax: (888) 539-8781


 *After Hours Phone: (800) 926-8273*


Provider Gender: Female
NPI: 1174758031

 *Provider English Spoken: Y*
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8:00AM-5:00PM*

 *Website: N/A*


OBSTETRICS / GYNECOLOGY

FRANCIS, LARRY

Provider ID: 290292



Board Certified Specialty: No
LARRY N FRANCIS

 1000 VALE TERRACE DR VISTA, CA 92084

 *Phone: (760) 631-5000*
Fax: (760) 414-3892

 *After Hours Phone: (760) 631-5000*


Provider Gender: Male
NPI: 1215008552


 *Provider English Spoken: Y*
 *Provider Language(s) Spoken: Spanish*

Cultural Competency: N
Hospital Affiliation: SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SHARP MEMORIAL HOSPITAL, POMONA VALLEY HOSP MED CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 13\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-TH 9:00AM-8:00PM F 9:00AM-5:00PM SA 9:00AM-4:00PM*


 *Website: N/A*

OBSTETRICS / GYNECOLOGY

HAWKINS, MELISSA

Provider ID: 290596
Board Certified Specialty: No
MELISSA A HAWKINS

 1000 VALE TERRACE DR VISTA, CA 92084


 *Phone: (760) 631-5000*
Fax: (760) 414-3892

D3. Directorio de proveedores especialistas

 After Hours Phone: (760) 631-5000

Provider Gender: Female

NPI: 1851620447

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, PALOMAR

MEDICAL CENTER


Medi-Cal Open Panel: Yes

Min/Max Age: 16\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH

8:00AM-7:00PM

F 8:00AM-5:00PM

SA 9:00AM-4:00PM

 Website: N/A

OBSTETRICS / GYNECOLOGY


LEONARD, LISA

Provider ID: 290710

Board Certified Specialty: No

LISA A LEONARD

 1000 VALE TERRACE DR
VISTA, CA 92084


 Phone: (760) 631-5000


Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000

Provider Gender: Female

NPI: 1477588598

 Provider English Spoken: Y

 Provider Language(s)
Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, PALOMAR

MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL):  Website: N/A

N


 Accessibility: CONTACT PROVIDER

 Hours: M-TH

9:00AM-8:00PM

F 9:00AM-5:00PM

SA 9:00AM-4:00PM

 Website: N/A

OPTOMETRIST


GEE, JENNIFER

Provider ID: 290209

Board Certified Specialty: No

JENNIFER W GEE

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000

Provider Gender: Female

NPI: 1336589332

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:

COMMUNITY REGIONAL

MEDICAL CENTER-FRESNO,

CALIFORNIA PACIFIC


MEDICAL CENTER - D P APH


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M 8:00AM-5:00PM

TU 9:30AM-5:00PM

W 8:00AM-5:00PM

TH 10:00AM-7:00PM

F 8:00AM-5:00PM

SA 9:00AM-4:00PM

 Website: N/A

OPTOMETRIST


GEE, JENNIFER

Provider ID: 290208

Board Certified Specialty: No

JENNIFER W GEE

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000

Provider Gender: Female

NPI: 1336589332

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:

COMMUNITY REGIONAL

MEDICAL CENTER-FRESNO,

CALIFORNIA PACIFIC


MEDICAL CENTER - D P APH


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH

8:00AM-8:00PM

F 9:00AM-5:00PM

SA 9:00AM-4:00PM

 Website: N/A

OPTOMETRIST

GEE, JENNIFER

Provider ID: 273113

Board Certified Specialty: No

JENNIFER W GEE

 1000 VALE TERRACE DR

D3. Directorio de proveedores especialistas

VISTA, CA 92084
☎ Phone: (760) 631-5000
Fax: (760) 414-3892
🕒 After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1336589332
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
COMMUNITY REGIONAL
MEDICAL CENTER-FRESNO,
CALIFORNIA PACIFIC
MEDICAL CENTER - D P APH
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-TH
8:00AM-8:00PM
F 9:00AM-5:00PM
SA 9:00AM-4:00PM
🌐 Website: N/A

OPTOMETRIST

GEE, JENNIFER

Provider ID: 273114
Board Certified Specialty: No
JENNIFER W GEE
📍 134 GRAPEVINE RD
VISTA, CA 92083
☎ Phone: (760) 631-5000
Fax: (760) 414-3892
🕒 After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1336589332
🗣 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:

COMMUNITY REGIONAL
MEDICAL CENTER-FRESNO,
CALIFORNIA PACIFIC
MEDICAL CENTER - D P APH
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M 8:00AM-5:00PM
TU 9:30AM-5:00PM
W 8:00AM-5:00PM
TH 10:00AM-7:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM
🌐 Website: N/A

OPTOMETRIST

KIM, MICHAEL

Provider ID: 290697
Board Certified Specialty: No
MICHAEL S KIM
📍 134 GRAPEVINE RD
VISTA, CA 92083
☎ Phone: (760) 631-5000
Fax: (760) 414-3892
🕒 After Hours Phone: (760) 631-5000
Provider Gender: Male
NPI: 1164546313
🗣 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-W
8:00AM-5:00PM
TH 10:30AM-7:30PM

F 8:00AM-5:00PM
🌐 Website: N/A

OPTOMETRIST

KIM, MICHAEL

Provider ID: 245239
Board Certified Specialty: No
MICHAEL S KIM
📍 134 GRAPEVINE RD
VISTA, CA 92083
☎ Phone: (760) 631-5000
Fax: (760) 414-3892
🕒 After Hours Phone: (760) 631-5000
Provider Gender: Male
NPI: 1164546313
🗣 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-W
8:00AM-5:00PM
TH 10:30AM-7:30PM
F 8:00AM-5:00PM
🌐 Website: N/A

OPTOMETRIST

KIM, MICHAEL

Provider ID: 290903
Board Certified Specialty: No
MICHAEL S KIM
📍 1000 VALE TERRACE DR
VISTA, CA 92084
☎ Phone: (760) 631-5000
Fax: (760) 414-3892
🕒 After Hours Phone: (760) 631-5000
Provider Gender: Male

D3. Directorio de proveedores especialistas


NPI: 1164546313


 Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 8:00AM-5:00PM
M-F 8:00AM-5:00PM

 Website: N/A


OPTOMETRIST

MORA, WENDY

Provider ID: 290236

Board Certified Specialty: No
WENDY A MORA

 1000 VALE TERRACE DR
VISTA, CA 92084


 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1376958389

 Provider English Spoken: Y


 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH
9:00AM-8:00PM
F 9:00AM-5:00PM
SA 9:00AM-4:00PM

 Website: N/A


OPTOMETRIST

MORA, WENDY

Provider ID: 290238

Board Certified Specialty: No
WENDY A MORA

 134 GRAPEVINE RD
VISTA, CA 92083


 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1376958389

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Website: N/A


OPTOMETRIST

MORA, WENDY

Provider ID: 242634

Board Certified Specialty: No
WENDY A MORA

 1000 VALE TERRACE DR
VISTA, CA 92084


 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1376958389

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-TH
9:00AM-8:00PM
F 9:00AM-5:00PM
SA 9:00AM-4:00PM

 Website: N/A


OPTOMETRIST

TAM, EMILY

Provider ID: 277978

Board Certified Specialty: No
EMILY TAM

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000


Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1497161236

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Chinese, Mandarin,
Yue Chinese


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: SU 9:00AM-4:00PM
M-TH 8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

 Website: N/A

D3. Directorio de proveedores especialistas

OPTOMETRIST

TAM, EMILY

Provider ID: 290316

Board Certified Specialty: No

EMILY TAM

134 GRAPEVINE RD
VISTA, CA 92083

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1497161236

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese, Mandarin,
Yue Chinese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Website: N/A

OPTOMETRIST

TAM, EMILY

Provider ID: 290315

Board Certified Specialty: No

EMILY TAM

1000 VALE TERRACE DR
VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1497161236

Provider English Spoken: Y

Provider Language(s)
Spoken: Chinese, Mandarin,

Yue Chinese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: SU 9:00AM-4:00PM
M-TH 8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

Website: N/A

OPTOMETRIST

TRAN, JESSICA

Provider ID: 303729

Board Certified Specialty: No

JESSICA A TRAN

1000 VALE TERRACE DR
VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1457922957

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 5\21

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM

Website: N/A

OPTOMETRIST

TRAN, JESSICA

Provider ID: 304595

Board Certified Specialty: No

JESSICA A TRAN

1000 VALE TERRACE DR
VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1457922957

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM

Website: N/A

OPTOMETRIST

TRAN, JESSICA

Provider ID: 304596

Board Certified Specialty: No

JESSICA A TRAN

134 GRAPEVINE RD
VISTA, CA 92083

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1457922957

Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

D3. Directorio de proveedores especialistas

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM

 Website: N/A

OPTOMETRIST


TRAN, JESSICA

Provider ID: 303733

Board Certified Specialty: No

JESSICA A TRAN

 134 GRAPEVINE RD
VISTA, CA 92083

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1457922957


 Provider English Spoken: Y
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 5\21

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM

 Website: N/A


PEDIATRICS

RAHIMI, NASSRIN


Provider ID: 257581

Board Certified Specialty: No
NASSRIN RAHIMI

 1000 VALE TERRACE DR
VISTA, CA 92084


 Phone: (760) 631-5000


Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1063438166

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Farsi, Persian

Cultural Competency: N

Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH
8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

 Website: N/A

PHYSICIANS ASSISTANT


WALLACE, STEPHANIE

Provider ID: 239770


Board Certified Specialty: No

STEPHANIE C WALLACE

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (888)
216-8482

Provider Gender: Female

NPI: 1518104942

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR

MEDICAL CENTER


Medi-Cal Open Panel: Yes


Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M 8:00AM-5:00PM
TU-TH 8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

 Website: N/A

PODIATRIST


MILLER, JULIE

Provider ID: 290666

Board Certified Specialty: No

MILLER, JULIE ANN

 1000 VALE TERRACE DR
VISTA, CA 92084

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

Provider Gender: Female

NPI: 1619115664

 Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL

ENCINITAS, TRI CITY MEDICAL
CTR, SOUTHWEST


HEALTHCARE INLAND VALLEY
HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999


American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH

D3. Directorio de proveedores especialistas

8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM
 Website: N/A


PODIATRIST

MILLER, JULIE

Provider ID: 305464
Board Certified Specialty: No
MILLER, JULIE ANN



 134 GRAPEVINE RD
VISTA, CA 92083
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000

Provider Gender: Female
NPI: 1619115664

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL
ENCINITAS, TRI CITY MEDICAL
CTR, SOUTHWEST
HEALTHCARE INLAND VALLEY
HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N



 Accessibility: CONTACT
PROVIDER
 Website: N/A

REGISTERED PHYSICAL THERAPIST


AMBROSE, CHRISTOPHER

Provider ID: 248009
Board Certified Specialty: No
CHRISTOPHER S AMBROSE



 2067 W VISTA WAY STE 185

VISTA, CA 92083
 Phone: (760) 631-5888
Fax: (760) 631-5880
 After Hours Phone: (760)
591-7750

Provider Gender: Male
NPI: 1114977535

 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 8\125

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER
 Hours: M 7:00AM-7:00PM
TU 7:00AM-5:00PM
W 7:00AM-7:00PM
TH 7:00AM-5:00PM
F 7:00AM-7:00PM

 Website: N/A

RHEUMATOLOGY



ALNAHLAWI, BASMA

Provider ID: 306869
Board Certified Specialty: No
BASMA ALNAHLAWI

 2095 W VISTA WAY STE 216
VISTA, CA 92083
 Phone: (760) 736-8091
Fax: (760) 736-8092

 After Hours Phone: (760)
736-8091


Provider Gender: Female
NPI: 1144455262

 Provider English Spoken: Y
 Provider Language(s)
Spoken: Arabic

Cultural Competency: N
Hospital Affiliation: LOMA
LINDA UNIVERSITY MED CTR
MURRIETA, PALOMAR

MEDICAL CENTER, LOMA
LINDA UNIVERSITY MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Hours: M-F
9:00AM-5:00PM


 Website: N/A

SURGERY GENERAL

ARMANI, AVA


Provider ID: 282144
Board Certified Specialty: No
AVA ARMANI

 910 SYCAMORE AVE STE
102
VISTA, CA 92081


 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273



Provider Gender: Female
NPI: 1861759383

 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSF
MEDICAL CENTER, UCSF
Medical Center At Mission Bay,
UCSF MEDICAL CENTER AT
MOUNT ZION, UCSD LA JOLLA
JOHN SALLY THORNTON,
UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

D3. Directorio de proveedores especialistas


 Hours: M-F
8:00AM-5:00PM
 Website: N/A

SURGERY GENERAL

GROVE, JAY

Provider ID: 245227
Board Certified Specialty: No
JAY R GROVE


 2385 S MELROSE DR
VISTA, CA 92081

 Phone: (760) 300-3647
Fax: (760) 482-1316

 After Hours Phone: (760)
300-3647

Provider Gender: Male

NPI: 1912971334

 Provider English Spoken: Y

 Provider Language(s)
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR

HEALTH, PALOMAR MEDICAL

CENTER, TRI CITY MEDICAL

CTR, SCRIPPS MEMORIAL

HOSPITAL ENCINITAS,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS MERCY


HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

WILDOMAR

ANESTHESIOLOGY


HYLTON, DIANA


Provider ID: 241737

Board Certified Specialty: No

DIANA J HYLTON


 36485 INLAND VALLEY DR
WILDOMAR, CA 92595

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

Provider Gender: Female

NPI: 1932527751

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, SOUTHWEST

HEALTHCARE INLAND VALLEY

HOSPITAL, SOUTHWEST

HEALTHCARE RANCHO

SPRINGS HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

ANESTHESIOLOGY


KRAUSE, MARTIN

Provider ID: 287654

Board Certified Specialty: No

MARTIN KRAUSE

 36485 INLAND VALLEY DR
WILDOMAR, CA 92595

 Phone: (951) 677-1111

Fax: (951) 677-9757

 After Hours Phone: (951)

677-1111

Provider Gender: Male

NPI: 1417243239

 Provider English Spoken: Y

 Provider Language(s)
Spoken: German

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA


JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: N/A

EMERGENCY MEDICINE


LI, JINGHONG


Provider ID: 255940

Board Certified Specialty: No

JINGHONG LI

 36485 INLAND VALLEY DR
WILDOMAR, CA 92595

 Phone: (951) 677-1111

 After Hours Phone: (951)
677-1111

Provider Gender: Female

NPI: 1619014479

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes


Min/Max Age: 18\999

American Sign Language (ASL):

N

D3. Directorio de proveedores especialistas

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*


PULMONARY DISEASES

KUMAR, AVNEE

Provider ID: 300013

*Board Certified Specialty: No
AVNEE J KUMAR*

 *36485 INLAND VALLEY DR
WILDOMAR, CA 92595*

 *Phone: (951) 677-1111*

Fax: (951) 677-9757

 *After Hours Phone: (951)
677-1111*

Provider Gender: Female

NPI: 1750745394

 *Provider English Spoken: Y
Cultural Competency: N*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*


PULMONARY DISEASES

SURI, RAJAT

Provider ID: 283349

*Board Certified Specialty: No
RAJAT SURI*

 *36485 INLAND VALLEY DR
WILDOMAR, CA 92595*

 *Phone: (951) 677-1111*

Fax: (951) 677-9757

 *After Hours Phone: (951)
677-1111*

Provider Gender: Male

NPI: 1144615337

 *Provider English Spoken: Y
Cultural Competency: N*


*Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON*

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

 *Website: N/A*

D4. Directorio de hospitales: hospital general de atención aguda

LA MESA

GROSSMONT HOSPITAL

Provider ID: 170046

5555 GROSSMONT
CENTER DR
LA MESA, CA 91942

Phone: (619) 740-6000

After Hours Phone: (619)
740-6000

Accepting New Patients: No
Min/Max Age: 0\150

Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:
JCAHO

Hours: 24 Hours / 7
days/week

License Number: 080000006
NPI: 1528041811

Website: www.sharp.com/hospitals/grossmont/

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Birthing Friendly: Y

SAN DIEGO

KINDRED HOSPITAL SAN DIEGO

Provider ID: 169663

1940 EL CAJON BLVD
SAN DIEGO, CA 92104

Phone: (619) 543-4500

After Hours Phone: (619)
543-4500

Accepting New Patients: No
Min/Max Age: 0\150

Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:

JCAHO

Hours: 24 Hours / 7
days/week

License Number: N/A

NPI: 1992880512

Website: N/A

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

POWAY

PALOMAR HEALTH

Provider ID: 170052

15615 POMERADO RD
POWAY, CA 92064

Phone: (858) 613-4000

After Hours Phone: (858)
613-4000

Accepting New Patients: No
Min/Max Age: 0\150

Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:
JCAHO

Hours: 24 Hours / 7
days/week

License Number: 080000127
NPI: 1376513754

Website: www.palomarhealth.org/facilities/palomar-poway-outpatient

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Birthing Friendly: Y

ESCONDIDO

PALOMAR MEDICAL CENTER

Provider ID: 173011

2185 CITRACADO PKWY
ESCONDIDO, CA 92029

Phone: (442) 281-5000

After Hours Phone: (442)
281-5000

Accepting New Patients: No
Min/Max Age: 0\150

Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:
JCAHO

Hours: 24 Hours / 7
days/week

License Number: 080000083
NPI: 1457321317

Website: www.palomarhealth.org/facilities/palomar-medical-center

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

NATIONAL CITY

PARADISE VALLEY HOSPITAL

Provider ID: 170057

2400 E 4TH ST
NATIONAL CITY, CA 91950

Phone: (619) 470-4321

After Hours Phone: (619)
470-4321

Accepting New Patients: No
Min/Max Age: 0\150

Site English Spoken: Y
Cultural Competency: N


Hospital Accreditation Status:
JCAHO

Hours: 24 Hours / 7
days/week

License Number: N/A
NPI: 1356410351





Website: www.paradisevall

D4. Directorio de hospitales: hospital general de atención aguda

eyhospital.net
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER




SAN DIEGO





RADY CHILDRENS HOSPITAL SAN DIEGO

Provider ID: 171083
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 576-1700
 After Hours Phone: (858)
576-1700
Accepting New Patients: No
Min/Max Age: 0\150
 Site English Spoken: Y
Cultural Competency: N
Hospital Accreditation Status:
 Hours: 24 Hours / 7
days/week
License Number: N/A
NPI: 1710065933
 Website: www.rchsd.org
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

LA JOLLA

SCRIPPS GREEN HOSPITAL

Provider ID: 171084
 10666 N TORREY PINES RD
MS 220
LA JOLLA, CA 92037
 Phone: (858) 455-9100
 After Hours Phone: (858)
455-9100
Accepting New Patients: No
Min/Max Age: 0\150

 Site English Spoken: Y
Cultural Competency: N
Hospital Accreditation Status:
JCAHO
 Hours: 24 Hours / 7
days/week
License Number: 080000139
NPI: 1841233780
 Website: www.scripps.org/l
ocations/hospitals__scripp
s- green- hospital
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

SCRIPPS MEMORIAL HOSPITAL

Provider ID: 170045
 9888 GENESEE AVE
LA JOLLA, CA 92037
 Phone: (800) 727-4777
 After Hours Phone: (800)
727-4777
Accepting New Patients: No
Min/Max Age: 0\150
 Site English Spoken: Y
Cultural Competency: N
Hospital Accreditation Status:
 Hours: 24 Hours / 7
days/week
License Number: 080000050
NPI: 1841277704
 Website: www.scripps.org/l
ocations/hospitals__scripp
s- memorial- hospital- la- j
olla
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Birthing Friendly: Y





ENCINITAS

SCRIPPS MEMORIAL HOSPITAL ENCINITAS

Provider ID: 170305
 354 SANTA FE DR
ENCINITAS, CA 92024
 Phone: (760) 753-6501
 After Hours Phone: (760)
753-6501
Accepting New Patients: No
Min/Max Age: 0\150
 Site English Spoken: Y
Cultural Competency: N
Hospital Accreditation Status:
JCAHO
 Hours: 24 Hours / 7
days/week
License Number: 080000148
NPI: 1700829199
 Website: www.scripps.org/l
ocations/hospitals__scripp
s- memorial- hospital- enci
nitas
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Birthing Friendly: Y

SAN DIEGO

SCRIPPS MERCY HOSPITAL

Provider ID: 170048
 4077 5TH AVE
SAN DIEGO, CA 92103
 Phone: (619) 294-8111
 After Hours Phone: (619)
294-8111
Accepting New Patients: No
Min/Max Age: 0\150
 Site English Spoken: Y

D4. Directorio de hospitales: hospital general de atención aguda

Cultural Competency: N
Hospital Accreditation Status:
JCAHO
🕒 *Hours:* 24 Hours / 7
days/week
License Number: N/A
NPI: 1659359446

🌐 *Website:* www.scripps.org/locations/hospitals__scripps-mercy-hospital__scripps-mercy-hospital-san-diego

American Sign Language (ASL):
N

♿ *Accessibility:* CONTACT
PROVIDER

Birthing Friendly: Y

CHULA VISTA

SCRIPPS MERCY HOSPITAL CHULA VISTA

Provider ID: 170256

📍 435 H ST
CHULA VISTA, CA 91910

☎ *Phone:* (619) 691-7000

🕒 *After Hours Phone:* (619)
691-7000

Accepting New Patients: No
Min/Max Age: 0\150

📄 *Site English Spoken:* Y
Cultural Competency: N

Hospital Accreditation Status:
JCAHO

🕒 *Hours:* 24 Hours / 7
days/week

License Number: 090000074

NPI: 1659359446

🌐 *Website:* www.scripps.org/locations/hospitals__scripps-mercy-hospital__scripps-mercy-hospital-chula-vista

American Sign Language (ASL):
N
♿ *Accessibility:* CONTACT
PROVIDER

SAN DIEGO

SELECT SPECIALTY HOSPITAL SAN DIEGO

Provider ID: 170165

📍 555 WASHINGTON ST
SAN DIEGO, CA 92103

☎ *Phone:* (619) 260-8300

🕒 *After Hours Phone:* (619)
260-8300

Accepting New Patients: No
Min/Max Age: 0\150

📄 *Site English Spoken:* Y
Cultural Competency: N

Hospital Accreditation Status:
JCAHO

🕒 *Hours:* 24 Hours / 7
days/week

License Number: 090000404

NPI: 1639172133

🌐 *Website:* N/A

American Sign Language (ASL):
N

♿ *Accessibility:* CONTACT
PROVIDER

CHULA VISTA

SHARP CHULA VISTA MED CTR

Provider ID: 170251

📍 751 MEDICAL CENTER CT
CHULA VISTA, CA 91911

☎ *Phone:* (619) 502-5800

🕒 *After Hours Phone:* (619)
502-5800

Accepting New Patients: No
Min/Max Age: 0\150

📄 *Site English Spoken:* Y

Cultural Competency: N
Hospital Accreditation Status:
JCAHO
🕒 *Hours:* 24 Hours / 7
days/week

License Number: 090000008

NPI: 1396728630

🌐 *Website:* www.sharp.com/hospitals/chula-vista/

American Sign Language (ASL):
N

♿ *Accessibility:* CONTACT
PROVIDER

Birthing Friendly: Y

CORONADO

SHARP CORONADO HOSP AND HEALTHCARE CTR

Provider ID: 170252

📍 250 PROSPECT PL
CORONADO, CA 92118

☎ *Phone:* (619) 522-3600

🕒 *After Hours Phone:* (619)
522-3600

Accepting New Patients: No
Min/Max Age: 0\150

📄 *Site English Spoken:* Y
Cultural Competency: N

Hospital Accreditation Status:
JCAHO

🕒 *Hours:* 24 Hours / 7
days/week

License Number: N/A

NPI: 1154304475

🌐 *Website:* www.sharp.com/hospitals/coronado/

American Sign Language (ASL):
N

♿ *Accessibility:* CONTACT
PROVIDER

D4. Directorio de hospitales: hospital general de atención aguda

SAN DIEGO

SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS

Provider ID: 170054

3003 HEALTH CENTER DR
SAN DIEGO, CA 92123

Phone: (858) 939-3400

After Hours Phone: (858)
939-3400

Accepting New Patients: No
Min/Max Age: 0\150

Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:

Hours: 24 Hours / 7
days/week

License Number: 080000039

NPI: 1407839921

Website: www.sharp.com

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

SHARP MEMORIAL HOSPITAL

Provider ID: 170047

7901 FROST ST
SAN DIEGO, CA 92123

Phone: (858) 939-3400

After Hours Phone: (858)
939-3400

Accepting New Patients: No
Min/Max Age: 0\150

Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:

Hours: 24 Hours / 7
days/week

License Number: N/A

NPI: 1407839921

Website: www.sharp.com/h

ospitals/memorial/

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Birthing Friendly: Y

OCEANSIDE

TRI CITY MEDICAL CTR

Provider ID: 170049

4002 VISTA WAY
OCEANSIDE, CA 92056

Phone: (760) 724-8411

After Hours Phone: (760)
724-8411

Accepting New Patients: No
Min/Max Age: 0\150

Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:

Hours: 24 Hours / 7
days/week

License Number: N/A

NPI: 1801861190

Website: www.tricitymed.org

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Birthing Friendly: Y

SAN DIEGO

UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER

Provider ID: 685221

6655 ALVARADO RD
SAN DIEGO, CA 92120

Accepting New Patients: No
Min/Max Age: 0\150

Site English Spoken: Y

Cultural Competency: N

Hospital Accreditation Status:
JCAHO

Hours: 24 Hours / 7
days/week

License Number: 090000013

NPI: 1184722779

Website: N/A

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER

Provider ID: 685221

6655 ALVARADO RD
SAN DIEGO, CA 92120

Accepting New Patients: No
Min/Max Age: 0\150

Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:
JCAHO

Hours: 24 Hours / 7
days/week

License Number: 090000101

NPI: 1184722779

Website: N/A

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER


LA JOLLA


UCSD LA JOLLA JOHN SALLY THORNTON

Provider ID: 170053

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

D4. Directorio de hospitales: hospital general de atención aguda

 Phone: (858) 657-7000 *Birthing Friendly: Y*

 After Hours Phone: (858)
657-7000


Accepting New Patients: No

Min/Max Age: 0\150

 Site English Spoken: Y

Cultural Competency: N

Hospital Accreditation Status:

 Hours: 24 Hours / 7
days/week


License Number: 090000101

NPI: 1497021265

 Website: N/A

American Sign Language (ASL):

N


 Accessibility: CONTACT
PROVIDER


SAN DIEGO

UCSD MEDICAL CTR

Provider ID: 170051

 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (619) 543-6222

 After Hours Phone: (619)
543-6222


Accepting New Patients: No

Min/Max Age: 0\150

 Site English Spoken: Y


Cultural Competency: N

Hospital Accreditation Status:

 Hours: 24 Hours / 7
days/week

License Number: 090000101

NPI: 1184722779

 Website: <https://health.ucsd.edu/locations/pages/hillcrest.aspx>

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


D5. Proveedores de apoyo y servicios a largo plazo (LTSS)

I. Atención a largo plazo (LTC) y centro de enfermería especializada (SNF)


CARLSBAD

N

 Accessibility: CONTACT PROVIDER

 Website: www.sharp.com/hospitals/coronado/departments/long-term-care.cfm


Credentials and/or certifications:


 Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

LA COSTA HOUSE

Provider ID: 662923

 6433 FLAMENCO ST
CARLSBAD, CA 92009

 Phone: (760) 721-1706

Fax: (760) 721-9872

 After Hours Phone: (760) 721-1706

Accepting New Patients: No

NPI: 1962488007

 Website: N/A

Credentials and/or certifications:

 Site English Spoken: Y
Cultural Competency: N


American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

SOUTH BAY POST ACUTE CARE

Provider ID: 394308


 553 F ST
CHULA VISTA, CA 91910

 Phone: (619) 426-8611

Fax: (619) 240-7378

 After Hours Phone: (619) 426-8611

Accepting New Patients: No

 Hours: M-F
9:00AM-5:30PM

NPI: 1376946277

 Website: <http://southbaypostacute.com>

Credentials and/or certifications:

 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish, Filipino, Pilipino
Cultural Competency: N

American Sign Language (ASL): N

N


 Accessibility: CONTACT PROVIDER

EL CAJON

AVOCADO POST ACUTE

Provider ID: 171985

 510 E WASHINGTON AVE
EL CAJON, CA 92020

 Phone: (619) 440-1211


Fax: (619) 956-3929

 After Hours Phone: (619) 440-1211

Accepting New Patients: No
NPI: 1568484517

 Website: www.avocadopostacute.com

Credentials and/or certifications:

 Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER

CHULA VISTA

BIRCH PATRICK CONV CTR

Provider ID: 171998

 751 MEDICAL CENTER CT
CHULA VISTA, CA 91911


 Phone: (619) 502-3600

Fax: (619) 502-5835

 After Hours Phone: (619) 502-3600

Accepting New Patients: No

NPI: 1538142369

 Website: www.sharp.com/hospitals/chula-vista/departments/skilled-nursing.cfm

Credentials and/or certifications:

 Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):


CORONADO

VILLA CORONADO

CONVALESCENT

Provider ID: 172644

 233 PROSPECT PL
CORONADO, CA 92118

 Phone: (619) 552-3900

Fax: (619) 522-3939


 After Hours Phone: (619) 552-3900

Accepting New Patients: No
NPI: 1184607418

COTTONWOOD CANYON HEALTHCARE CENTER

Provider ID: 171983

 1391 E MADISON AVE
EL CAJON, CA 92021

 Phone: (619) 444-1107

D5. Proveedores de apoyo y servicios a largo plazo (LTSS)

I. Atención a largo plazo (LTC) y centro de enfermería especializada (SNF)

Fax: (619) 444-1403

☎ After Hours Phone: (619) 444-1107

Accepting New Patients: No

NPI: 1013953199

🌐 Website: <http://cottonwoodcanyonhc.com>

Credentials and/or certifications:

☐ Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

COUNTRY HILLS HEALTH CARE CENTER

Provider ID: 416853

📍 1580 BROADWAY
EL CAJON, CA 92021

☎ Phone: (619) 441-8745

☎ After Hours Phone: (619) 441-8745

Accepting New Patients: No

NPI: 1700973963

🌐 Website: www.countryhills.com

Credentials and/or certifications:

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: American Sign Language, Arabic, Korean, Spanish, Tagalog, Farsi, Vietnamese, Mandarin

Cultural Competency: N

American Sign Language (ASL):

Y

♿ Accessibility: CONTACT PROVIDER

COUNTRY HILLS POST ACUTE

Provider ID: 503510

📍 1580 BROADWAY
EL CAJON, CA 92021

☎ Phone: (619) 441-8745

Fax: (619) 441-9029

☎ After Hours Phone: (619) 441-8745

Accepting New Patients: No

NPI: 1063974285

🌐 Website: N/A

Credentials and/or certifications:

☐ Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

GRANITE HILLS HEALTHCARE AND WELLNESS CENTRE LLC

Provider ID: 286282

📍 1340 E MADISON AVE
EL CAJON, CA 92021

☎ Phone: (619) 447-1020

Fax: (619) 447-1024

☎ After Hours Phone: (619) 447-1020

Accepting New Patients: No

NPI: 1346516937

🌐 Website: N/A

Credentials and/or certifications:

☐ Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

KASEY'S HOME

Provider ID: 674600

📍 1164 CRYSTAL LN
EL CAJON, CA 92020

☎ Phone: (619) 465-8010

Fax: (619) 465-8348

☎ After Hours Phone: (619) 465-8010

Accepting New Patients: No

🕒 Hours: M-F
8:00AM-5:00PM

NPI: 1639392079

🌐 Website: N/A

Credentials and/or certifications:

☐ Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

MAGNOLIA POST ACUTE CARE

Provider ID: 380518

📍 635 S MAGNOLIA AVE
EL CAJON, CA 92020

☎ Phone: (616) 442-8826

Fax: (619) 442-0288

☎ After Hours Phone: (616) 442-8826

Accepting New Patients: No

NPI: 1316340227

🌐 Website: N/A

Credentials and/or certifications:

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Spanish, Tagalog

Cultural Competency: N

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

D5. Proveedores de apoyo y servicios a largo plazo (LTSS)

I. Atención a largo plazo (LTC) y centro de enfermería especializada (SNF)

PARKSIDE HEALTH AND WELLNESS CENTER

Provider ID: 349923

444 W LEXINGTON AVE
EL CAJON, CA 92020

Phone: (619) 442-7744

After Hours Phone: (619)
442-7744

Accepting New Patients: No

NPI: 1447653340

Website: <http://parksidehealth.net>

Credentials and/or
certifications:

Site English Spoken: Y

Site Language(s) Spoken:
Spanish, Tagalog

Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

SAN DIEGO POST ACUTE CENTER

Provider ID: 173508

1201 S ORANGE AVE
EL CAJON, CA 92020

Phone: (619) 441-1988

Fax: (619) 441-7416

After Hours Phone: (619)
441-1988

Accepting New Patients: No

NPI: 1285061085

Website: <http://sdpostacute.com>

Credentials and/or
certifications:

Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

SOMERSET SUBACUTE AND CARE

Provider ID: 348526

151 CLAYDELLE AVE
EL CAJON, CA 92020

Phone: (619) 442-0245

Fax: (614) 423-3631

After Hours Phone: (619)
442-0245

Accepting New Patients: No

NPI: 1073916987

Website: <http://somensetsubacute.com>

Credentials and/or
certifications:

Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

VICTORIA POST ACUTE CARE

Provider ID: 387720

654 S ANZA ST
EL CAJON, CA 92020

Phone: (619) 440-5005

After Hours Phone: (619)
440-5005

Accepting New Patients: No

NPI: 1326441239

Website: <http://victoriapostacute.com>

Credentials and/or
certifications:

Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

VICTORIA POST ACUTE CARE

Provider ID: 387720

654 S ANZA ST
EL CAJON, CA 92020

Phone: (619) 440-5005

After Hours Phone: (619)
440-5005

Accepting New Patients: No

NPI: 1326441239

Website: www.VICTORIAPOSTACUTE.com

Credentials and/or
certifications:

Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

VILLA LAS PALMAS HEALTHCARE CTR

Provider ID: 172020

622 S ANZA ST
EL CAJON, CA 92020

Phone: (619) 442-0544

After Hours Phone: (619)
442-0544

Accepting New Patients: No

NPI: 1023048295

Website: <http://villalaspalmascares.com>

Credentials and/or
certifications:

Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):

D5. Proveedores de apoyo y servicios a largo plazo (LTSS)

I. Atención a largo plazo (LTC) y centro de enfermería especializada (SNF)


 *Accessibility: CONTACT PROVIDER*


ENCINITAS

AVIARA HEALTHCARE CENTER

Provider ID: 171995

 944 REGAL RD
ENCINITAS, CA 92024

 *Phone: (760) 944-0331*

 *After Hours Phone: (760) 944-0331*

Accepting New Patients: No


NPI: 1518146620

 *Website: <http://aviarahealthcare.com>*

Credentials and/or

certifications:


 *Site English Spoken: Y*

 *Site Languages(s) Spoken: Tagalog, Spanish*

Cultural Competency: N

American Sign Language (ASL):


N

 *Accessibility: CONTACT PROVIDER*


ENCINITAS NURSING AND REHAB CTR

Provider ID: 171977


 900 SANTA FE DR
ENCINITAS, CA 92024

 *Phone: (760) 753-6423*

Fax: (760) 753-4979

 *After Hours Phone: (760) 753-6423*

Accepting New Patients: No

 *Hours: M-F
8:00AM-5:00PM*


NPI: 1265415749

 *Website: www.covenantcare.com*

Credentials and/or

certifications:

 *Site English Spoken: Y*

 *Site Languages(s) Spoken: Spanish*

Cultural Competency: N

American Sign Language (ASL):


N

 *Accessibility: CONTACT PROVIDER*

THE DORTHY AND JOSEPH GOLDBERG HEALTHCARE CENTER

Provider ID: 172000


 211 SAXONY RD
ENCINITAS, CA 92024

 *Phone: (760) 632-0081*

Fax: (760) 516-2016

 *After Hours Phone: (760) 632-0081*

Accepting New Patients: No

 *Hours: M-F
7:00AM-4:00PM*

NPI: 1659482032

 *Website: N/A*

Credentials and/or

certifications:

 *Site English Spoken: Y*

Cultural Competency: N

American Sign Language (ASL):

N


 *Accessibility: CONTACT PROVIDER*

ESCONDIDO

ESCONDIDO CARE CENTER

Provider ID: 172027


 421 E MISSION AVE
ESCONDIDO, CA 92025

 *Phone: (760) 747-0430*

Fax: (760) 747-0569

 *After Hours Phone: (760) 747-0430*

Accepting New Patients: No

 *Hours: M-F
8:00AM-4:30PM*


NPI: 1588660765

 *Website: <http://escondidopostacute.com>*

Credentials and/or

certifications:

 *Site English Spoken: Y*

 *Site Languages(s) Spoken: Tagalog, Spanish*

Cultural Competency: N

American Sign Language (ASL):


N


 *Accessibility: CONTACT PROVIDER*

LIFE CARE CENTER OF ESCONDIDO

Provider ID: 172010

 1980 FELICITA RD
ESCONDIDO, CA 92025

 *Phone: (760) 741-6109*

 *After Hours Phone: (760) 741-6109*

Accepting New Patients: No

NPI: 1386681286

 *Website: <http://lifecarecentroescondido.com>*

Credentials and/or

certifications:

 *Site English Spoken: Y*

Cultural Competency: N

American Sign Language (ASL):

N




 *Accessibility: CONTACT PROVIDER*

PALOMAR HEIGHTS CARE CTR


Provider ID: 170055



D5. Proveedores de apoyo y servicios a largo plazo (LTSS)

I. Atención a largo plazo (LTC) y centro de enfermería especializada (SNF)


 1260 E OHIO AVE
ESCONDIDO, CA 92027
 Phone: (760) 746-1100
 After Hours Phone: (760)
746-1100

Accepting New Patients: No
NPI: 1255337440

 Website: <http://palomarheightsrehab.com>
Credentials and/or
certifications:



 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish, Tagalog


Cultural Competency: N
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


PALOMAR VISTA HEALTHCARE CTR

Provider ID: 171988

 201 N FIG ST
ESCONDIDO, CA 92025
 Phone: (760) 746-0303
Fax: (760) 738-1749

 After Hours Phone: (760)
746-0303


Accepting New Patients: No
NPI: 1861491490

 Website: <http://palomarvista.com>

Credentials and/or
certifications:



 Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

VALLE VISTA POST ACUTE


Provider ID: 171968

 1025 W 2ND AVE
ESCONDIDO, CA 92025
 Phone: (760) 745-1842


Fax: (760) 745-4346

 After Hours Phone: (760)
745-1842

Accepting New Patients: No

 Hours: M-F
8:00AM-5:00PM

NPI: 1659369262

 Website: www.covenantcare.com

Credentials and/or
certifications:

 Site English Spoken: Y
Cultural Competency: N



American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

FALLBROOK

FALLBROOK SKILLED NURSING


Provider ID: 298744

 325 POTTER ST
FALLBROOK, CA 92028
 Phone: (760) 728-2330

Fax: (909) 863-4644

 After Hours Phone: (760)
728-2330

Accepting New Patients: No


 Hours: M-F
8:00AM-5:00PM

NPI: 1265823264

 Website: www.progressivecarecenters.com

Credentials and/or
certifications:

 Site English Spoken: Y

 Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: N


American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

VIA RIO HOUSE

Provider ID: 662930


 1262 VIA ENCINOS DR
FALLBROOK, CA 92028

 Phone: (760) 547-1976

Fax: (760) 721-9872

 After Hours Phone: (760)
547-1976

Accepting New Patients: No
NPI: 1962488007

 Website: N/A
Credentials and/or
certifications:

 Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

LA JOLLA

LA JOLLA NURSING AND REHAB CTR

Provider ID: 171975

 2552 TORREY PINES RD
LA JOLLA, CA 92037

 Phone: (858) 453-5810

Fax: (858) 214-1212



 After Hours Phone: (858)
453-5810

Accepting New Patients: No







 Hours: M-F

D5. Proveedores de apoyo y servicios a largo plazo (LTSS)

I. Atención a largo plazo (LTC) y centro de enfermería especializada (SNF)


8:00AM-5:00PM
NPI: 1457486078
 Website: www.covenantcar.com
Credentials and/or certifications:
 Site English Spoken: Y
 Site Languages(s) Spoken: , Spanish
Cultural Competency: N
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER




THE COVE AT LA JOLLA

Provider ID: 305514
 7160 FAY AVE
LA JOLLA, CA 92037
 Phone: (858) 459-4361
 After Hours Phone: (858) 459-4361
Accepting New Patients: No
 Hours: M-F 7:30AM-4:00PM
NPI: 1588067482
 Website: <http://thecoveatla.com>
Credentials and/or certifications:
 Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER






LA MESA

ARBOR HILLS NURSING CENTER






Provider ID: 172007
 7800 PARKWAY DR

LA MESA, CA 91942
 Phone: (619) 460-2330
 After Hours Phone: (619) 460-2330
Accepting New Patients: No
NPI: 1356345706
 Website: www.lifegen.net/arborshills/
Credentials and/or certifications:
 Site English Spoken: Y
 Site Languages(s) Spoken: Tagalog, Spanish, Russian
Cultural Competency: N
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CARE MERIDIAN LA MESA

Provider ID: 173379
 5640 AZTEC DR
LA MESA, CA 91942
 Phone: (949) 263-6632
Fax: (619) 465-0019
 After Hours Phone: (949) 263-6632
Accepting New Patients: No
NPI: 1235404674
 Website: www.neurorestorative.com
Credentials and/or certifications:
 Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

COUNTRY MANOR LA MESA HEALTHCARE CENTER

Provider ID: 172023
 5696 LAKE MURRAY BLVD
LA MESA, CA 91942
 Phone: (619) 460-7871
 After Hours Phone: (619) 460-7871
Accepting New Patients: No
NPI: 1457345001
 Website: countrymanorlamesa.com
Credentials and/or certifications:
 Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

GROSSMONT HOSPITAL DP SNF

Provider ID: 172643
 5555 GROSSMONT CENTER DR
LA MESA, CA 91942
 Phone: (619) 740-4110
 After Hours Phone: (619) 740-4110
Accepting New Patients: No
NPI: 1417930249
 Website: www.sharp.com/hospitals/grossmont/departments/skilled-nursing.cfm
Credentials and/or certifications:
 Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

D5. Proveedores de apoyo y servicios a largo plazo (LTSS)

I. Atención a largo plazo (LTC) y centro de enfermería especializada (SNF)

GROSSMONT POST ACUTE CARE

Provider ID: 310488

8787 CENTER DR
LA MESA, CA 91942

Phone: (619) 460-4444

Fax: (619) 713-5116

After Hours Phone: (619)
460-4444

Accepting New Patients: No

NPI: 1689077588

Website: <http://grossmontpostacute.com>

Credentials and/or certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

HILLDALE HABILITATION CENTER

Provider ID: 527671

7979 LA MESA BLVD
LA MESA, CA 91942

Phone: (619) 465-8010

Fax: (619) 465-8348

After Hours Phone: (619)
465-8010

Accepting New Patients: No

Hours: M-F
8:00AM-5:00PM

NPI: 1073736427

Website: N/A
Credentials and/or certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

LA MESA HEALTHCARE CTR

Provider ID: 172022

3780 MASSACHUSETTS AVE
LA MESA, CA 91941

Phone: (619) 465-1313

Fax: (619) 465-8429

After Hours Phone: (619)
465-1313

Accepting New Patients: No

NPI: 1003852666

Website: <http://lamesahealthcare.com>

Credentials and/or certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

PARKWAY HILLS NURSING & REHAB

Provider ID: 417047

7760 PARKWAY DR
LA MESA, CA 91942

Phone: (619) 469-0124

Fax: (619) 828-7654

After Hours Phone: (619)
469-0124

Accepting New Patients: No

Hours: M-TH
9:00AM-5:00PM
F 5:00AM-5:00PM

NPI: 1174926448

Website: N/A
Credentials and/or certifications:

Site English Spoken: Y
Site Languages(s) Spoken:
Farsi, Spanish, Tagalog
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

SHASTA HOME

Provider ID: 674614

10346 CHALLENGE BLVD
LA MESA, CA 91941

Phone: (619) 465-8010

Fax: (619) 465-8348

After Hours Phone: (619)
465-8010

Accepting New Patients: No

Hours: M-F
8:00AM-5:00PM

NPI: 1134342520

Website: N/A
Credentials and/or certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

LEMON GROVE

BELLA VISTA HEALTH CENTER

Provider ID: 419062

7922 PALM ST
LEMON GROVE, CA 91945

Phone: (619) 644-1000

Fax: (619) 797-2920


After Hours Phone: (619)
644-1000

Accepting New Patients: No

NPI: 1760709687

D5. Proveedores de apoyo y servicios a largo plazo (LTSS)


I. Atención a largo plazo (LTC) y centro de enfermería especializada (SNF)

 Website: www.bellavistahealth.com

Credentials and/or certifications:

 Site English Spoken: Y
Cultural Competency: N


American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

LEMON GROVE CARE AND REHAB CTR

Provider ID: 172013


 8351 BROADWAY
LEMON GROVE, CA 91945

 Phone: (619) 463-0294

Fax: (619) 461-1064

 After Hours Phone: (619) 463-0294


Accepting New Patients: No
NPI: 1336134204

 Website: <http://lemongrovecare.com>

Credentials and/or certifications:

 Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER

NATIONAL CITY

CASTLE MANOR NURSING AND REHABILITATION CTR

Provider ID: 171978

 541 S V AVE
NATIONAL CITY, CA 91950


 Phone: (619) 791-7900

 After Hours Phone: (619)

791-7900

Accepting New Patients: No

NPI: 1497759856

 Website: www.lifegen.net/castlemanor/index.html

Credentials and/or

certifications:

 Site English Spoken: Y
Cultural Competency: N


American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

FRIENDSHIP MANOR NURSING AND REHABILITATION CTR

Provider ID: 171973


 902 EUCLID AVE
NATIONAL CITY, CA 91950

 Phone: (619) 791-7700


Fax: (619) 791-7791

 After Hours Phone: (619) 791-7700

Accepting New Patients: No

 Hours: M-F
9:00AM-5:00PM

NPI: 1235133687

 Website: www.lifegen.net/friendshipmanor/

Credentials and/or

certifications:


 Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER


PARADISE VALLEY HEALTH CARE CENTER

Provider ID: 171106

 2575 E 8TH ST

NATIONAL CITY, CA 91950

 Phone: (619) 470-6700

 After Hours Phone: (619) 470-6700

Accepting New Patients: No
NPI: 1275513293

 Website: <http://pvhcc.com>

Credentials and/or

certifications:

 Site English Spoken: Y
Cultural Competency: N


American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


WINDSOR GARDENS CONV CTR OF SAN DIEGO

Provider ID: 172011

 220 E 24TH ST
NATIONAL CITY, CA 91950

 Phone: (619) 474-6741

Fax: (619) 474-1925

 After Hours Phone: (619) 474-6741

Accepting New Patients: No
NPI: 1730176538


 Website: www.windsorcare.com

Credentials and/or

certifications:

 Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

OCEANSIDE

LA PALOMA HEALTHCARE CTR

D5. Proveedores de apoyo y servicios a largo plazo (LTSS)

I. Atención a largo plazo (LTC) y centro de enfermería especializada (SNF)

Provider ID: 172021

3232 THUNDER DR
OCEANSIDE, CA 92056
Phone: (760) 724-2193
After Hours Phone: (760)
724-2193

Accepting New Patients: No
NPI: 1265462436

Website: WWW.LAPALOMA
HEALTHCARE.COM

Credentials and/or
certifications:

Site English Spoken: Y
Site Languages(s) Spoken:
Spanish, Armenian, Korean,
Tagalog

Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

MCNEALY HOUSE

Provider ID: 662925

4602 ALLENDE AVE
OCEANSIDE, CA 92057
Phone: (760) 721-1706
Fax: (760) 721-9872

After Hours Phone: (760)
721-1706

Accepting New Patients: No
NPI: 1962488007

Website: N/A
Credentials and/or

certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

MICHALOWSKI HOME

Provider ID: 662925

4602 ALLENDE AVE
OCEANSIDE, CA 92057
Phone: (760) 721-1706
Fax: (760) 721-9872

After Hours Phone: (760)
721-1706

Accepting New Patients: No
NPI: 1962488007

Website: N/A
Credentials and/or

certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

MONARCH HOME

Provider ID: 666883

877 MUIRFIELD DR
OCEANSIDE, CA 92058
Phone: (760) 231-8139
Fax: (760) 529-5148

After Hours Phone: (760)
231-8139

Accepting New Patients: No
Hours: M-F

8:00AM-5:00PM
NPI: 1760660336

Website: N/A
Credentials and/or

certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

POWAY

BOULDER CREEK POST ACUTE

Provider ID: 276987

12696 MONTE VISTA RD
POWAY, CA 92064
Phone: (858) 487-6242
Fax: (858) 487-4282

After Hours Phone: (858)
487-6242

Accepting New Patients: No

Hours: M-F
8:00AM-5:30PM

NPI: 1073902672

Website: [http://bouldercre
ekpa.com](http://bouldercre
ekpa.com)

Credentials and/or
certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

POWAY HEALTHCARE CENTER

Provider ID: 171989

15632 POMERADO RD
POWAY, CA 92064
Phone: (858) 485-5153
Fax: (858) 485-7694

After Hours Phone: (858)
485-5153

Accepting New Patients: No
NPI: 1407035512

Website: [http://powaycare.
com](http://powaycare.
com)

Credentials and/or
certifications:

Site English Spoken: Y
Cultural Competency: N

D5. Proveedores de apoyo y servicios a largo plazo (LTSS)

I. Atención a largo plazo (LTC) y centro de enfermería especializada (SNF)

American Sign Language (ASL): certifications:


N


 Accessibility: CONTACT PROVIDER

THE VILLAS AT POWAY


Provider ID: 172642

 15615 POMERADO RD
POWAY, CA 92064

 Phone: (858) 613-4545

 After Hours Phone: (858)
613-4545

Accepting New Patients: No
NPI: 1619947090

 Website: www.palomarhealth.org/skilled-nursing/villa-pomerado

Credentials and/or certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


SAN DIEGO

ACCESS TO INDEPENDENCE

Provider ID: 417267

 8885 RIO SAN DIEGO DR
STE 131


SAN DIEGO, CA 92108

 Phone: (619) 293-3500

Fax: (619) 704-2054

 After Hours Phone: (619)
293-3500

Accepting New Patients: No

 Hours: M-F
8:00AM-5:00PM

NPI: 1083039861

 Website: N/A
Credentials and/or

Site English Spoken: Y

Cultural Competency: N


American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

ARROYO VISTA NURSING CTR

Provider ID: 172028


 3022 45TH ST
SAN DIEGO, CA 92105

 Phone: (619) 283-5855


Fax: (619) 284-6327

 After Hours Phone: (619)
283-5855

Accepting New Patients: No

 Hours: SU-SA
9:00AM-5:00PM

NPI: 1487640066

 Website: <http://arroyovistacare.com>

Credentials and/or certifications:

Site English Spoken: Y

Site Languages(s) Spoken:
Mandarin, Spanish,
Vietnamese, Arabic,
Tagalog

Cultural Competency: N


American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER

BALBOA NURSING AND REHAB CTR

Provider ID: 416840

 3520 4TH AVE
SAN DIEGO, CA 92103

 Phone: (619) 291-5270

 After Hours Phone: (619)
291-5270

Accepting New Patients: No
NPI: 1578521274

 Website: <http://balboahc.com>


Credentials and/or certifications:

Site English Spoken: Y

Site Languages(s) Spoken:
Mandarin, Spanish,
Tagalog, Vietnamese

Cultural Competency: N


American Sign Language (ASL):
N


 Accessibility: CONTACT PROVIDER

BRIGHTON PLACE SAN DIEGO

Provider ID: 402624

 1350 EUCLID AVE
SAN DIEGO, CA 92105

 Phone: (619) 263-2166

 After Hours Phone: (619)
263-2166


Accepting New Patients: No
NPI: 1346258274

 Website: N/A
Credentials and/or

certifications:

Site English Spoken: Y
Cultural Competency: N


American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

CARMEL MOUNTAIN REHAB AND HEALTHCARE CTR

Provider ID: 171971

 11895 AVENUE OF
INDUSTRY
SAN DIEGO, CA 92128

 Phone: (858) 673-0101

D5. Proveedores de apoyo y servicios a largo plazo (LTSS)

I. Atención a largo plazo (LTC) y centro de enfermería especializada (SNF)

Fax: (858) 673-8320

☎ After Hours Phone: (858) 673-0101

Accepting New Patients: No

NPI: 1083727093

🌐 Website: <http://carmelmountain.net>

Credentials and/or certifications:

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Tagalog, Armenian, Mandarin, Spanish, Russian, Korean, Vietnamese

Cultural Competency: N

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

GOLDEN HILL POST ACUTE

Provider ID: 614821

📍 1201 34TH ST
SAN DIEGO, CA 92102

☎ Phone: (619) 232-2946

Fax: (619) 702-7358

☎ After Hours Phone: (619) 232-2946

Accepting New Patients: No

NPI: 1598229437

🌐 Website: N/A

Credentials and/or certifications:

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Spanish, Tagalog

Cultural Competency: N

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

HILLCREST HEIGHTS

HEALTHCARE CENTER

Provider ID: 509489

📍 4033 6TH AVE
SAN DIEGO, CA 92103

☎ Phone: (619) 297-4086

Fax: (619) 297-9238

☎ After Hours Phone: (619) 297-4086

Accepting New Patients: No

🕒 Hours: M-F
8:00AM-5:00PM

NPI: 1558825067

🌐 Website: N/A

Credentials and/or certifications:

☐ Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

JACOB HEALTH CARE CENTER LLC

Provider ID: 172617

📍 4075 54TH ST
SAN DIEGO, CA 92105

☎ Phone: (619) 582-5168

Fax: (619) 325-0194

☎ After Hours Phone: (619) 582-5168

Accepting New Patients: No

NPI: 1881684900

🌐 Website: www.jacobhealthcare.com

Credentials and/or

certifications:

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Tagalog, Spanish

Cultural Competency: N

American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

MISSION HILLS POST ACUTE CARE

Provider ID: 339053

📍 3680 REYNARD WAY
SAN DIEGO, CA 92103

☎ Phone: (619) 297-4484

Fax: (855) 214-6992

☎ After Hours Phone: (619) 297-4484

Accepting New Patients: No

NPI: 1669875563

🌐 Website: <http://missionhillspostacute.com>

Credentials and/or certifications:

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken: Tagalog, Spanish

Cultural Competency: N

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

RADY CHILDRENS CONVALESCENT HOSPITAL

Provider ID: 172200

📍 8022 BIRMINGHAM DR
SAN DIEGO, CA 92123

☎ Phone: (858) 966-5833

Fax: (858) 966-8558

☎ After Hours Phone: (858) 966-5833

Accepting New Patients: No

NPI: 1992881478

🌐 Website: www.rchsd.org
Credentials and/or

D5. Proveedores de apoyo y servicios a largo plazo (LTSS)

I. Atención a largo plazo (LTC) y centro de enfermería especializada (SNF)

certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

REO VISTA HEALTHCARE CTR

Provider ID: 171993

6061 BANBURY ST
SAN DIEGO, CA 92139

Phone: (619) 475-2211

Fax: (619) 479-9126

After Hours Phone: (619)
475-2211

Accepting New Patients: No

NPI: 1255499174

Website: <http://reovista.com>

Credentials and/or

certifications:

Site English Spoken: Y

Site Languages(s) Spoken:
Tagalog, Spanish

Cultural Competency: N

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

ST PAULS HEALTH CARE CENTER

Provider ID: 288531

235 NUTMEG ST
SAN DIEGO, CA 92103

Phone: (619) 677-3895

After Hours Phone: (619)
677-3895

Accepting New Patients: No

NPI: 1972619104

Website: N/A

Credentials and/or

certifications: CMS

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL): N

N

Accessibility: CONTACT
PROVIDER

THE PAVILION AT OCEAN POINT

Provider ID: 262151

3202 DUKE ST
SAN DIEGO, CA 92110

Phone: (619) 224-4141

After Hours Phone: (619)
224-4141

Accepting New Patients: No

NPI: 1538174990

Website: N/A
Credentials and/or

certifications:

Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

THE SPRINGS AT PACIFIC REGENT

Provider ID: 172008

3884 NOBEL DR
SAN DIEGO, CA 92122

Phone: (858) 625-8700

Fax: (858) 625-8777

After Hours Phone: (858)
625-8700

Accepting New Patients: No

NPI: 1003198342

Website: N/A
Credentials and/or

certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

UNIVERSITY CARE CENTER

Provider ID: 172024

5602 UNIVERSITY AVE
SAN DIEGO, CA 92105

Phone: (619) 583-1993

Fax: (619) 501-3559

After Hours Phone: (619)
583-1993

Accepting New Patients: No

NPI: 1871522672

Website: <http://universitycarecenter.com>

Credentials and/or

certifications:

Site English Spoken: Y

Site Languages(s) Spoken:
Tagalog, Mandarin,

Russian, Vietnamese, Farsi,
Spanish

Cultural Competency: N

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

VILLA RANCHO BERNARDO CARE CENTER

Provider ID: 172009

15720 BERNARDO CENTER
DR

SAN DIEGO, CA 92127

Phone: (858) 672-3900

Fax: (858) 672-9247

After Hours Phone: (858)






D5. Proveedores de apoyo y servicios a largo plazo (LTSS)

I. Atención a largo plazo (LTC) y centro de enfermería especializada (SNF)

672-3900
Accepting New Patients: No
NPI: 1518063437
 Website: www.villaranchobernardo.com
Credentials and/or certifications:
 Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER






WINDSOR GARDENS CONV AND REHAB OF GOLDEN HILL

Provider ID: 172012

 1201 34TH ST
SAN DIEGO, CA 92102
 Phone: (619) 232-2946
Fax: (310) 595-3529
 After Hours Phone: (619) 232-2946
Accepting New Patients: No
NPI: 1811963028
 Website: <https://windsorgoldenhill.com>
Credentials and/or certifications:
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish, Tagalog
Cultural Competency: N
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER






SAN MARCOS


CARLO HOUSE
Provider ID: 662931

 411 CARLO ST
SAN MARCOS, CA 92078
 Phone: (760) 721-1706
Fax: (760) 721-9872
 After Hours Phone: (760) 721-1706
Accepting New Patients: No
NPI: 1962488007
 Website: N/A
Credentials and/or certifications:
 Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

SANTEE






STANFORD COURT SKILLED NURSING AND REHAB CENTER

Provider ID: 171994
 8778 CUYAMACA ST
SANTEE, CA 92071
 Phone: (619) 449-5555
 After Hours Phone: (619) 449-5555
Accepting New Patients: No
 Hours: SU-SA
8:00AM-5:00PM
NPI: 1184628554
 Website: www.lifegen.net/Stanfordcourt/
Credentials and/or certifications:
 Site English Spoken: Y
 Site Languages(s) Spoken: Tagalog, Spanish
Cultural Competency: N
American Sign Language (ASL):

N
 Accessibility: CONTACT PROVIDER

SPRING VALLEY

AMAYA SPRINGS HEALTH CARE CENTER

Provider ID: 420233
 8625 LAMAR ST
SPRING VALLEY, CA 91977
 Phone: (323) 326-6186
Fax: (619) 461-3575
 After Hours Phone: (323) 326-6186
Accepting New Patients: No
NPI: 1518974542
 Website: N/A
Credentials and/or certifications:
 Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

BRIGHTON PLACE SPRING VALLEY

Provider ID: 417094
 9009 CAMPO RD
SPRING VALLEY, CA 91977
 Phone: (619) 460-2711
 After Hours Phone: (619) 460-2711
Accepting New Patients: No
NPI: 1780682021
 Website: N/A
Credentials and/or certifications:
 Site English Spoken: Y
Cultural Competency: N

D5. Proveedores de apoyo y servicios a largo plazo (LTSS)

I. Atención a largo plazo (LTC) y centro de enfermería especializada (SNF)

American Sign Language (ASL): Website: www.mountmiguelcovenantvillage.org

N
 Accessibility: CONTACT PROVIDER

MOUNT MIGUEL COVENANT VILLAGE HEALTH FAC

Provider ID: 171969

325 KEMPTON ST
SPRING VALLEY, CA 91977

Phone: (619) 931-1151

Fax: (224) 233-1397

After Hours Phone: (619) 931-1151

Accepting New Patients: No

Hours: SU-SA
8:00AM-5:00PM

NPI: 1649375403

Website: covivingmountmiguel.org

Credentials and/or

certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

MOUNT MIGUEL COVENANT VILLAGE HEALTH FAC

Provider ID: 171969

325 KEMPTON ST
SPRING VALLEY, CA 91977

Phone: (619) 931-1151

Fax: (224) 233-1397

After Hours Phone: (619) 931-1151

Accepting New Patients: No

Hours: SU-SA
8:00AM-5:00PM

NPI: 1649375403

Credentials and/or certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

VALLEY CENTER

AMREEN HOME

Provider ID: 658588

13873 OAKWOOD GLEN PL
VALLEY CENTER, CA 92082

Phone: (760) 751-9879

Fax: (760) 749-3019

After Hours Phone: (760) 751-9879

Accepting New Patients: No

NPI: 1700160405

Website: N/A
Credentials and/or

certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

VISTA

ANZA HOUSE

Provider ID: 662920

1736 ANZA AVE
VISTA, CA 92084

Phone: (760) 721-1706

Fax: (760) 721-9872

After Hours Phone: (760)

721-1706

Accepting New Patients: No
NPI: 1962488007

Website: N/A
Credentials and/or certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

GRACE HOUSE

Provider ID: 662919

2507 HIBISCUS AVE
VISTA, CA 92081

Phone: (760) 721-1706

Fax: (760) 721-9872

After Hours Phone: (760) 721-1706

Accepting New Patients: No

NPI: 1962488007

Website: N/A
Credentials and/or certifications:

Site English Spoken: Y
Cultural Competency: N

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

LA FUENTE POST ACUTE

Provider ID: 429590

247 E BOBIER DR
VISTA, CA 92084

Phone: (760) 945-3033

After Hours Phone: (760) 945-3033

Accepting New Patients: No


Hours: SU-SA

D5. Proveedores de apoyo y servicios a largo plazo (LTSS)

I. Atención a largo plazo (LTC) y centro de enfermería especializada (SNF)


8:30AM-5:00PM

NPI: 1366802696

 Website: N/A
Credentials and/or
certifications:

Site English Spoken: Y
Cultural Competency: N


American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

LIFE CARE CENTER OF VISTA


Provider ID: 171970

 304 N MELROSE DR
VISTA, CA 92083


 Phone: (760) 724-8222
Fax: (760) 941-4870

 After Hours Phone: (760)
724-8222

Accepting New Patients: No

 Hours: SU-SA
9:00AM-5:00PM

NPI: 1811942063

 Website: www.lcca.com
Credentials and/or
certifications:

Site English Spoken: Y
 Site Languages(s) Spoken:
Tagalog

Cultural Competency: N


American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

MARSHALL HOUSE


Provider ID: 662924

 758 S MELROSE DR
VISTA, CA 92081

 Phone: (760) 721-1706
Fax: (760) 721-9872

 After Hours Phone: (760)
721-1706

Accepting New Patients: No
NPI: 1962488007

 Website: N/A
Credentials and/or
certifications:

Site English Spoken: Y
Cultural Competency: N


American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

MONTGOMERY HOUSE


Provider ID: 662927

 1658 MONTGOMERY DR
VISTA, CA 92084

 Phone: (760) 721-1706
Fax: (760) 721-9872

 After Hours Phone: (760)
721-1706

Accepting New Patients: No
NPI: 1962488007

 Website: N/A
Credentials and/or
certifications:


Site English Spoken: Y
Cultural Competency: N


American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

ORIENTE HOUSE


Provider ID: 662928

 3081 ORIENTE DR
VISTA, CA 92084

 Phone: (760) 721-1706
Fax: (760) 721-9872

 After Hours Phone: (760)
721-1706

Accepting New Patients: No
NPI: 1962488007

 Website: N/A
Credentials and/or
certifications:

Site English Spoken: Y
Cultural Competency: N


American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER

SAVA HOME


Provider ID: 669500

 263 AHMU TER
VISTA, CA 92084


 Phone: (760) 305-7052
Fax: (760) 509-4949

 After Hours Phone: (760)
305-7052

Accepting New Patients: No

 Hours: M-F
8:00AM-5:00PM

NPI: 1962541177

 Website: N/A
Credentials and/or
certifications:

Site English Spoken: Y
Cultural Competency: N


American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

SUSAN PARHAM HOUSING CORPORATION

Provider ID: 662929

 1658 ANZA AVE
VISTA, CA 92084


 Phone: (760) 721-1706
Fax: (760) 721-9872

 After Hours Phone: (760)

D5. Proveedores de apoyo y servicios a largo plazo (LTSS)

I. Atención a largo plazo (LTC) y centro de enfermería especializada (SNF)

721-1706
Accepting New Patients: No
NPI: 1093137762

 Website: N/A
Credentials and/or
certifications:

Site English Spoken: Y
Cultural Competency: N


American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

VISTA HEALTHCARE CENTER


Provider ID: 171990

 247 E BOBIER DR
VISTA, CA 92084

 Phone: (760) 945-3033
Fax: (760) 724-3169

 After Hours Phone: (760)
945-3033

Accepting New Patients: No

 Hours: M-F
8:00AM-5:00PM

NPI: 1912189812


 Website: <http://astorhealth.com>

Credentials and/or
certifications:

Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish, Tagalog

Cultural Competency: N


American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

VISTA HOUSE

Provider ID: 662916

 1768 MONTE MAR RD
VISTA, CA 92084

 Phone: (760) 721-1706

Fax: (760) 721-9872

 After Hours Phone: (760)
721-1706

Accepting New Patients: No

NPI: 1962488007

 Website: N/A
Credentials and/or

certifications:

Site English Spoken: Y
Cultural Competency: N


American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

VISTA KNOLL SPECIALIZED CARE FACILITY


Provider ID: 172017

 2000 WESTWOOD RD
VISTA, CA 92083


 Phone: (760) 630-2273
Fax: (760) 630-0913

 After Hours Phone: (760)
630-2273

Accepting New Patients: No

 Hours: SU-SA
8:30AM-5:00PM

NPI: 1275533929


 Website: <http://vistaknoll.com>

Credentials and/or
certifications:

Site English Spoken: Y
 Site Languages(s) Spoken:
Korean, Tagalog,
Vietnamese, Spanish

Cultural Competency: N

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

D5. Proveedores de apoyo y servicios a largo plazo (LTSS)


II. Servicios de apoyo en el hogar (IHSS) del condado

SAN DIEGO

AGING & INDEPENDENCE SERVICES


Specialty: Case Management


 5560 OVERLAND AVE
SAN DIEGO, CA 92123

 Phone: (858) 495-5885

License Number: 1710308986

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

 Website: https://www.sandiegocounty.gov/content/sdc/hhsa/programs/ais/inhome_supportive_services.html

D5. Proveedores de apoyo y servicios a largo plazo (LTSS)

III. Servicios comunitarios para adultos (CBAS): servicios diurnos para adultos

CHULA VISTA

OPEN ARMS ADHC

Provider ID: 417307

301 E J ST

CHULA VISTA, CA 91910

Phone: (619) 420-1404

Fax: (619) 420-1408

After Hours Phone: (619) 420-1404

Accepting New Patients: No

Hours: M-F
7:00AM-3:00PM

License Number: 060002076

NPI: 1598882169

Accessibility: CONTACT PROVIDER

American Sign Language (ASL):
N

Language line interpreter services: N

Cultural Competency: N

Facility has access to skilled medical interpreters on site?: N

Interpreter Non-English

Languages: N

Website: <http://openarmsadhc.com>

EL CAJON

WESTERN ADHC

Provider ID: 417305

240 S MAGNOLIA AVE

EL CAJON, CA 92020

Phone: (619) 631-7222

Fax: (619) 631-9228

After Hours Phone: (619) 631-7222

Accepting New Patients: No

Site Language(s) Spoken: Spanish, Arabic, Tagalog,

Farsi

Hours: M-F 7:00AM-3:30PM
NPI: 1821125550

Accessibility: CONTACT PROVIDER

American Sign Language (ASL):
N

Language line interpreter services: Y

Cultural Competency: N

Facility has access to skilled medical interpreters on site?: N

Interpreter Non-English

Languages: Y

Website: <https://westernadhc.wordpress.com/>

MAGNOLIA ADULT DAY HEALTH CARE

Provider ID: 408541

490 N MAGNOLIA AVE

EL CAJON, CA 92020

Phone: (619) 444-1522

Fax: (619) 444-1516

After Hours Phone: (619) 444-1522

Accepting New Patients: No

Hours: M-F
8:00AM-4:00PM

License Number: 60000821

NPI: 1487864468

Accessibility: CONTACT PROVIDER

American Sign Language (ASL):
N

Language line interpreter services: N

Cultural Competency: N

Facility has access to skilled medical interpreters on site?: N

Interpreter Non-English

Languages: N

Website: <http://magnoliaadhc.com>

EL CAJON ADHC

Provider ID: 637126

854 JACKMAN ST

EL CAJON, CA 92020

Phone: (619) 328-2112

Fax: (619) 328-0069

After Hours Phone: (619) 328-2112

Accepting New Patients: No

Hours: SU-SA
9:00AM-3:00PM

License Number: 550008511

NPI: 1184207631

Accessibility: CONTACT PROVIDER

American Sign Language (ASL):
N

Language line interpreter services: N

Cultural Competency: N

Facility has access to skilled medical interpreters on site?: N

Interpreter Non-English

Languages: N

Website: N/A

LA MESA

GOLDEN LIFE ADHC

Provider ID: 619502

9158 FLETCHER PKWY

LA MESA, CA 91942

Phone: (619) 357-7753

Fax: (619) 439-6038



After Hours Phone: (619) 357-7753

Accepting New Patients: No

NPI: 1093921900






D5. Proveedores de apoyo y servicios a largo plazo (LTSS)

III. Servicios comunitarios para adultos (CBAS): servicios diurnos para adultos

 *Accessibility: CONTACT PROVIDER*
American Sign Language (ASL): N
Language line interpreter services: N
Cultural Competency: N
Facility has access to skilled medical interpreters on site?: N
Interpreter Non-English Languages: N
 Website: N/A

NATIONAL CITY


HORIZON CBAS

Provider ID: 642082
 1035 HARBISON AVE
NATIONAL CITY, CA 91950
 Phone: (619) 474-1822
 After Hours Phone: (619) 474-1822
Accepting New Patients: No
License Number: 060000582
NPI: 1396476388
 *Accessibility: CONTACT PROVIDER*
American Sign Language (ASL): N
Language line interpreter services: N
Cultural Competency: N
Facility has access to skilled medical interpreters on site?: N
Interpreter Non-English Languages: N
 Website: N/A





POWAY

POWAY ADULT DAY HEALTH


CARE CENTER
Provider ID: 404183
 12250 CROSTHWAITE CIR
POWAY, CA 92064
 Phone: (858) 748-5044
Fax: (858) 748-5405
 After Hours Phone: (858) 748-5044
Accepting New Patients: No
License Number: 60000822
NPI: 1568659977
 *Accessibility: CONTACT PROVIDER*
American Sign Language (ASL): N

Language line interpreter services: N
Cultural Competency: N
Facility has access to skilled medical interpreters on site?: N
Interpreter Non-English Languages: N
 Website: N/A






SAN DIEGO


CASA PACIFICA ADHCC
Provider ID: 417303
 1424 30TH ST STE C
SAN DIEGO, CA 92154
 Phone: (619) 424-8181
 After Hours Phone: (619) 424-8181
Accepting New Patients: No
NPI: 1609920305
 *Accessibility: CONTACT PROVIDER*
American Sign Language (ASL): N

Language line interpreter services: N
Cultural Competency: N




Facility has access to skilled medical interpreters on site?: N
Interpreter Non-English Languages: N
 Website: www.casa-pacific.com

LOVING CARE ADHC

Provider ID: 419961
 2565 CAMINO DEL RIO S
STE 201
SAN DIEGO, CA 92108
 Phone: (619) 718-9777
Fax: (619) 569-2855
 After Hours Phone: (619) 718-9777
Accepting New Patients: No
 Hours: SU-SA
8:30AM-4:00PM
NPI: 1346455961
 *Accessibility: CONTACT PROVIDER*
American Sign Language (ASL): N





Language line interpreter services: N
Cultural Competency: N
Facility has access to skilled medical interpreters on site?: N
Interpreter Non-English Languages: N
 Website: www.lovingcareadhc.com


SAN DIEGO FAMILY CIRCLE ADULT DAY HEALTH CARE

Provider ID: 539018
 4428 CONVOY ST STE 288
SAN DIEGO, CA 92111
 Phone: (858) 244-4555
Fax: (858) 724-3302
 After Hours Phone: (858)

D5. Proveedores de apoyo y servicios a largo plazo (LTSS)






III. Servicios comunitarios para adultos (CBAS): servicios diurnos para adultos

244-4555
Accepting New Patients: No
 Site Languages(s) Spoken: Vietnamese, Mandarin, Spanish
 Hours: M-F
8:00AM-5:00PM
License Number: 550005837
NPI: 1396201828
 Accessibility: CONTACT PROVIDER
American Sign Language (ASL): N
Language line interpreter services: Y
Cultural Competency: N
Facility has access to skilled medical interpreters on site?: N
Interpreter Non-English Languages: Y
 Website: Sandiegofamilycircle.com

American Sign Language (ASL): N
Language line interpreter services: N
Cultural Competency: N
Facility has access to skilled medical interpreters on site?: N
Interpreter Non-English Languages: N
 Website: www.americareadhc.com

SAN MARCOS

AMERICARE ADULT DAY HEALTH CARE CENTER

Provider ID: 420060
 340 RANCHEROS DR STE 196
SAN MARCOS, CA 92069
 Phone: (760) 682-2424
Fax: (760) 471-5104
 After Hours Phone: (760) 682-2424
Accepting New Patients: No
 Hours: 24 Hours / 7 days/week
License Number: 060000832
NPI: 1528271186
 Accessibility: CONTACT PROVIDER

D6. Directorio de salud mental

ALPINE

KHALEEL, AMMAR

Provider Gender: Male

License Number: LCS110302

NPI: 1841744208

Provider English Spoken: Y

Provider Language(s) Spoken:

Arabic

Cultural Competency: N

AMMAR KHALEEL

1620 ALPINE BLVD STE 110
ALPINE, CA 91901

Phone: (619) 662-4100

Fax: (619) 205-6305

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

TORRES, RANDALL

Provider Gender: Male

License Number: PSY31823

NPI: 1871696435

Provider English Spoken: Y

Cultural Competency: N

RANDALL P TORRES

1620 ALPINE BLVD STE 110
ALPINE, CA 91901

Phone: (619) 662-4100

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Language(s) Spoken:
Spanish

TDD: U

Min/Max Age: 12\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

CHULA VISTA

BAYLON, ALDO

Provider Gender: Male

License Number: PSY29904

NPI: 1649429150

Provider English Spoken: Y

Provider Language(s) Spoken:

Spanish

Cultural Competency: N

ALDO BAYLON

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 425-1184

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 14\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-8:00PM
SA 8:00AM-4:00PM

CASTLEBERRY, DANI

Provider Gender: Female

License Number: LCS95022

NPI: 1053706853

Provider English Spoken: Y

Provider Language(s) Spoken:

Spanish

Cultural Competency: N

DANI E CASTLEBERRY

780 BAY BLVD STE 200
CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 240-7825

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Language(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

CELAYA, PATRICIA

Provider Gender: Female

License Number: PSY33233

NPI: 1952656902

Provider English Spoken: Y

Provider Language(s) Spoken:

Spanish

Cultural Competency: N







PATRICIA E CELAYA

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 425-1184








D6. Directorio de salud mental

 After Hours Phone: (619) 662-4100
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-8:00PM SA 8:00AM-4:00PM

GALLO, LINDA

Provider Gender: Female
License Number: PSY27375
NPI: 1427773621
Provider English Spoken: Y
Cultural Competency: N

LINDA C GALLO

 780 BAY BLVD STE 200
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
Fax: (619) 240-7852
 After Hours Phone: (619) 662-4100
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 18\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

GOULD, HILARY

Provider Gender: Female
License Number: PSY31088
NPI: 1104297696
Provider English Spoken: Y
Cultural Competency: N

HILARY GOULD

 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
Fax: (619) 271-0260
 After Hours Phone: (619) 662-4100
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: SU 10:00AM-4:00PM M-F 8:30AM-5:30PM SA 8:00AM-2:30PM

JUAREZ, AMERICA

Provider Gender: Female
License Number: LCS92516
NPI: 1386281541
Provider English Spoken: Y
Cultural Competency: N

AMERICA P JUAREZ

 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
Fax: (619) 425-1184
 After Hours Phone: (619) 662-4100
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y

TDD: U

Min/Max Age: 5\999









American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

KURZ, TROY

Provider Gender: Male
License Number: A157190
NPI: 1154862357
Provider English Spoken: Y
Cultural Competency: N

TROY L KURZ

 678 3RD AVE
CHULA VISTA, CA 91910
 Phone: (619) 662-4100
Fax: (619) 425-6941
 After Hours Phone: (619) 662-4100
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-8:00PM SA 8:00AM-4:00PM

MALAK, LAWRENCE

Provider Gender: Male
License Number: A115345
NPI: 1467773028
Provider English Spoken: Y
Cultural Competency: N

D6. Directorio de salud mental

LAWRENCE T MALAK

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 425-1184

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

MARTINEZ, STEPHANIE

Provider Gender: Female

License Number: A152787

NPI: 1699126367

Provider English Spoken: Y

Provider Language(s) Spoken:

Spanish

Cultural Competency: N

STEPHANIE MARTINEZ

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 425-1184

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: SU 10:00AM-4:00PM

M-F 8:30AM-5:30PM

SA 8:00AM-2:30PM

SHIELDS, SEBASTIAN

Provider Gender: Male

License Number: MFC124495

NPI: 1558895342

Provider English Spoken: Y

Provider Language(s) Spoken:

Spanish

Cultural Competency: N

SEBASTIAN L SHIELDS

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 425-1184

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

TROYER, EMILY

Provider Gender: Female

License Number: A149101

NPI: 1326484437

Provider English Spoken: Y

Cultural Competency: N

EMILY A TROYER

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 425-1184

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Language(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-8:00PM
SA 8:00AM-4:00PM

WIJAYARATNE, IMANIE

Provider Gender: Female

License Number: PSY25044

NPI: 1932358355

Provider English Spoken: Y

Cultural Competency: N

IMANIE S WIJAYARATNE

678 3RD AVE
CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 245-1184

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 5\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

D6. Directorio de salud mental

EL CAJON

ARAIZA, ERNESTINA

Provider Gender: Female
License Number: PSY32549
NPI: 1568608636
Provider English Spoken: Y
Cultural Competency: N
ERNESTINA ARAIZA

875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
Fax: (619) 785-3356
After Hours Phone: (619)
662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

ARNOLD, REBECCA

Provider Gender: Female
License Number: MFC95778
NPI: 1225580350
Provider English Spoken: Y
Cultural Competency: N
REBECCA L ARNOLD

855 E MADISON AVE
EL CAJON, CA 92020
Phone: (619) 270-3600
Fax: (360) 462-2746
After Hours Phone: (619)
270-3600
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken:

Japanese, Spanish, Italian,
Chinese, Farsi, Arabic,
Mandarin

TDD: U
Min/Max Age: 18\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM

ARNOLD, REBECCA

Provider Gender: Female
License Number: MFC95778
NPI: 1225580350
Provider English Spoken: Y
Cultural Competency: N
REBECCA L ARNOLD

855 E MADISON AVE
EL CAJON, CA 92020
Phone: (619) 270-3600
Fax: (360) 462-2746
After Hours Phone: (619)
270-3600
Website: N/A
Accepting New Patients: Yes

Site English Spoken: Y
Site Languages(s) Spoken:
Japanese, Spanish, Italian,
Chinese, Farsi, Arabic,
Mandarin

TDD: U
Min/Max Age: 4\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM

CASEY, SHANNON

Provider Gender: Female
License Number: PSY31889
NPI: 1548873755
Provider English Spoken: Y
Provider Language(s) Spoken:
Sign Language





Cultural Competency: N
SHANNON K CASEY
215 W MADISON AVE
EL CAJON, CA 92020
Phone: (760) 737-6935
Fax: (760) 741-2782
After Hours Phone: (760)
737-6935
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
9:00AM-7:00PM

CASEY, SHANNON







Provider Gender: Female
License Number: PSY31889
NPI: 1548873755
Provider English Spoken: Y
Provider Language(s) Spoken:
Sign Language

Cultural Competency: N
SHANNON K CASEY
215 W MADISON AVE
EL CAJON, CA 92020
Phone: (760) 737-6935
Fax: (760) 741-2782
After Hours Phone: (760)
737-6935

D6. Directorio de salud mental

 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
9:00AM-7:00PM

CRUZ, GUADALUPE








Provider Gender: Male
License Number: LCS101900
NPI: 1649727942
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: N
GUADALUPE A CRUZ
 855 E MADISON AVE
EL CAJON, CA 92020
 Phone: (619) 440-2751
Fax: (360) 462-2746
 After Hours Phone: (619)
440-2751
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

GUARDADO-SOTO, RAQUEL

Provider Gender: Female
License Number: PSY26883
NPI: 1194999276

Provider English Spoken: Y
Cultural Competency: N
RAQUEL GUARDADO-SOTO
 855 E MADISON AVE
EL CAJON, CA 92020
 Phone: (619) 440-2751
Fax: (360) 462-2746
 After Hours Phone: (619)
440-2751
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 13\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

MANUEL, FRANCESCA

Provider Gender: Female
License Number: LCS107210
NPI: 1275097081
Provider English Spoken: Y
Cultural Competency: N
FRANCESCA A MANUEL
 215 W MADISON AVE
EL CAJON, CA 92020
 Phone: (619) 667-6125
Fax: (619) 590-9036
 After Hours Phone: (619)
667-6125
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT

PROVIDER
 Hours: M-F
8:00AM-5:00PM



MAXWELL-JUNGE, MELISSA

Provider Gender: Female
License Number: LCS90791
NPI: 1275182826
Provider English Spoken: Y
Cultural Competency: N
MELISSA K MAXWELL-JUNGE
 215 W MADISON AVE
EL CAJON, CA 92020
 Phone: (619) 667-6125
Fax: (619) 590-9036
 After Hours Phone: (619)
667-6125
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 18\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

POSTLETHWAITE, ALEJANDRA

Provider Gender: Female
License Number: A88938
NPI: 1750566915
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: N
ALEJANDRA POSTLETHWAITE
 855 E MADISON AVE
EL CAJON, CA 92020
 Phone: (619) 440-2751
Fax: (858) 633-4692
 After Hours Phone: (619)

D6. Directorio de salud mental

440-2751
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

SADDA, REEM








Provider Gender: Female
License Number: A163129
NPI: 1871921833
Provider English Spoken: Y
Provider Language(s) Spoken:
Arabic
Cultural Competency: N
REEM J SADDA

 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
 After Hours Phone: (619)
662-4100
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 18\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM

WEAVER, AMANDA

Provider Gender: Female
License Number: MFC105361
NPI: 1174266423

Provider English Spoken: Y
Cultural Competency: N
AMANDA R WEAVER

 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
Fax: (619) 205-6305
 After Hours Phone: (619)
662-4100
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Language(s) Spoken:
Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

WHEELER, KIM

Provider Gender: Female
License Number: PSY34237
NPI: 1700577434

Provider English Spoken: Y
Cultural Competency: N
KIM N WHEELER
 875 EL CAJON BLVD
EL CAJON, CA 92020
 Phone: (619) 662-4100
Fax: (619) 785-3356
 After Hours Phone: (619)
662-4100
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 11\999
American Sign Language (ASL):
N
 Accessibility: CONTACT









PROVIDER
 Hours: M-F
8:00AM-5:00PM

ENCINITAS

GARCIA, ROSEMARIE

Provider Gender: Female
License Number: MFC123590
NPI: 1710410980


Provider English Spoken: Y
Cultural Competency: N
ROSEMARIE C GARCIA

 1130 2ND ST
ENCINITAS, CA 92024
 Phone: (760) 736-6767
Fax: (760) 736-6744
 After Hours Phone: (760)
736-6767
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Language(s) Spoken:
Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM






GOMEZ, JUANITA

Provider Gender: Female
License Number: PSY27439
NPI: 1790915759
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: N
JUANITA GOMEZ

D6. Directorio de salud mental








 1505 ENCINITAS BLVD
ENCINITAS, CA 92024
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

LOPEZ, JOANNA




Provider Gender: Female
License Number: MFC50381
NPI: 1275664385
Provider English Spoken: Y
Cultural Competency: N
JOANNA M LOPEZ
 1130 2ND ST
ENCINITAS, CA 92024
 Phone: (760) 736-6767
Fax: (760) 736-6744
 After Hours Phone: (760)
736-6767
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM





ESCONDIDO

ARLINGHAUS, RENE







Provider Gender: Female
License Number: LCS80909
NPI: 1568973964
Provider English Spoken: Y
Cultural Competency: N
RENE M ARLINGHAUS
 704 E GRAND AVE
ESCONDIDO, CA 92025
 Phone: (619) 662-4100
Fax: (619) 662-4196
 After Hours Phone: (619)
662-4100
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 18\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM

BECERRA, GABRIEL

Provider Gender: Male
License Number: LCS114743
NPI: 1205313319
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: N
GABRIEL CELESTINO
BECERRA
 425 N DATE ST
ESCONDIDO, CA 92025
 Phone: (760) 520-8300
Fax: (858) 633-4698
 After Hours Phone: (760)
520-8300

 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 18\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M 7:00AM-7:30PM
TU 7:00AM-4:30PM
W 7:00AM-7:30PM
TH-F 7:00AM-4:30PM

BELINSKY, MARIA

Provider Gender: Female
License Number: LCS69175
NPI: 1760867824
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: N
MARIA T BELINSKY
 728 E VALLEY PKWY
ESCONDIDO, CA 92025
 Phone: (760) 737-6900
Fax: (360) 462-2748
 After Hours Phone: (760)
737-6900
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

BELINSKY, MARIA

Provider Gender: Female
License Number: LCS69175

D6. Directorio de salud mental

NPI: 1760867824

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N

MARIA T BELINSKY

426 N DATE ST
ESCONDIDO, CA 92025

Phone: (760) 690-5900

Fax: (858) 633-4693

After Hours Phone: (760)
690-5900

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M 9:00AM-4:00PM
W-F 9:00AM-4:00PM

BELINSKY, MARIA

Provider Gender: Female

License Number: LCS69175

NPI: 1760867824

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N

MARIA T BELINSKY

460 N ELM ST
ESCONDIDO, CA 92025

Phone: (760) 520-8100

Fax: (360) 462-2745

After Hours Phone: (760)
520-8100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CARLTON-PENN, CORNELIA

Provider Gender: Female

License Number: PSY14310

NPI: 1891720611

Provider English Spoken: Y

Provider Language(s) Spoken:
German

Cultural Competency: N

CORNELIA J CARLTON-PENN

425 N DATE ST
ESCONDIDO, CA 92025

Phone: (760) 520-8340

Fax: (858) 633-4698

After Hours Phone: (760)
520-8340

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

CHRISTENSEN, PATTI

Provider Gender: Female

License Number: LCS24129

NPI: 1245434745

Provider English Spoken: Y

Cultural Competency: N

PATTI J CHRISTENSEN

1002 E GRAND AVE
ESCONDIDO, CA 92025

Phone: (760) 741-2660

After Hours Phone: (760)
741-2660

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-5:00PM

DOCKERY, LEE

Provider Gender: Male

License Number: A178136

NPI: 1225526320

Provider English Spoken: Y

Cultural Competency: N

LEE M DOCKERY

425 N DATE ST
ESCONDIDO, CA 92025

Phone: (760) 520-8300

Fax: (858) 633-4698

After Hours Phone: (760)
520-8300

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F

D6. Directorio de salud mental

8:00AM-5:00PM

ESTRADA PATINO, ANGELA

Provider Gender: Female
License Number: PSY31789
NPI: 1629339015
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: N

ANGELA J ESTRADA PATINO

460 N ELM ST
ESCONDIDO, CA 92025

Phone: (760) 520-8100

Fax: (360) 462-2745

After Hours Phone: (760)
520-8100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 14\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

SA 8:00AM-0:00PM

FU, KATHERINE

Provider Gender: Female
License Number: A187562
NPI: 1356877807
Provider English Spoken: Y
Cultural Competency: N

KATHERINE FU

704 E GRAND AVE
ESCONDIDO, CA 92025

Phone: (619) 662-4100

Fax: (619) 662-4196

After Hours Phone: (619)
662-4100

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

GUZZO, RICHARD

Provider Gender: Male
License Number: LCS8288
NPI: 1497898431
Provider English Spoken: Y
Cultural Competency: N

RICHARD L GUZZO

1002 E GRAND AVE
ESCONDIDO, CA 92025

Phone: (760) 741-2660

After Hours Phone: (760)
741-2660

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:30AM-5:00PM

HARRIS, LAURA

Provider Gender: Female
License Number: LCS18214
NPI: 1255640280

Provider English Spoken: Y
Cultural Competency: N

LAURA S HARRIS

1002 E GRAND AVE
ESCONDIDO, CA 92025

Phone: (760) 741-2660

Fax: (760) 741-2642

After Hours Phone: (760)
741-2660

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

KULKARNI, NISHAT

Provider Gender: Male
License Number: A187134
NPI: 1669034732

Provider English Spoken: Y
Cultural Competency: N

NISHAT KULKARNI

425 N DATE ST
ESCONDIDO, CA 92025

Phone: (760) 520-8300

Fax: (858) 633-4698

After Hours Phone: (760)
520-8300

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


Site Languages(s) Spoken:
Spanish


D6. Directorio de salud mental

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

MAGOS, DANIEL

Provider Gender: Male

License Number: LCS88270

NPI: 1578983664


Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N

DANIEL K MAGOS

 425 N DATE ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8300

Fax: (858) 633-4698

 After Hours Phone: (760)
520-8300

 Website: N/A


Accepting New Patients: Yes

 Site English Spoken: Y

TDD: U

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

MARTINEZ, NORAYMA

Provider Gender: Female

License Number: LCS100019


NPI: 1669808267

Provider English Spoken: Y

Cultural Competency: N


NORAYMA MARTINEZ

 728 E VALLEY PKWY
ESCONDIDO, CA 92025

 Phone: (760) 737-6900


Fax: (360) 462-2748

 After Hours Phone: (760)
737-6900

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y


 Site Language(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

POSTLETHWAITE, ALEJANDRA

Provider Gender: Female

License Number: A88938

NPI: 1750566915


Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N

ALEJANDRA POSTLETHWAITE

 425 N DATE ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8300

Fax: (858) 633-4698

 After Hours Phone: (760)
520-8300

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

PRASAD, AMITHA

Provider Gender: Female

License Number: A158657

NPI: 1821436882


Provider English Spoken: Y

Cultural Competency: N

AMITHA, PRASAD

 2125 CITRACADO PKWY
STE 200

ESCONDIDO, CA 92029

 Phone: (760) 294-9270

Fax: (760) 294-9268

 After Hours Phone: (760)
294-9270

 Website: N/A

Accepting New Patients: Yes


 Site English Spoken: Y

TDD: U

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

RIOS, SIERRA

Provider Gender: Female

License Number: LCS91970

NPI: 1942746128


Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N

SIERRA K RIOS

 425 N DATE ST
ESCONDIDO, CA 92025

 Phone: (760) 520-8340

Fax: (360) 462-2752

D6. Directorio de salud mental

📞 After Hours Phone: (760) 520-8340

🌐 Website: N/A

Accepting New Patients: Yes

🗨️ Site English Spoken: Y

🗨️ Site Language(s) Spoken: Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8:00AM-5:00PM

ROBLEDO, DAMIAN

Provider Gender: Male

License Number: LCS66152

NPI: 1376831289

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

DAMIAN ROBLEDO

📍 425 N DATE ST ESCONDIDO, CA 92025

📞 Phone: (760) 520-8340

Fax: (360) 462-2752

📞 After Hours Phone: (760) 520-8340

🌐 Website: N/A

Accepting New Patients: Yes

🗨️ Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M 7:00AM-7:30PM TU 7:00AM-4:30PM

W 7:00AM-7:30PM

TH-F 7:00AM-4:30PM

RODARTE, GABRIEL

Provider Gender: Male

License Number: A87906

NPI: 1184649212

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

GABRIEL RODARTE

📍 425 N DATE ST ESCONDIDO, CA 92025

📞 Phone: (760) 520-8340

Fax: (858) 633-4698

📞 After Hours Phone: (760) 520-8340

🌐 Website: N/A

Accepting New Patients: Yes

🗨️ Site English Spoken: Y

TDD: U

Min/Max Age: 18\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8:00AM-5:00PM

STONE, CALVIN

Provider Gender: Male

License Number: 20A18127

NPI: 1275995870

Provider English Spoken: Y

Cultural Competency: N

CALVIN T STONE

📍 425 N DATE ST ESCONDIDO, CA 92025

📞 Phone: (760) 520-8300

Fax: (858) 633-4698

📞 After Hours Phone: (760) 520-8300

🌐 Website: N/A

Accepting New Patients: Yes

🗨️ Site English Spoken: Y

TDD: U

Min/Max Age: 18\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

STREET, KYLE

Provider Gender: Male

License Number: 20A21304

NPI: 1457912131

Provider English Spoken: Y

Cultural Competency: N

KYLE A STREET

📍 425 N DATE ST ESCONDIDO, CA 92025

📞 Phone: (760) 520-8300

Fax: (858) 633-4698

📞 After Hours Phone: (760) 520-8300

🌐 Website: N/A

Accepting New Patients: Yes

🗨️ Site English Spoken: Y

🗨️ Site Language(s) Spoken: Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8:00AM-5:00PM

SUOZZO, JOSEPH

Provider Gender: Male

License Number: PSY18393

D6. Directorio de salud mental

NPI: 1821013228

Provider English Spoken: Y

Cultural Competency: N

JOSEPH M SUOZZO

425 N DATE ST
ESCONDIDO, CA 92025

Phone: (760) 520-8340

Fax: (858) 633-4698

After Hours Phone: (760)
520-8340

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 18\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

TEETER-WITT, ALYSSA

Provider Gender: Female

License Number: PSY31075

NPI: 1932308442

Provider English Spoken: Y

Cultural Competency: N

ALYSSA TEETER-WITT

426 N DATE ST
ESCONDIDO, CA 92025

Phone: (760) 690-5900

Fax: (858) 633-4693

After Hours Phone: (760)
690-5900

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

TEETER-WITT, ALYSSA

Provider Gender: Female

License Number: PSY31075

NPI: 1932308442

Provider English Spoken: Y

Cultural Competency: N

ALYSSA TEETER-WITT

425 N DATE ST
ESCONDIDO, CA 92025

Phone: (760) 520-8300

Fax: (858) 633-4698

After Hours Phone: (760)
520-8300

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

THOMAS, PAULA

Provider Gender: Female

License Number: LCS29517

NPI: 1821389966

Provider English Spoken: Y

Cultural Competency: N

PAULA M THOMAS

425 N DATE ST
ESCONDIDO, CA 92025

Phone: (760) 520-8340

Fax: (360) 462-2752

After Hours Phone: (760)
520-8340

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, German, French,

Cappadocian Greek, Hindi

TDD: U

Min/Max Age: 18\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

VALLEZ-BARLAM, ANDREA

Provider Gender: Female

License Number: PSY9962

NPI: 1710902143

Provider English Spoken: Y

Provider Language(s) Spoken:

German, Spanish

Cultural Competency: N

ANDREA VALLEZ-BARLAM

488 E VALLEY PKWY STE
404

ESCONDIDO, CA 92025

Phone: (760) 466-9800

Fax: (858) 633-4693

After Hours Phone: (760)
466-9800

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
German, Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

VALLEZ-BARLAM, ANDREA

Provider Gender: Female

D6. Directorio de salud mental

License Number: PSY9962

NPI: 1710902143

Provider English Spoken: Y

Provider Language(s) Spoken:

German, Spanish

Cultural Competency: N

ANDREA VALLEZ-BARLAM

426 N DATE ST

ESCONDIDO, CA 92025

Phone: (760) 690-5900

Fax: (858) 633-4693

After Hours Phone: (760) 690-5900

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

VAQUERO, JUANA

Provider Gender: Female

License Number: PSY28364

NPI: 1023459708

Provider English Spoken: Y

Provider Language(s) Spoken:

Spanish

Cultural Competency: N

JUANA VAQUERO

425 N DATE ST

ESCONDIDO, CA 92025

Phone: (760) 520-8300

Fax: (858) 633-4698

After Hours Phone: (760) 520-8300

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

VENNAM, VAMSIKRISHNA

Provider Gender: Male

License Number: 20A19415

NPI: 1679070569

Provider English Spoken: Y

Cultural Competency: N

VAMSIKRISHNA K VENNAM

425 N DATE ST

ESCONDIDO, CA 92025

Phone: (760) 520-8300

Fax: (858) 633-4698

After Hours Phone: (760) 520-8300

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

WOODWORTH, JENNIFER

Provider Gender: Female

License Number: PSY26963

NPI: 1639362494

Provider English Spoken: Y

Cultural Competency: N

JENNIFER WOODWORTH

425 N DATE ST

ESCONDIDO, CA 92025

Phone: (760) 520-8340

Fax: (858) 633-4698

After Hours Phone: (760) 520-8340

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FALLBROOK

GILROY, LAURA

Provider Gender: Female

License Number: LCS27123

NPI: 1437427978

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N

LAURA L GILROY

1328 S MISSION RD
FALLBROOK, CA 92028

Phone: (760) 451-4720

Fax: (760) 457-4700

After Hours Phone: (760) 451-4720

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 7\999




American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER





MAGEE, ANNA





D6. Directorio de salud mental

Provider Gender: Female
License Number: LCS107407
NPI: 1194234609
Provider English Spoken: Y
Cultural Competency: N
ANNA M MAGEE






 1328 S MISSION RD
FALLBROOK, CA 92028
 Phone: (760) 451-4720
 Fax: (760) 457-4700
 After Hours Phone: (760)
451-4720
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Language(s) Spoken:
Spanish
TDD: U
Min/Max Age: 5\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER


MCAULEY, ROBERT

Provider Gender: Male
License Number: G23317
NPI: 1194881888
Provider English Spoken: Y
Cultural Competency: N
ROBERT A MCAULEY
 1328 S MISSION RD
FALLBROOK, CA 92028
 Phone: (760) 451-4730
 Fax: (760) 457-4700
 After Hours Phone: (760)
451-4730
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 12\999




American Sign Language (ASL):  After Hours Phone: (760)
541-4730
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

MILES, RENEE

Provider Gender: Female
License Number: LCS70204
NPI: 1053763623
Provider English Spoken: Y
Cultural Competency: N
RENEE S MILES
 1328 S MISSION RD
FALLBROOK, CA 92028
 Phone: (760) 451-4720
 Fax: (760) 457-4700
 After Hours Phone: (760)
451-4720
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999








American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

RODARTE, GABRIEL

Provider Gender: Male
License Number: A87906
NPI: 1184649212
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: N
GABRIEL RODARTE
 1328 S MISSION RD
FALLBROOK, CA 92028
 Phone: (760) 541-4730
 Fax: (760) 457-4700

IMPERIAL BEACH

GONZALEZ, CLAUDIA

Provider Gender: Female
License Number: LCS100328
NPI: 1770055543
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: N
CLAUDIA GONZALEZ
 949 PALM AVE
IMPERIAL BEACH, CA 91932
 Phone: (619) 429-3733
 Fax: (619) 628-5550
 After Hours Phone: (619)
429-3733
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

LA JOLLA

BAILIS, JESSICA

D6. Directorio de salud mental

Provider Gender: Female


License Number: PSY27537


NPI: 1760739049


Provider English Spoken: Y

Cultural Competency: N

JESSICA R BAILIS


 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

 *After Hours Phone: (800)
926-8273*


 *Website: N/A*

Accepting New Patients: Yes

 *Site English Spoken: Y*
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT
PROVIDER*

BOOTH, CHRISTOPHER

Provider Gender: Male

License Number: PSY26073


NPI: 1568893162


Provider English Spoken: Y

Cultural Competency: N

CHRISTOPHER R BOOTH


 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

 *After Hours Phone: (800)
926-8273*

 *Website: N/A*


Accepting New Patients: Yes

 *Site English Spoken: Y*
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

BOOTH, CHRISTOPHER

Provider Gender: Male

License Number: PSY26073

NPI: 1568893162


Provider English Spoken: Y

Cultural Competency: N

CHRISTOPHER R BOOTH


 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

 *After Hours Phone: (800)
926-8273*

 *Website: N/A*


Accepting New Patients: Yes

 *Site English Spoken: Y*
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

BOUTELLE, KERRI

Provider Gender: Male

License Number: PSY21823


NPI: 1780620906

Provider English Spoken: Y

Cultural Competency: N

KERRI N BOUTELLE

 3344 N TORREY PINES CT
LA JOLLA, CA 92037


 *Phone: (800) 926-8273*

Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8273*

 *Website: N/A*

Accepting New Patients: Yes

 *Site English Spoken: Y*
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT
PROVIDER*

BOUTELLE, KERRI

Provider Gender: Male


License Number: PSY21823


NPI: 1780620906


Provider English Spoken: Y

Cultural Competency: N

KERRI N BOUTELLE


 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

 *After Hours Phone: (800)
926-8273*

 *Website: N/A*


Accepting New Patients: Yes

 *Site English Spoken: Y*
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT
PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

BOUTELLE, KERRI

Provider Gender: Male

License Number: PSY21823

NPI: 1780620906

Provider English Spoken: Y

Cultural Competency: N

D6. Directorio de salud mental

KERRI N BOUTELLE

8950 VILLA LA JOLLA DR
STE C212

LA JOLLA, CA 92037

Phone: (858) 246-1654

After Hours Phone: (858)
246-1654

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

CHESHER, NICHOLAS

Provider Gender: Male

License Number: PSY29290

NPI: 1124539697

Provider English Spoken: Y

Cultural Competency: N

NICHOLAS J CHESHER

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

CRANDAL, BRENT

Provider Gender: Male

License Number: PSY26294

NPI: 1588739452

Provider English Spoken: Y

Cultural Competency: N

BRENT R CRANDAL

8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

Phone: (800) 926-8372

Fax: (888) 539-8781

After Hours Phone: (800)
926-8372

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

DUARTE, KRISTEN

Provider Gender: Female

License Number: PSY31227

NPI: 1093119364

Provider English Spoken: Y

Cultural Competency: N

KRISTEN L DUARTE

8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

DUARTE, KRISTEN

Provider Gender: Female

License Number: PSY31227

NPI: 1093119364

Provider English Spoken: Y

Cultural Competency: N

KRISTEN L DUARTE

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

EICHEN, DAWN

Provider Gender: Female

License Number: PSY27823

NPI: 1861043366

Provider English Spoken: Y

Cultural Competency: N

DAWN M EICHEN

3344 N TORREY PINES CT

D6. Directorio de salud mental

LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
🕒 After Hours Phone: (800) 926-8273
🌐 Website: N/A
Accepting New Patients: Yes

📄 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER

EICHEN, DAWN

Provider Gender: Female
License Number: PSY27823
NPI: 1861043366
Provider English Spoken: Y
Cultural Competency: N

DAWN M EICHEN
📍 8950 VILLA LA JOLLA DR
STE C212

LA JOLLA, CA 92037
☎ Phone: (858) 246-1654
Fax: (858) 246-3181
🕒 After Hours Phone: (858) 246-1654
🌐 Website: N/A
Accepting New Patients: Yes

📄 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM

EICHEN, DAWN

Provider Gender: Female
License Number: PSY27823
NPI: 1861043366
Provider English Spoken: Y
Cultural Competency: N
DAWN M EICHEN

📍 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781

🕒 After Hours Phone: (800) 926-8273
🌐 Website: N/A
Accepting New Patients: Yes

📄 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM

ELLEDDGE, LINDSAY

Provider Gender: Female
License Number: LCS96136
NPI: 1619428828
Provider English Spoken: Y
Cultural Competency: N
LINDSAY E ELLEDGE

📍 8950 VILLA LA JOLLA DR
STE 101
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781

🕒 After Hours Phone: (800) 926-8273
🌐 Website: N/A
Accepting New Patients: Yes
📄 Site English Spoken: Y

TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER

FINN, DAPHNA

Provider Gender: Female
License Number: A152291
NPI: 1639522725
Provider English Spoken: Y
Cultural Competency: N

DAPHNA M FINN
📍 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781

🕒 After Hours Phone: (800) 926-8273
🌐 Website: N/A

Accepting New Patients: Yes
📄 Site English Spoken: Y
TDD: U







Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT PROVIDER
🕒 Hours: M-F
8:00AM-5:00PM

HUEGE, STEVEN



Provider Gender: Male
License Number: C141122
NPI: 1598716367
Provider English Spoken: Y
Cultural Competency: N

STEVEN F HUEGE
📍 8950 VILLA LA JOLLA DR








D6. Directorio de salud mental

STE C101
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM




HUEGE, STEVEN





Provider Gender: Male
License Number: C141122
NPI: 1598716367
Provider English Spoken: Y
Cultural Competency: N
STEVEN F HUEGE
 9444 MEDICAL CENTER DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM

KHAFAJA, MOHAMAD







Provider Gender: Male
License Number: A115892
NPI: 1780867119
Provider English Spoken: Y
Provider Language(s) Spoken:
Arabic
Cultural Competency: N
MOHAMAD H KHAFAJA
 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM

LASSWELL, EVE

Provider Gender: Female
License Number: PSY30220
NPI: 1013483635
Provider English Spoken: Y
Cultural Competency: N
EVE N LASSWELL
 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM

LEDBETTER, ALEX

Provider Gender: Male
License Number: 20A20454
NPI: 1073017315
Provider English Spoken: Y
Cultural Competency: N
ALEX W LEDBETTER
 8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

LEE, DAVID

Provider Gender: Male
License Number: A124329
NPI: 1871884130
Provider English Spoken: Y
Provider Language(s) Spoken:

D6. Directorio de salud mental

Korean

Cultural Competency: N

DAVID J LEE

9350 CAMPUS POINT DR
STE LLB
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

LI, XIA

Provider Gender: Female

License Number: A163344

NPI: 1336670413

Provider English Spoken: Y

Provider Language(s) Spoken:

Mandarin

Cultural Competency: N

XIA LI

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

LINKE, SARAH

Provider Gender: Female

License Number: PSY27116

NPI: 1487026415

Provider English Spoken: Y

Cultural Competency: N

SARAH E LINKE

8939 VILLA LA JOLLA DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

MAGINOT-CHESHER, TAMARA

Provider Gender: Female

License Number: PSY28678

NPI: 1043441165

Provider English Spoken: Y

Cultural Competency: N

TAMARA R MAGINOT

CHESHER

9300 CAMPUS POINT DR

LA JOLLA, CA 92037

Phone: (858) 534-7792

Fax: (619) 471-9017

After Hours Phone: (858)
534-7792

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

MARTINEZ, STEPHANIE

Provider Gender: Female

License Number: A152787

NPI: 1699126367

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N

STEPHANIE MARTINEZ

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

D6. Directorio de salud mental

8:00AM-5:00PM

MAXWELL, BENJAMIN

Provider Gender: Male

License Number: A108124

NPI: 1740415926

Provider English Spoken: Y

Cultural Competency: N

BENJAMIN K MAXWELL

8950 VILLA LA JOLLA DR
LA JOLLA, CA 92037

Phone: (858) 534-8019

Fax: (858) 534-6727

After Hours Phone: (858)
534-8019

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\150

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
9:00AM-5:00PM

MENDEZ, ANDRES

Provider Gender: Male

License Number: PSY28907

NPI: 1841482692

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N

ANDRES G MENDEZ

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

MOORE, SHAVON

Provider Gender: Female

License Number: A152789

NPI: 1053682773

Provider English Spoken: Y

Cultural Competency: N

SHAVON C MOORE

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

MOORE, SHAVON

Provider Gender: Female

License Number: A152789

NPI: 1053682773

Provider English Spoken: Y

Cultural Competency: N

SHAVON C MOORE

9300 CAMPUS POINT DR
LA JOLLA, CA 92037

Phone: (800) 826-8273

Fax: (888) 539-8781

After Hours Phone: (800)
826-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

NGUYEN, HOANG

Provider Gender: Male

License Number: G83977

NPI: 1720011620

Provider English Spoken: Y

Provider Language(s) Spoken:
Vietnamese

Cultural Competency: N

HOANG A NGUYEN

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes


Site English Spoken: Y
TDD: U


D6. Directorio de salud mental

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

NGUYEN, HOANG

Provider Gender: Male

License Number: G83977

NPI: 1720011620


Provider English Spoken: Y


Provider Language(s) Spoken:
Vietnamese

Cultural Competency: N

HOANG A NGUYEN


 9300 CAMPUS POINT DR
LA JOLLA, CA 92037

 Phone: (619) 497-6673

 After Hours Phone: (619)
497-6673

 Website: N/A


Accepting New Patients: Yes


 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

PELHAM, WILLIAM

Provider Gender: Male

License Number: PSY33091

NPI: 1306629399


Provider English Spoken: Y


Cultural Competency: N

WILLIAM E PELHAM

 8950 VILLA LA JOLLA DR
STE C101


LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

QAYOUMI, WALI

Provider Gender: Male

License Number: A168429

NPI: 1093178220

Provider English Spoken: Y


Provider Language(s) Spoken:
French

Cultural Competency: N

WALI Z QAYOUMI

 9350 CAMPUS POINT DR
STE LLB

LA JOLLA, CA 92037


 Phone: (619) 284-3746

Fax: (888) 579-8781

 After Hours Phone: (619)
284-3746

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

QAYOUMI, WALI

Provider Gender: Male

License Number: A168429

NPI: 1093178220


Provider English Spoken: Y

Provider Language(s) Spoken:
French


Cultural Competency: N

WALI Z QAYOUMI

 9500 GILMAN DR STE 2069
LA JOLLA, CA 92093


 Phone: (858) 822-5881

Fax: (888) 539-8781

 After Hours Phone: (858)
822-5881

 Website: N/A


Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

REED, KRISTIE

Provider Gender: Female

License Number: PSY30934

NPI: 1679869556


Provider English Spoken: Y

Cultural Competency: N

KRISTIE L REED

 8950 VILLA LA JOLLA DR
STE C212


LA JOLLA, CA 92037

 Phone: (800) 926-8372

Fax: (888) 539-8781

D6. Directorio de salud mental

 After Hours Phone: (800) 926-8372

 Website: N/A

Accepting New Patients: Yes


 Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

REED, KRISTIE

Provider Gender: Female

License Number: PSY30934


NPI: 1679869556

Provider English Spoken: Y

Cultural Competency: N


KRISTIE L REED

 3344 N TORREY PINES CT
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

RICHARD, MARLA

Provider Gender: Female

License Number: G65188

NPI: 1578720934


Provider English Spoken: Y


Cultural Competency: N


MARLA G RICHARD

 8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

RICHARD, MARLA

Provider Gender: Female

License Number: G65188


NPI: 1578720934


Provider English Spoken: Y

Cultural Competency: N

MARLA G RICHARD

 9300 MEDIAL CENTER DR
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

SCHNEEBERGER, ANDRES

Provider Gender: Male

License Number: C175502

NPI: 1184867376


Provider English Spoken: Y

Cultural Competency: N

ANDRES R SCHNEEBERGER

 8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

 Website: N/A

Accepting New Patients: Yes


 Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

TARLE, STEPHANIE

Provider Gender: Female

License Number: PSY32155

NPI: 1659920403


Provider English Spoken: Y

Cultural Competency: N


STEPHANIE J TARLE

 8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y

D6. Directorio de salud mental

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

TARVER, LESLIE

Provider Gender: Female

License Number: A169181

NPI: 1811300957


Provider English Spoken: Y

Cultural Competency: N

LESLIE B TARVER

 8950 VILLA LA JOLLA DR
STE C101

LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273


 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

THOMAS, KELSEY

Provider Gender: Female

License Number: PSY29738


NPI: 1700264264

Provider English Spoken: Y

Cultural Competency: N

KELSEY R THOMAS

 8950 VILLA LA JOLLA DR
STE 101
LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

WISHNEK, HANNAH

Provider Gender: Female

License Number: LCS105699


NPI: 1578012043

Provider English Spoken: Y


Cultural Competency: N

HANNAH K WISHNEK

 8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

ZLATAR, ZVINKA

Provider Gender: Female

License Number: PSY26230

NPI: 1497139059


Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N

ZVINKA Z ZLATAR

 9444 MEDICAL CENTER DR
LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

 Website: N/A


Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

LAKESIDE

BRUNETTO, HEIDI

Provider Gender: Female

License Number: PSY26809


NPI: 1023250453

Provider English Spoken: Y

Cultural Competency: N

HEIDI M BRUNETTO

 10039 VINE ST
LAKESIDE, CA 92040


 Phone: (619) 390-9975

Fax: (360) 462-2744

 After Hours Phone: (619)
390-9975

 Website: N/A

Accepting New Patients: Yes


 Site English Spoken: Y
TDD: U


D6. Directorio de salud mental

Min/Max Age: 0\999

American Sign Language (ASL):  2743 HIGHLAND AVE

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH
8:00AM-5:00PM

NATIONAL CITY


CHOI, MIN

Provider Gender: Female
License Number: MFC135952
NPI: 1871195107

Provider English Spoken: Y
Cultural Competency: N

MIN H CHOI


 2743 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (844) 200-2426
Fax: (619) 356-2726

 After Hours Phone: (844)
200-2426

 Website: N/A


Accepting New Patients: Yes


 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):  502 EUCLID AVE STE 305

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-6:00PM


FLANIGAN, MARILYN

Provider Gender: Female
License Number: MFC97326
NPI: 1588996912

Provider English Spoken: Y
Cultural Competency: N

MARILYN Y FLANIGAN


 2743 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (844) 200-2426
Fax: (858) 578-4417

 After Hours Phone: (844)
200-2426

 Website: N/A

Accepting New Patients: Yes


 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):  2400 E 8TH ST

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-6:00PM

KUGEL, SAMUEL

Provider Gender: Male
License Number: A54412
NPI: 1497813968

Provider English Spoken: Y


Provider Language(s) Spoken:

Portuguese, Spanish


Cultural Competency: N

SAMUEL KUGEL

 502 EUCLID AVE STE 305
NATIONAL CITY, CA 91950


 Phone: (619) 472-2600
Fax: (619) 472-5721

 After Hours Phone: (619)
472-2600

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Languages(s) Spoken:
Spanish, Portuguese


TDD: U

Min/Max Age: 18\150

American Sign Language (ASL):  2400 E 8TH ST

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
9:00AM-5:00PM


LAD, NIKISHA

Provider Gender: Female
License Number: LCS120676
NPI: 1942857107


Provider English Spoken: Y
Cultural Competency: N

NIKISHA J LAD


 2400 E 8TH ST
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100
Fax: (619) 259-2807

 After Hours Phone: (619)
662-4100

 Website: N/A

Accepting New Patients: Yes


 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):  2400 E 8TH ST

N

 Accessibility: CONTACT PROVIDER

 Hours: SU 8:00AM-5:00PM
M-F 8:00AM-5:00PM


SACHS, MELISSA

Provider Gender: Female
License Number: LCS76968
NPI: 1649760356

Provider English Spoken: Y
Cultural Competency: N


MELISSA R SACHS

 2400 E 8TH ST
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100
Fax: (619) 259-2807

D6. Directorio de salud mental

 After Hours Phone: (619) 662-4100

 Website: N/A

Accepting New Patients: Yes


 Site English Spoken: Y


TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:30AM-5:30PM

SA 8:00AM-2:30PM

SILVEY, CHRISTOPHER

Provider Gender: Male

License Number: LCS85942


NPI: 1932793502

Provider English Spoken: Y

Cultural Competency: N

CHRISTOPHER J SILVEY

 2743 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (844) 200-2426

Fax: (619) 474-4008

 After Hours Phone: (844) 200-2426

 Website: N/A

Accepting New Patients: Yes


 Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

SIMMONS, ROBERT

Provider Gender: Male

License Number: LCS117787


NPI: 1689269631

Provider English Spoken: Y

Cultural Competency: N

ROBERT M SIMMONS

 2743 HIGHLAND AVE
NATIONAL CITY, CA 91950

 Phone: (844) 200-2426

Fax: (619) 434-9853

 After Hours Phone: (844) 200-2426

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH

8:00AM-6:00PM

F 8:00AM-5:00PM

OCEANSIDE

ACOSTA, AZUCENA

Provider Gender: Female

License Number: LCS98304

NPI: 1255937496

Provider English Spoken: Y


Provider Language(s) Spoken:

Spanish

Cultural Competency: N

AZUCENA ACOSTA

 517 N HORNE ST
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000

 Website: N/A

Accepting New Patients: Yes


 Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

ACOSTA, AZUCENA

Provider Gender: Female

License Number: LCS98304

NPI: 1255937496

Provider English Spoken: Y


Provider Language(s) Spoken:

Spanish

Cultural Competency: N

AZUCENA ACOSTA

 818 PIER VIEW WAY
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TU

8:00AM-5:00PM

W 8:00AM-7:00PM

TH-F 8:00AM-5:00PM

SA 9:00AM-4:00PM

ACOSTA, AZUCENA

D6. Directorio de salud mental

Provider Gender: Female
License Number: LCS98304
NPI: 1255937496
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: N
AZUCENA ACOSTA
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM

BELL, JENNIFER

Provider Gender: Female
License Number: 20A20702
NPI: 1154614956
Provider English Spoken: Y
Cultural Competency: N
JENNIFER L BELL
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000
Website: N/A
Accepting New Patients: Yes

Site English Spoken: Y
Site Language(s) Spoken:
Spanish, Chinese, Farsi
TDD: U
Min/Max Age: 5\80
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM

BELL, JENNIFER

Provider Gender: Female
License Number: 20A20702
NPI: 1154614956
Provider English Spoken: Y
Cultural Competency: N
JENNIFER L BELL
517 N HORNE ST
OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000
Website: N/A
Accepting New Patients: Yes

Site English Spoken: Y
Site Language(s) Spoken:
Spanish
TDD: U
Min/Max Age: 5\80
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM




BELL, JENNIFER

Provider Gender: Female
License Number: 20A20702
NPI: 1154614956
Provider English Spoken: Y
Cultural Competency: N
JENNIFER L BELL
818 PIER VIEW WAY
OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760)
631-5000
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Language(s) Spoken:
Spanish
TDD: U
Min/Max Age: 5\80
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM




CHALMERS, VIRGINIA





Provider Gender: Female
License Number: LCS28053
NPI: 1265613715
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: N
VIRGINIA C CHALMERS
619 CROUCH ST
OCEANSIDE, CA 92054
Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760)
736-6767

D6. Directorio de salud mental

 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER




CHRISTIANSON, WARREN





Provider Gender: Male
License Number: 20A9664
NPI: 1932359445
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: N
WARREN R CHRISTIANSON II
 517 N HORNE ST
OCEANSIDE, CA 92054
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000

 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-TH
8:00AM-7:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CHRISTIANSON, WARREN




Provider Gender: Male
License Number: 20A9664

NPI: 1932359445
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: N
WARREN R CHRISTIANSON II
 818 PIER VIEW WAY
OCEANSIDE, CA 92054
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000



 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-TH
8:00AM-7:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM






CHRISTIANSON, WARREN

Provider Gender: Male
License Number: 20A9664
NPI: 1932359445
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: N
WARREN R CHRISTIANSON II
 517 N HORNE ST
OCEANSIDE, CA 92054
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760)
631-5000
 Website: N/A

Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-TH
8:00AM-7:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CHRISTIANSON, WARREN

Provider Gender: Male
License Number: 20A9664
NPI: 1932359445
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: N
WARREN R CHRISTIANSON II
 818 PIER VIEW WAY
OCEANSIDE, CA 92054
 Phone: (760) 631-5000
Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-TH
8:00AM-7:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

D6. Directorio de salud mental

CHRISTIANSON, WARREN

Provider Gender: Male
License Number: 20A9664
NPI: 1932359445
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: N
WARREN R CHRISTIANSON II
📍 4700 N RIVER RD
OCEANSIDE, CA 92057
☎ Phone: (760) 631-5000
Fax: (760) 414-3892
🕒 After Hours Phone: (760)
631-5000
🌐 Website: N/A
Accepting New Patients: Yes
📄 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-TH
8:00AM-7:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CHRISTIANSON, WARREN

Provider Gender: Male
License Number: 20A9664
NPI: 1932359445
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: N
WARREN R CHRISTIANSON II
📍 4700 N RIVER RD
OCEANSIDE, CA 92057
☎ Phone: (760) 631-5000

Fax: (760) 414-3892
🕒 After Hours Phone: (760)
631-5000
🌐 Website: N/A
Accepting New Patients: Yes
📄 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-TH
8:00AM-7:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

COOK, SHERYL

Provider Gender: Female
License Number: PSY15449
NPI: 1750420816
Provider English Spoken: Y
Cultural Competency: N
SHERYL G COOK
📍 619 CROUCH ST STE 100
OCEANSIDE, CA 92054
☎ Phone: (760) 736-6767
Fax: (760) 736-6744

🕒 After Hours Phone: (760)
736-6767
🌐 Website: N/A
Accepting New Patients: Yes
📄 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M 9:00AM-6:15PM
W 9:00AM-6:00PM

CRUZ, VANESSA

Provider Gender: Female
License Number: LCS87166
NPI: 1285170662
Provider English Spoken: Y
Cultural Competency: N
VANESSA Y CRUZ
📍 818 PIER VIEW WAY
OCEANSIDE, CA 92054
☎ Phone: (760) 631-5000
Fax: (760) 414-3892
🕒 After Hours Phone: (760)
631-5000
🌐 Website: N/A
Accepting New Patients: Yes
📄 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
🕒 Hours: M-TH
9:00AM-7:00PM
F 9:00AM-5:00PM
SA 9:00AM-4:00PM

CRUZ, VANESSA

Provider Gender: Female
License Number: LCS87166
NPI: 1285170662
Provider English Spoken: Y
Cultural Competency: N
VANESSA Y CRUZ
📍 517 N HORNE ST
OCEANSIDE, CA 92054
☎ Phone: (760) 631-5000
Fax: (760) 414-3892
🕒 After Hours Phone: (760)
631-5000
🌐 Website: N/A
Accepting New Patients: Yes

D6. Directorio de salud mental

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

CRUZ, VANESSA

Provider Gender: Female

License Number: LCS87166

NPI: 1285170662

Provider English Spoken: Y

Cultural Competency: N

VANESSA Y CRUZ

818 PIER VIEW WAY
OCEANSIDE, CA 92054

Phone: (760) 631-5000
Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 4\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
9:00AM-7:00PM
F 9:00AM-5:00PM
SA 9:00AM-4:00PM

CRUZ, VANESSA

Provider Gender: Female

License Number: LCS87166

NPI: 1285170662

Provider English Spoken: Y

Cultural Competency: N

VANESSA Y CRUZ

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000
Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

DOUGHERTY, CHRISTINE

Provider Gender: Female

License Number: LCS26686

NPI: 1003194960

Provider English Spoken: Y

Cultural Competency: N

CHRISTINE A DOUGHERTY

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000
Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

DOUGHERTY, CHRISTINE

Provider Gender: Female

License Number: LCS26686

NPI: 1003194960

Provider English Spoken: Y

Cultural Competency: N

CHRISTINE A DOUGHERTY

818 PIER VIEW WAY
OCEANSIDE, CA 92054

Phone: (760) 631-5000
Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
8:00AM-8:00PM
F 8:00AM-5:00PM
SA 8:00AM-4:00PM

DOUGHERTY, CHRISTINE

Provider Gender: Female

License Number: LCS26686

NPI: 1003194960

Provider English Spoken: Y

Cultural Competency: N

CHRISTINE A DOUGHERTY

517 N HORNE ST
OCEANSIDE, CA 92054

Phone: (760) 631-5000
Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

D6. Directorio de salud mental

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

JENSEN, BRIAN

Provider Gender: Male

License Number: PSY26041


NPI: 1518138049

Provider English Spoken: Y

Cultural Competency: N

BRIAN M JENSEN

 619 CROUCH ST
OCEANSIDE, CA 92054


 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

KRAPES, MICHAEL

Provider Gender: Male

License Number: PSY25077


NPI: 1215233028

Provider English Spoken: Y

Cultural Competency: N

MICHAEL B KRAPES


 2210 MESA DR STE 300
OCEANSIDE, CA 92054

 Phone: (760) 736-6767


Fax: (760) 736-6744

 After Hours Phone: (760)

736-6767

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

MENDEZ, ADRIANA

Provider Gender: Female

License Number: LCS86435

NPI: 1356777361


Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N


ADRIANA J MENDEZ

 818 PIER VIEW WAY
OCEANSIDE, CA 92054


 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

MENDEZ, ADRIANA

Provider Gender: Female

License Number: LCS86435

NPI: 1356777361


Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N

ADRIANA J MENDEZ

 517 N HORNE ST
OCEANSIDE, CA 92054


 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000


 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

MENDEZ, ADRIANA

Provider Gender: Female

License Number: LCS86435

NPI: 1356777361


Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N

ADRIANA J MENDEZ

 4700 N RIVER RD
OCEANSIDE, CA 92057


 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: N/A

Accepting New Patients: Yes


 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

D6. Directorio de salud mental

N

 *Accessibility: CONTACT PROVIDER*


MEYERHOF, GRETA

*Provider Gender: Female
License Number: MFC32299
NPI: 1487196333*

*Provider English Spoken: Y
Cultural Competency: N*

GRETA R MEYERHOF


 4700 N RIVER RD
OCEANSIDE, CA 92057

 *Phone: (760) 631-5000*
Fax: (760) 414-3892

 *After Hours Phone: (760) 631-5000*

 *Website: N/A*


Accepting New Patients: Yes

 *Site English Spoken: Y*
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


MEYERHOF, GRETA

*Provider Gender: Female
License Number: MFC32299
NPI: 1487196333*


*Provider English Spoken: Y
Cultural Competency: N*

GRETA R MEYERHOF


 818 PIER VIEW WAY
OCEANSIDE, CA 92054

 *Phone: (760) 631-5000*
Fax: (760) 414-3892

 *After Hours Phone: (760) 631-5000*

 *Website: N/A*

Accepting New Patients: Yes

 *Site English Spoken: Y*
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


MEYERHOF, GRETA

*Provider Gender: Female
License Number: MFC32299
NPI: 1487196333*

*Provider English Spoken: Y
Cultural Competency: N*

GRETA R MEYERHOF


 517 N HORNE ST
OCEANSIDE, CA 92054

 *Phone: (760) 631-5000*
Fax: (760) 414-3892

 *After Hours Phone: (760) 631-5000*

 *Website: N/A*

Accepting New Patients: Yes

 *Site English Spoken: Y*
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

MONTEZ, REBECCA

*Provider Gender: Female
License Number: LCS26869
NPI: 1396047809*


*Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish*

Cultural Competency: N

REBECCA MONTEZ

 2210 MESA DR STE 5


OCEANSIDE, CA 92054

 *Phone: (760) 736-6767*
Fax: (760) 736-6744

 *After Hours Phone: (760) 736-6767*

 *Website: N/A*

Accepting New Patients: Yes

 *Site English Spoken: Y*
TDD: U

Min/Max Age: 18\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*


NEVILLE, MARGARET

*Provider Gender: Female
License Number: LCS82407
NPI: 1073682407*

*Provider English Spoken: Y
Cultural Competency: N*

MARGARET R NEVILLE


 818 PIER VIEW WAY
OCEANSIDE, CA 92054

 *Phone: (760) 631-5000*
Fax: (760) 414-3892

 *After Hours Phone: (760) 631-5000*

 *Website: N/A*


Accepting New Patients: Yes

 *Site English Spoken: Y*
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

NEVILLE, MARGARET

*Provider Gender: Female
License Number: LCS82407
NPI: 1073682407*


D6. Directorio de salud mental

Provider English Spoken: Y

Cultural Competency: N

MARGARET R NEVILLE

 517 N HORNE ST
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: N/A

Accepting New Patients: Yes


Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

NEVILLE, MARGARET

Provider Gender: Female

License Number: LCS82407


NPI: 1073682407

Provider English Spoken: Y

Cultural Competency: N


MARGARET R NEVILLE

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

ORTIZ, BEVERLY

Provider Gender: Female

License Number: MFC121355


NPI: 1760826572

Provider English Spoken: Y

Cultural Competency: N


BEVERLY L ORTIZ

 2210 MESA DR STE 300
OCEANSIDE, CA 92054

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

PATEL, MITESH

Provider Gender: Male

License Number: A181164


NPI: 1568880292

Provider English Spoken: Y

Cultural Competency: N


MITESH K PATEL

 4700 N RIVER RD
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: N/A

Accepting New Patients: Yes


Site English Spoken: Y

TDD: U

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M 8:00AM-5:00PM
TU 10:00AM-7:00PM
W-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

PATEL, MITESH

Provider Gender: Male

License Number: A181164


NPI: 1568880292

Provider English Spoken: Y

Cultural Competency: N

MITESH K PATEL

 517 N HORNE ST
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)
631-5000

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M 8:00AM-5:00PM
TU 10:00AM-7:00PM
W-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

PATEL, MITESH

Provider Gender: Male

License Number: A181164

NPI: 1568880292

Provider English Spoken: Y

Cultural Competency: N

D6. Directorio de salud mental

MITESH K PATEL

818 PIER VIEW WAY
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-5:00PM
TU 10:00AM-7:00PM
W-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

SANCHEZ, ADRIANA

Provider Gender: Female

License Number: LCS97093

NPI: 1609450451

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N

ADRIANA SANCHEZ

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

SANCHEZ, ADRIANA

Provider Gender: Female

License Number: LCS97093

NPI: 1609450451

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N

ADRIANA SANCHEZ

818 PIER VIEW WAY
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

SANCHEZ, ADRIANA

Provider Gender: Female

License Number: LCS97093

NPI: 1609450451

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N

ADRIANA SANCHEZ

517 N HORNE ST
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-4:00PM

SLOAN, CRISTINA

Provider Gender: Female

License Number: MFC137279

NPI: 1912456377

Provider English Spoken: Y

Cultural Competency: N

CRISTINA I SLOAN

4700 N RIVER RD
OCEANSIDE, CA 92057

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
Site Language(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

D6. Directorio de salud mental

SLOAN, CRISTINA

Provider Gender: Female
License Number: MFC137279
NPI: 1912456377
Provider English Spoken: Y
Cultural Competency: N

CRISTINA I SLOAN

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3892

After Hours Phone: (760) 631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

SLOAN, CRISTINA

Provider Gender: Female
License Number: MFC137279
NPI: 1912456377
Provider English Spoken: Y
Cultural Competency: N

CRISTINA I SLOAN

517 N HORNE ST
OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3892

After Hours Phone: (760) 631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

SMITH, SONYA

Provider Gender: Female
License Number: LCS82598
NPI: 1902070857

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

SONYA L SMITH

4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
Fax: (760) 414-3892

After Hours Phone: (760) 631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

SMITH, SONYA

Provider Gender: Female
License Number: LCS82598
NPI: 1902070857

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

SONYA L SMITH

517 N HORNE ST
OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3892

After Hours Phone: (760) 631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

SMITH, SONYA

Provider Gender: Female
License Number: LCS82598
NPI: 1902070857

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

SONYA L SMITH

818 PIER VIEW WAY
OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3892

After Hours Phone: (760) 631-5000

Website: N/A



Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999





D6. Directorio de salud mental

American Sign Language (ASL):  Website: N/A
N
 Accessibility: CONTACT PROVIDER

WILSON, CARLENE

Provider Gender: Female
License Number: LCS74685
NPI: 1508327081
Provider English Spoken: Y
Cultural Competency: N




CARLENE WILSON




 818 PIER VIEW WAY
OCEANSIDE, CA 92054
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760) 631-5000
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):  Website: N/A
N
 Accessibility: CONTACT PROVIDER

WILSON, CARLENE

Provider Gender: Female
License Number: LCS74685
NPI: 1508327081
Provider English Spoken: Y
Cultural Competency: N

CARLENE WILSON






 517 N HORNE ST
OCEANSIDE, CA 92054
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760) 631-5000

Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):  Website: N/A
N
 Accessibility: CONTACT PROVIDER

WILSON, CARLENE

Provider Gender: Female
License Number: LCS74685
NPI: 1508327081
Provider English Spoken: Y
Cultural Competency: N

CARLENE WILSON

 4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
Fax: (760) 414-3892
 After Hours Phone: (760) 631-5000
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999

American Sign Language (ASL):  Website: N/A
N










 Accessibility: CONTACT PROVIDER

POWAY

KULKARNI, NISHAT

Provider Gender: Male
License Number: A187134
NPI: 1669034732
Provider English Spoken: Y
Cultural Competency: N




NISHAT KULKARNI

 13010 POWAY RD
POWAY, CA 92064
 Phone: (858) 218-3000
Fax: (360) 462-2742
 After Hours Phone: (858) 218-3000
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):  Website: N/A
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

MODHWADIA, MAMTA

Provider Gender: Female
License Number: A113990
NPI: 1043353667
Provider English Spoken: Y
Provider Language(s) Spoken: German, Gujarati
Cultural Competency: N

MAMTA D MODHWADIA


 13010 POWAY RD
POWAY, CA 92064
 Phone: (858) 218-3000
Fax: (360) 462-2742
 After Hours Phone: (858) 218-3000
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
TDD: U

D6. Directorio de salud mental

Min/Max Age: 16\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

9:00AM-5:00PM

POSTLETHWAITE, ALEJANDRA

Provider Gender: Female

License Number: A88938

NPI: 1750566915


Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

ALEJANDRA POSTLETHWAITE

 13010 POWAY RD
POWAY, CA 92064

 Phone: (858) 218-3000

Fax: (360) 462-2742

 After Hours Phone: (858)
218-3000

 Website: N/A

Accepting New Patients: Yes


 Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

STREET, KYLE

Provider Gender: Male

License Number: 20A21304

NPI: 1457912131


Provider English Spoken: Y

Cultural Competency: N

KYLE A STREET


 13010 POWAY RD

POWAY, CA 92064

 Phone: (858) 218-3000


Fax: (360) 462-2742

 After Hours Phone: (858)
218-3000

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Languages(s) Spoken: Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F

8:00AM-5:00PM

VALLEZ-BARLAM, ANDREA

Provider Gender: Female

License Number: PSY9962

NPI: 1710902143


Provider English Spoken: Y

Provider Language(s) Spoken: German, Spanish

Cultural Competency: N

ANDREA VALLEZ-BARLAM

 13010 POWAY RD
POWAY, CA 92064

 Phone: (858) 218-3000


Fax: (858) 633-4688

 After Hours Phone: (858)
218-3000

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Languages(s) Spoken: Spanish


TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
9:00AM-5:00PM

SAN DIEGO

ABERCROMBIE, SHERI

Provider Gender: Female

License Number: PSY18536


NPI: 1932292422

Provider English Spoken: Y

Cultural Competency: N

SHERI ABERCROMBIE

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925


Fax: (858) 633-4680

 After Hours Phone: (858)
279-0925

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Languages(s) Spoken: Spanish


TDD: U

Min/Max Age: 18\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:30AM-5:30PM
SA 8:30AM-4:00PM

ABERCROMBIE, SHERI

Provider Gender: Female

License Number: PSY18536

NPI: 1932292422

Provider English Spoken: Y



Cultural Competency: N

D6. Directorio de salud mental

SHERI ABERCROMBIE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
Fax: (858) 633-4680
 After Hours Phone: (858)
810-8700
 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
 Site Language(s) Spoken:
Spanish

TDD: U

Min/Max Age: 18\999

American Sign Language (ASL):

N



 Accessibility: CONTACT
PROVIDER

ARONLEE, TRACY

Provider Gender: Female
License Number: LCS83778
NPI: 1619304748

Provider English Spoken: Y
Cultural Competency: N


TRACY S ARONLEE

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
Fax: (858) 633-4680

 After Hours Phone: (858)
279-0925

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 2\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

ARONLEE, TRACY

Provider Gender: Female
License Number: LCS83778
NPI: 1619304748

Provider English Spoken: Y
Cultural Competency: N


TRACY S ARONLEE

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
Fax: (858) 633-4680

 After Hours Phone: (858)
810-8700

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 2\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER



BANKS, SARAH

Provider Gender: Female
License Number: PSY30296
NPI: 1164701132

Provider English Spoken: Y
Cultural Competency: N


SARAH J BANKS

 200 W ARBOR DR FL 1
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273

 Website: N/A

Accepting New Patients: Yes


 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


BANKS, SARAH

Provider Gender: Female
License Number: PSY30296
NPI: 1164701132

Provider English Spoken: Y
Cultural Competency: N

SARAH J BANKS


 6655 ALVARADO RD
SAN DIEGO, CA 92120

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

 Website: N/A


Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


BANKS, SARAH


Provider Gender: Female
License Number: PSY30296
NPI: 1164701132

Provider English Spoken: Y
Cultural Competency: N





SARAH J BANKS

 4510 EXECUTIVE DR STE
325

 SAN DIEGO, CA 92121
Phone: (800) 926-8273





 After Hours Phone: (800)
926-8273

D6. Directorio de salud mental

 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM








BARRON, KAVITA

Provider Gender: Female
License Number: A155596
NPI: 1821418542
Provider English Spoken: Y
Cultural Competency: N
KAVITA BARRON

 200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM







BASS, GURGIANA

Provider Gender: Female
License Number: PSY24750
NPI: 1639325277
Provider English Spoken: Y
Cultural Competency: N






GURGIANA BASS
 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 After Hours Phone: (858)
279-0925
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 18\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M 8:00AM-4:30PM
TU 8:00AM-0:00PM
W 8:00AM-4:30PM
TH 8:00AM-0:00PM

BASS, GURGIANA





Provider Gender: Female
License Number: PSY24750
NPI: 1639325277
Provider English Spoken: Y
Cultural Competency: N
GURGIANA BASS

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
Fax: (858) 633-4680
 After Hours Phone: (858)
810-8700
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 18\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

BREEDLOVE, AMANDA


Provider Gender: Female
License Number: MFC139230
NPI: 1316487119
Provider English Spoken: Y
Cultural Competency: N
AMANDA A BREEDLOVE
 1666 PRECISION PARK LN
SAN DIEGO, CA 92173
 Phone: (619) 662-4100
Fax: (619) 785-3384
 After Hours Phone: (619)
662-4100
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM

BROWN, DARCIE

Provider Gender: Female
License Number: MFC119851
NPI: 1639796071
Provider English Spoken: Y
Cultural Competency: N
DARCIE D BROWN
 16950 VIA TAZON
SAN DIEGO, CA 92127
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
 Website: N/A

D6. Directorio de salud mental


Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER



 Hours: M-F
8:00AM-5:00PM

CALLAGHAN, KATHRYN

Provider Gender: Female
License Number: MFC106901
NPI: 1558768812

Provider English Spoken: Y
Cultural Competency: N



KATHRYN R CALLAGHAN

 2630 1ST AVE
SAN DIEGO, CA 92103
 Phone: (619) 234-2158
Fax: (619) 234-0206

 After Hours Phone: (619)
234-2158

 Website: N/A

Accepting New Patients: Yes


 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


CEBALLOS, JACQUELINE


Provider Gender: Female
License Number: LCS110194
NPI: 1093350258

Provider English Spoken: Y

Cultural Competency: N
JACQUELINE CEBALLOS



 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-9025
Fax: (858) 633-4680

 After Hours Phone: (858)
279-9025

 Website: N/A

Accepting New Patients: Yes


 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


CEBALLOS, JACQUELINE

Provider Gender: Female
License Number: LCS110194
NPI: 1093350258


Provider English Spoken: Y
Cultural Competency: N

JACQUELINE CEBALLOS



 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700
Fax: (858) 633-4680

 After Hours Phone: (858)
810-8700

 Website: N/A

Accepting New Patients: Yes


 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


CHESHER, NICHOLAS

Provider Gender: Male
License Number: PSY29290
NPI: 1124539697

Provider English Spoken: Y
Cultural Competency: N

NICHOLAS J CHESHER


 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273


 Website: N/A


Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

CHOI, MIN







Provider Gender: Female
License Number: MFC135952
NPI: 1871195107

Provider English Spoken: Y
Cultural Competency: N



MIN H CHOI

 10737 CAMINO RUIZ STE








D6. Directorio de salud mental

235
SAN DIEGO, CA 92126
 Phone: (844) 200-2426
Fax: (858) 578-4417
 After Hours Phone: (844)
200-2426
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-6:00PM






CIOBANU, COSMINA



Provider Gender: Female
License Number: A137628
NPI: 1285049932
Provider English Spoken: Y
Cultural Competency: N
COSMINA S CIOBANU
 3010 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 576-1700
Fax: (858) 966-8164
 After Hours Phone: (858)
576-1700
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM

CIOBANU, COSMINA








Provider Gender: Female
License Number: A137628
NPI: 1285049932
Provider English Spoken: Y
Cultural Competency: N
COSMINA S CIOBANU
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 576-1700
Fax: (858) 966-8164
 After Hours Phone: (858)
576-1700
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM

CIOBANU, COSMINA

Provider Gender: Female
License Number: A137628
NPI: 1285049932
Provider English Spoken: Y
Cultural Competency: N
COSMINA S CIOBANU
 8001 FROST ST
SAN DIEGO, CA 92123
 Phone: (858) 576-1700
Fax: (858) 966-8164
 After Hours Phone: (858)
576-1700
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y

TDD: U
Min/Max Age: 0\19
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM




CIOBANU, COSMINA

Provider Gender: Female
License Number: A137628
NPI: 1285049932
Provider English Spoken: Y
Cultural Competency: N
COSMINA S CIOBANU
 4510 EXECUTIVE DR STE
315
SAN DIEGO, CA 92121
 Phone: (858) 534-8019
 After Hours Phone: (858)
534-8019
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM

CLEMENT, LUIS








Provider Gender: Male
License Number: PSY28534
NPI: 1235364712
Provider English Spoken: Y
Cultural Competency: N
LUIS F CLEMENT

D6. Directorio de salud mental

 2630 1ST AVE
SAN DIEGO, CA 92103
 Phone: (619) 234-2158
Fax: (619) 234-0206
 After Hours Phone: (619)
234-2158
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER

CRISOL, CAROLINE

Provider Gender: Female
License Number: MFC88616
NPI: 1962663617
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: N
CAROLINE M CRISOL LMFT
INC

 950 S EUCLID AVE
SAN DIEGO, CA 92114
 Phone: (619) 662-4100
Fax: (619) 662-4158
 After Hours Phone: (619)
662-4100
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT



PROVIDER

DEACON, CASSIE

Provider Gender: Female
License Number: LCS94105
NPI: 1720452998
Provider English Spoken: Y
Cultural Competency: N
CASSIE C DEACON


 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
Fax: (858) 633-4680
 After Hours Phone: (858)
810-8700
 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish



TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N




 Accessibility: CONTACT
PROVIDER

 Hours: M 8:30AM-5:30PM
TU 5:30PM-8:30PM
W-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

DEACON, CASSIE

Provider Gender: Female
License Number: LCS94105
NPI: 1720452998
Provider English Spoken: Y
Cultural Competency: N
CASSIE C DEACON

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
Fax: (858) 633-4680

 After Hours Phone: (858)
279-0925
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M 8:30AM-5:30PM
TU 5:30PM-8:30PM
W-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

DIAZ, JAENAI

Provider Gender: Female
License Number: LCS80689
NPI: 1508241811
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish

Cultural Competency: N

JAENAI DIAZ

 350 DICKINSON ST
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999
American Sign Language (ASL):
N




 Accessibility: CONTACT
PROVIDER

D6. Directorio de salud mental

DIOKNO, RHODA

Provider Gender: Female
License Number: PSY28073
NPI: 1629109483
Provider English Spoken: Y
Cultural Competency: N

ROHDA CARINO DIOKNO

 2630 1ST AVE
SAN DIEGO, CA 92103
 Phone: (619) 234-2158
Fax: (619) 234-0206
 After Hours Phone: (619)
234-2158
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER


DOLNAK, DOUGLAS

Provider Gender: Male
License Number: 20A6059
NPI: 1316147085
Provider English Spoken: Y
Cultural Competency: N
DOUGLAS R DOLNAK
 10737 CAMINO RUIZ
SAN DIEGO, CA 92126
 Phone: (844) 200-2426
Fax: (619) 474-4008
 After Hours Phone: (844)
200-2426
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999


American Sign Language (ASL):
N



 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-6:00PM

DOSS, KATIE

Provider Gender: Female
License Number: LCS112693
NPI: 1134825979
Provider English Spoken: Y
Cultural Competency: N
KATIE L DOSS

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
Fax: (858) 633-4680
 After Hours Phone: (858)
279-0925
 Website: N/A
Accepting New Patients: Yes


 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER



 Hours: M-F
8:00AM-5:00PM

DOSS, KATIE

Provider Gender: Female
License Number: LCS112693
NPI: 1134825979
Provider English Spoken: Y
Cultural Competency: N
KATIE L DOSS

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
Fax: (858) 633-4680
 After Hours Phone: (858)
810-8700
 Website: N/A

Accepting New Patients: Yes


 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Hours: M-F
8:00AM-5:00PM

DSOUZA, NICOLE

Provider Gender: Male
License Number: LCS101958
NPI: 1225462799
Provider English Spoken: Y
Cultural Competency: N
NICOLE A DSOUZA


 330 LEWIS ST
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

D6. Directorio de salud mental

DUNN-PIRIO, ANASTASIE

Provider Gender: Female
License Number: A157861
NPI: 1700177136

Provider English Spoken: Y
Cultural Competency: N

ANASTASIE M DUNN-PIRIO

200 W ARBOR DR FL 1
SAN DIEGO, CA 92103

Phone: (619) 543-3500
Fax: (888) 539-8781

After Hours Phone: (619)
543-3500

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

ESTAVILLO, SAUL

Provider Gender: Male
License Number: MFC102610
NPI: 1528330073

Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish

Cultural Competency: N

SAUL J ESTAVILLO

3045 BEYER BLVD STE D101
SAN DIEGO, CA 92154

Phone: (619) 662-4161
Fax: (619) 662-4109

After Hours Phone: (619)
662-4161

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
Site Language(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

ESTAVILLO, SAUL

Provider Gender: Male
License Number: MFC102610
NPI: 1528330073

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: N

SAUL J ESTAVILLO

286 EUCLID AVE STE 309
SAN DIEGO, CA 92114

Phone: (619) 527-7390
Fax: (619) 527-7394

After Hours Phone: (619)
527-7390

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
Site Language(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

FIRESTONE, MICHELLE

Provider Gender: Female
License Number: PSY33081
NPI: 1114687803

Provider English Spoken: Y
Cultural Competency: N

MICHELLE E FIRESTONE

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 810-8700
Fax: (858) 633-4680

After Hours Phone: (858)
810-8700

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

FIRESTONE, MICHELLE

Provider Gender: Female
License Number: PSY33081
NPI: 1114687803

Provider English Spoken: Y
Cultural Competency: N

MICHELLE E FIRESTONE

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 279-0925
Fax: (858) 633-4680

After Hours Phone: (858)
279-0925

Website: N/A


Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

D6. Directorio de salud mental

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FITZGERALD, MICHAEL

Provider Gender: Male


License Number: A73710


NPI: 1336393578

Provider English Spoken: Y

Cultural Competency: N

MICHAEL W FITZGERALD


 16918 DOVE CANYON RD
STE 100
SAN DIEGO, CA 92127

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

FLANIGAN, MARILYN

Provider Gender: Female

License Number: MFC97326


NPI: 1588996912


Provider English Spoken: Y

Cultural Competency: N

MARILYN Y FLANIGAN


 10737 CAMINO RUIZ STE
235

SAN DIEGO, CA 92126
 Phone: (844) 200-2426
Fax: (858) 578-4417

 After Hours Phone: (844)
200-2426

 Website: N/A


Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-6:00PM

FORZANI, CHRISTINA

Provider Gender: Female



License Number: PSY25710


NPI: 1902939630

Provider English Spoken: Y

Cultural Competency: N


CHRISTINA A FORZANI

 4290 POLK AVE
SAN DIEGO, CA 92105
 Phone: (619) 563-0250
Fax: (858) 633-4681

 After Hours Phone: (619)
563-0250

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 18\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

FRANK, GUIDO

Provider Gender: Male

License Number: A86429


NPI: 1578608733

Provider English Spoken: Y

Cultural Competency: N

GUIDO K FRANK


 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 Phone: (858) 966-8145
Fax: (858) 966-8154

 After Hours Phone: (858)
966-8145


 Website: N/A


Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\19

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

FRY, LIANE

Provider Gender: Female


License Number: MFC42570


NPI: 1003110917

Provider English Spoken: Y


Cultural Competency: N

LIANE M FRY


 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113

 Phone: (619) 662-4100
Fax: (619) 595-0258

 After Hours Phone: (619)
662-4100

 Website: N/A

Accepting New Patients: Yes


 Site English Spoken: Y
TDD: U


Min/Max Age: 12\999

American Sign Language (ASL):

D6. Directorio de salud mental

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

GARCIA, RICHARD

Provider Gender: Male

License Number: LCS28742


NPI: 1881198554

Provider English Spoken: Y

Cultural Competency: N

RICHARD R GARCIA

 2630 1ST AVE
SAN DIEGO, CA 92103

 *Phone: (619) 234-2158*

Fax: (619) 234-0206

 *After Hours Phone: (619)
234-2158*

 *Website: N/A*

Accepting New Patients: Yes


 *Site English Spoken: Y*


TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-4:30PM*

GARCIA, JENNI

Provider Gender: Female

License Number: LPCC10346

NPI: 1437775863

Provider English Spoken: Y

Provider Language(s) Spoken:


Spanish

Cultural Competency: N


JENNI GARCIA


 3025 BEYER BLVD

SAN DIEGO, CA 92154

 *Phone: (619) 662-4100*


Fax: (619) 662-4119

 *After Hours Phone: (619)
662-4100*

 *Website: N/A*

Accepting New Patients: Yes

 *Site English Spoken: Y*

 *Site Language(s) Spoken:
Spanish*

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

Hours: M-F

8:00AM-5:00PM

GIAMONA, KRISTEN

Provider Gender: Female

License Number: PSY28419


NPI: 1376824383

Provider English Spoken: Y

Cultural Competency: N


KRISTEN M GIAMONA

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 *Phone: (858) 279-0925*

Fax: (858) 633-4680

 *After Hours Phone: (858)
279-0925*

 *Website: N/A*

Accepting New Patients: Yes

 *Site English Spoken: Y*

TDD: U

Min/Max Age: 18\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

GIAMONA, KRISTEN

Provider Gender: Female

License Number: PSY28419


NPI: 1376824383

Provider English Spoken: Y

Cultural Competency: N

KRISTEN M GIAMONA

 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 *Phone: (858) 810-8700*

Fax: (858) 633-4680

 *After Hours Phone: (858)
810-8700*

 *Website: N/A*

Accepting New Patients: Yes

 *Site English Spoken: Y*

TDD: U

Min/Max Age: 18\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

GOMEZ, JUANITA

Provider Gender: Female

License Number: PSY27439

NPI: 1790915759

Provider English Spoken: Y


Provider Language(s) Spoken:

Spanish

Cultural Competency: N

JUANITA GOMEZ

 6030 VILLAGE WAY
SAN DIEGO, CA 92130

 *Phone: (800) 926-8372*

Fax: (888) 539-8781

 *After Hours Phone: (800)
926-8372*

 *Website: N/A*

Accepting New Patients: Yes

 *Site English Spoken: Y*

D6. Directorio de salud mental

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

GULOTTA, SAMANTHA

Provider Gender: Female

License Number: MFC134199

NPI: 1790407732


Provider English Spoken: Y


Cultural Competency: N

SAMANTHA L GULOTTA

 9909 MIRA MESA BLVD
STE 200

SAN DIEGO, CA 92131

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

HERNANDEZ, SILVIA

Provider Gender: Female

License Number: MFC51787

NPI: 1982821179


Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish


Cultural Competency: N

SILVIA E HERNANDEZ

 3025 BEYER BLVD
SAN DIEGO, CA 92154


 Phone: (619) 662-4100

Fax: (619) 662-4119

 After Hours Phone: (619)
662-4100

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

JOSHI, YASH

Provider Gender: Male

License Number: A147156


NPI: 1598151433


Provider English Spoken: Y

Cultural Competency: N

YASH B JOSHI


 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

 Website: N/A


Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

KAYE, WALTER

Provider Gender: Male

License Number: A24819


NPI: 1922076223


Provider English Spoken: Y

Cultural Competency: N

WALTER H KAYE


 4510 EXECUTIVE DR
SAN DIEGO, CA 92121

 Phone: (858) 534-8019

 After Hours Phone: (858)
534-8019

 Website: N/A


Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

KHAFAJA, MOHAMAD

Provider Gender: Male

License Number: A115892

NPI: 1780867119


Provider English Spoken: Y

Provider Language(s) Spoken:
Arabic

Cultural Competency: N

MOHAMAD H KHAFAJA

 200 W ARBOR DR
SAN DIEGO, CA 92103


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

 Website: N/A



Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999






American Sign Language (ASL):
N

D6. Directorio de salud mental





 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM



KHAMISA, SORAIYA

Provider Gender: Female
License Number: LCS81951
NPI: 1811254386
Provider English Spoken: Y
Cultural Competency: N
SORAIYA N KHAMISA







 4520 EXECUTIVE DR STE A
SAN DIEGO, CA 92121
 Phone: (800) 926-8273
 After Hours Phone: (800)
926-8273
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

KLUEMPER, NICOLE


Provider Gender: Female
License Number: PSY27064
NPI: 1902125818
Provider English Spoken: Y
Cultural Competency: N
NICOLE S KLUEMPER
 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
Fax: (858) 633-4680
 After Hours Phone: (858)
279-0925
 Website: N/A
Accepting New Patients: Yes








 Site English Spoken: Y
TDD: U
Min/Max Age: 2\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

KLUEMPER, NICOLE







Provider Gender: Female
License Number: PSY27064
NPI: 1902125818
Provider English Spoken: Y
Cultural Competency: N
NICOLE S KLUEMPER
 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
Fax: (858) 633-4680
 After Hours Phone: (858)
810-8700
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 2\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

LABIB, MICHAEL

Provider Gender: Male
License Number: PSY34180
NPI: 1609055797
Provider English Spoken: Y
Provider Language(s) Spoken:
Arabic
Cultural Competency: N
MICHAEL LABIB
 1666 PRECISION PARK LN

SAN DIEGO, CA 92173
 Phone: (619) 662-4100
Fax: (619) 785-3384
 After Hours Phone: (619)
662-4100
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Language(s) Spoken:
Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM

LIDLAW, JOHN

Provider Gender: Male
License Number: MFC44560
NPI: 1689790073
Provider English Spoken: Y
Cultural Competency: N
JOHN K LAIDLAW
 10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126
 Phone: (844) 200-2426
 After Hours Phone: (844)
200-2426
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER

D6. Directorio de salud mental

LEBENSOHN CHIALVO, FLORENCIA

Provider Gender: Female
License Number: PSY30776
NPI: 1134788730

Provider English Spoken: Y
Cultural Competency: N

FLORENCIA LEBENSOHN
CHIALVO

9333 GENESEE AVE STE
200

SAN DIEGO, CA 92121

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

LEBENSOHN CHIALVO, FLORENCIA

Provider Gender: Female
License Number: PSY30776
NPI: 1134788730

Provider English Spoken: Y
Cultural Competency: N

FLORENCIA LEBENSOHN
CHIALVO

7910 FROST ST STE 350
SAN DIEGO, CA 92123

Phone: (858) 496-4800

After Hours Phone: (858)
496-4800

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

LEDBETTER, ALEX

Provider Gender: Male
License Number: 20A20454
NPI: 1073017315

Provider English Spoken: Y
Cultural Competency: N

ALEX W LEDBETTER

6655 ALVARADO RD
SAN DIEGO, CA 92120

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

LEE, DAVID

Provider Gender: Male
License Number: A124329
NPI: 1871884130

Provider English Spoken: Y
Provider Language(s) Spoken:
Korean

Cultural Competency: N

DAVID J LEE

200 W ARBOR DR FL 1
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

LI, XIA

Provider Gender: Female
License Number: A163344
NPI: 1336670413

Provider English Spoken: Y
Provider Language(s) Spoken:
Mandarin

Cultural Competency: N

XIA LI

16918 DOVE CANYON RD
STE 100

SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes


Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT


D6. Directorio de salud mental


 **PROVIDER**
Hours: M-F
8:00AM-5:00PM

LINKE, SARAH


Provider Gender: Female
License Number: PSY27116
NPI: 1487026415


Provider English Spoken: Y
Cultural Competency: N
SARAH E LINKE

 9909 MIRA MESA BLVD
STE 200
SAN DIEGO, CA 92131

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

 Website: N/A
Accepting New Patients: Yes


 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


 Hours: M-F
8:00AM-5:00PM


LINKE, SARAH

Provider Gender: Female
License Number: PSY27116
NPI: 1487026415

Provider English Spoken: Y
Cultural Competency: N

SARAH E LINKE


 4910 DIRECTORS PL STE
250
SAN DIEGO, CA 92121

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

 Website: N/A

Accepting New Patients: Yes


 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

LIU, TIMOTHY


Provider Gender: Male
License Number: A105535
NPI: 1720262801

Provider English Spoken: Y
Provider Language(s) Spoken:
Chinese, Mandarin, Yue
Chinese


Cultural Competency: N

TIMOTHY C LIU


 6973 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 279-0925
Fax: (858) 633-4680

 After Hours Phone: (858)
279-0925

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 5\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

LIU, TIMOTHY


Provider Gender: Male

License Number: A105535
NPI: 1720262801

Provider English Spoken: Y
Provider Language(s) Spoken:
Chinese, Mandarin, Yue
Chinese

Cultural Competency: N
TIMOTHY C LIU


 7011 LINDA VISTA RD
SAN DIEGO, CA 92111

 Phone: (858) 810-8700
Fax: (858) 633-4680

 After Hours Phone: (858)
810-8700

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 5\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


LONGARDNER, KATHERINE

Provider Gender: Female
License Number: A137963
NPI: 1801215926

Provider English Spoken: Y
Cultural Competency: N

KATHERINE M LONGARDNER


 4520 EXECUTIVE DR
SAN DIEGO, CA 92121

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273

 Website: N/A


Accepting New Patients: Yes


 Site English Spoken: Y
TDD: U

D6. Directorio de salud mental

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


MAGINOT-CHESHER, TAMARA


Provider Gender: Female
License Number: PSY28678
NPI: 1043441165

Provider English Spoken: Y
Cultural Competency: N

TAMARA R MAGINOT
CHESHER


 4510 EXECUTIVE DR
SAN DIEGO, CA 92121

 Phone: (858) 534-8019
Fax: (858) 534-6727

 After Hours Phone: (858)
534-8019


 Website: N/A


Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM


MALAK, LAWRENCE

Provider Gender: Male
License Number: A115345
NPI: 1467773028


Provider English Spoken: Y
Cultural Competency: N

LAWRENCE T MALAK


 4290 POLK AVE

SAN DIEGO, CA 92105
 Phone: (619) 563-0250
Fax: (858) 633-4681

 After Hours Phone: (619)
563-0250

 Website: N/A


Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 14\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-2:00PM

MARTINEZ, STEPHANIE


Provider Gender: Female
License Number: A152787
NPI: 1699126367

Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish

Cultural Competency: N

STEPHANIE MARTINEZ


 4290 POLK AVE

SAN DIEGO, CA 92105
 Phone: (619) 563-0250
Fax: (858) 633-4681

 After Hours Phone: (619)
563-0250

 Website: N/A

Accepting New Patients: Yes


 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-2:00PM

MARTINEZ, STEPHANIE


Provider Gender: Female
License Number: A152787
NPI: 1699126367

Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish

Cultural Competency: N

STEPHANIE MARTINEZ


 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273
Fax: (888) 539-8781

 After Hours Phone: (800)
926-8273


 Website: N/A


Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F
8:00AM-5:00PM

MARTINEZ, STEPHANIE

Provider Gender: Female
License Number: A152787
NPI: 1699126367

Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish

Cultural Competency: N

STEPHANIE MARTINEZ

D6. Directorio de salud mental

 350 DICKINSON ST
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800)
926-8273
 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

MCCULLUM, TIFFANY

Provider Gender: Female

License Number: PSY29329


NPI: 1528306206

Provider English Spoken: Y

Cultural Competency: N

TIFFANY MCCULLUM

 286 EUCLID AVE STE 302
SAN DIEGO, CA 92114

 Phone: (619) 662-4100

Fax: (619) 428-7952

 After Hours Phone: (619)
662-4100

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y

TDD: U

Min/Max Age: 13\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

MILLER, MIKAELA

Provider Gender: Female

License Number: A181565


NPI: 1639752355

Provider English Spoken: Y

Cultural Competency: N

MIKAELA G MILLER

 4290 POLK AVE
SAN DIEGO, CA 92105

 Phone: (619) 563-0250


Fax: (858) 633-4681

 After Hours Phone: (619)
563-0250

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 14\999

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

SA 8:00AM-2:00PM

MILLS, BRAD

Provider Gender: Male

License Number: LCS87409

NPI: 1598542813


Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish


Cultural Competency: N

BRAD A MILLS

 1501 IMPERIAL AVE
SAN DIEGO, CA 92101

 Phone: (619) 233-8500


Fax: (619) 687-1067

 After Hours Phone: (619)
233-8500

 Website: N/A

Accepting New Patients: Yes


 Site English Spoken: Y


 Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

 Hours: M-F

8:00AM-5:00PM

MIRON, JEAN-PHILIPPE

Provider Gender: Male

License Number: A186033

NPI: 1952178196

Provider English Spoken: Y


Cultural Competency: N

JEAN-PHILIPPE MIRON

 16918 DOVE CANYON RD
STE 100

SAN DIEGO, CA 92127

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

MONTOYA, JESSICA

Provider Gender: Female

License Number: PSY31647

NPI: 1003421256

Provider English Spoken: Y

D6. Directorio de salud mental

Cultural Competency: N

JESSICA L MONTOYA

4168 FRONT ST FL 3
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

MOORE, SHAVON

Provider Gender: Female

License Number: A152789

NPI: 1053682773

Provider English Spoken: Y

Cultural Competency: N

SHAVON C MOORE

4510 EXECUTIVE DR
SAN DIEGO, CA 92121

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

MUHAMMAD, LAMA

Provider Gender: Female

License Number: A156500

NPI: 1558701623

Provider English Spoken: Y

Provider Language(s) Spoken:

Arabic

Cultural Competency: N

LAMA MUHAMMAD

350 DICKINSON ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

MUHAMMAD, LAMA

Provider Gender: Female

License Number: A156500

NPI: 1558701623

Provider English Spoken: Y

Provider Language(s) Spoken:

Arabic

Cultural Competency: N

LAMA MUHAMMAD

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

NAKAMURA, TIFFANY

Provider Gender: Female

License Number: LPCC4383

NPI: 1356846349

Provider English Spoken: Y

Cultural Competency: N

TIFFANY NAKAMURA

4510 EXECUTIVE DR STE
315

SAN DIEGO, CA 92121

Phone: (858) 534-8019

After Hours Phone: (858)
534-8019

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

NGUYEN, HOANG

Provider Gender: Male

D6. Directorio de salud mental

License Number: G83977

NPI: 1720011620

Provider English Spoken: Y

Provider Language(s) Spoken:
Vietnamese

Cultural Competency: N

HOANG A NGUYEN

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

NGUYEN, HOANG

Provider Gender: Male

License Number: G83977

NPI: 1720011620

Provider English Spoken: Y

Provider Language(s) Spoken:
Vietnamese

Cultural Competency: N

HOANG A NGUYEN

410 DICKINSON ST STE 100
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

NING, GRACE

Provider Gender: Female

License Number: PSY27293

NPI: 1598911315

Provider English Spoken: Y

Provider Language(s) Spoken:
Chinese, Mandarin

Cultural Competency: N

GRACE J NING

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 810-8700

Fax: (858) 633-4680
After Hours Phone: (858)
810-8700

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 18\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

NING, GRACE

Provider Gender: Female

License Number: PSY27293

NPI: 1598911315

Provider English Spoken: Y

Provider Language(s) Spoken:
Chinese, Mandarin

Cultural Competency: N

GRACE J NING

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 279-0925

Fax: (858) 633-4680

After Hours Phone: (858)
279-0925

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

NORMAN, MARC

Provider Gender: Male

License Number: PSY16278

NPI: 1922169101

Provider English Spoken: Y

Cultural Competency: N

MARC A NORMAN

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (619) 543-2827

After Hours Phone: (619)
543-2827

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER



Hours: M-F
8:00AM-5:00PM

NORMAN, MARC

D6. Directorio de salud mental






Provider Gender: Male
License Number: PSY16278
NPI: 1922169101
Provider English Spoken: Y
Cultural Competency: N
MARC A NORMAN

 350 DICKINSON ST
SAN DIEGO, CA 92103
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800)*
926-8273
 *Website: N/A*
Accepting New Patients: Yes
 *Site English Spoken: Y*
TDD: U
Min/Max Age: 0\999

American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM

ORFF, HENRY







Provider Gender: Male
License Number: PSY27099
NPI: 1144685215
Provider English Spoken: Y
Cultural Competency: N
HENRY J ORFF

 4520 EXECUTIVE DR STE
P2
SAN DIEGO, CA 92121
 *Phone: (844) 757-5337*
 *After Hours Phone: (844)*
757-5337
 *Website: N/A*
Accepting New Patients: Yes
 *Site English Spoken: Y*
TDD: U
Min/Max Age: 0\999

American Sign Language (ASL):  4690 EL CAJON BLVD
SAN DIEGO, CA 92115
 *Phone: (619) 662-4100*
Fax: (619) 205-6305
 *After Hours Phone: (619)*
662-4100
 *Website: N/A*
Accepting New Patients: Yes




ORTIZ, MARIA

Provider Gender: Female
License Number: PSY30953
NPI: 1497980775
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: N
MARIA E ORTIZ







 950 S EUCLID AVE
SAN DIEGO, CA 92114
 *Phone: (619) 662-4100*
Fax: (619) 662-4158
 *After Hours Phone: (619)*
662-4100
 *Website: N/A*
Accepting New Patients: Yes
 *Site English Spoken: Y*
TDD: U
Min/Max Age: 18\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER

PATTERSON-HYATT, KIMBERLY

Provider Gender: Female
License Number: PSY31903
NPI: 1780997742
Provider English Spoken: Y
Cultural Competency: N
KIMBERLY G
PATTERSON-HYATT

 *Site English Spoken: Y*
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER
 *Hours: M-F*
8:00AM-5:00PM

PATTON, MICHAEL

Provider Gender: Male
License Number: LCS18244
NPI: 1184756702
Provider English Spoken: Y
Cultural Competency: N
MICHAEL A PATTON
 1501 IMPERIAL AVE
SAN DIEGO, CA 92101
 *Phone: (619) 233-8500*
Fax: (619) 687-1067
 *After Hours Phone: (619)*
233-8500
 *Website: N/A*
Accepting New Patients: Yes
 *Site English Spoken: Y*
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT*
PROVIDER

PRINCE, RENEE

D6. Directorio de salud mental

Provider Gender: Female
License Number: PSY32206
NPI: 1467737908

Provider English Spoken: Y
Cultural Competency: N
RENEE K PRINCE

10737 CAMINO RUIZ STE
235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
Fax: (619) 474-4008

After Hours Phone: (844)
200-2426

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-6:00PM

QAYOUMI, WALI

Provider Gender: Male
License Number: A168429
NPI: 1093178220

Provider English Spoken: Y
Provider Language(s) Spoken:
French

Cultural Competency: N

WALI Z QAYOUMI

4510 EXECUTIVE DR STE
325
SAN DIEGO, CA 92121
Phone: (619) 294-3746
Fax: (888) 539-8781

After Hours Phone: (619)
294-3746

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-5:00PM

RADOJEVIC, NATASHA

Provider Gender: Female
License Number: PSY28495
NPI: 1821365008

Provider English Spoken: Y
Cultural Competency: N
NATASHA RADOJEVIC

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 279-0925
Fax: (858) 633-4680

After Hours Phone: (858)
279-0925

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TU
8:30AM-5:30PM
TH-F 8:30AM-5:30PM

RADOJEVIC, NATASHA

Provider Gender: Female
License Number: PSY28495
NPI: 1821365008

Provider English Spoken: Y

Cultural Competency: N
NATASHA RADOJEVIC

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

Phone: (858) 810-8700
Fax: (858) 633-4680

After Hours Phone: (858)
810-8700

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TU
8:30AM-5:30PM
TH-F 8:30AM-5:30PM

RIBEIRO CALDAS DOMINGUES, ISABEL

Provider Gender: Female
License Number: A132160
NPI: 1023367216

Provider English Spoken: Y
Provider Language(s) Spoken:
French, Portuguese, Spanish

Cultural Competency: N

ISABEL A RIBEIRO CALDAS
DOMINGUES

350 DICKINSON ST
SAN DIEGO, CA 92103

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800)
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U


D6. Directorio de salud mental

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

RICHARD, MARLA

Provider Gender: Female

License Number: G65188


NPI: 1578720934


Provider English Spoken: Y

Cultural Competency: N

MARLA G RICHARD


 200 W ARBOR DR
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

 Website: N/A


Accepting New Patients: Yes


 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

RICHARD, MARLA

Provider Gender: Female

License Number: G65188


NPI: 1578720934

Provider English Spoken: Y

Cultural Competency: N

MARLA G RICHARD


 16950 VIA TAZON
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

 After Hours Phone: (800)
926-8273

 Website: N/A

Accepting New Patients: Yes


 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

SACHS, MELISSA

Provider Gender: Female

License Number: LCS76968


NPI: 1649760356

Provider English Spoken: Y

Cultural Competency: N

MELISSA R SACHS

 4690 EL CAJON BLVD
SAN DIEGO, CA 92115


 Phone: (619) 662-4100

Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

 Website: N/A

Accepting New Patients: Yes


 Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:30AM-5:30PM
SA 8:00AM-2:30PM

SALO, STEPHANIE

Provider Gender: Female

License Number: PSY26290


NPI: 1477967784

Provider English Spoken: Y

Cultural Competency: N

STEPHANIE P SALO

 4290 POLK AVE
SAN DIEGO, CA 92105


 Phone: (619) 563-0250

Fax: (858) 633-4681

 After Hours Phone: (619)
563-0250

 Website: N/A


Accepting New Patients: Yes


 Site English Spoken: Y
TDD: U

Min/Max Age: 17\999

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F
8:00AM-5:00PM

SAWYER, CAROLYN

Provider Gender: Female


License Number: A149116


NPI: 1043653249

Provider English Spoken: Y

Cultural Competency: N


CAROLYN M SAWYER

 7920 FROST ST STE 200
SAN DIEGO, CA 92123


 Phone: (858) 246-0794

Fax: (858) 496-9257

 After Hours Phone: (858)
246-0794

 Website: N/A

Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U


Min/Max Age: 0\19

American Sign Language (ASL):

D6. Directorio de salud mental

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

SAWYER, CAROLYN

Provider Gender: Female

License Number: A149116

NPI: 1043653249


Provider English Spoken: Y

Cultural Competency: N


CAROLYN M SAWYER

 3030 CHILDRENS WAY FL
4

SAN DIEGO, CA 92123


 *Phone: (858) 966-4032*

Fax: (858) 966-6227

 *After Hours Phone: (858)
966-4032*

 *Website: N/A*

Accepting New Patients: Yes


 *Site English Spoken: Y
TDD: U*

Min/Max Age: 0\19

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

SAWYER, CAROLYN

Provider Gender: Female


License Number: A149116

NPI: 1043653249


Provider English Spoken: Y

Cultural Competency: N

CAROLYN M SAWYER

 3665 KEARNY VILLA RD
STE 400

SAN DIEGO, CA 92123


 *Phone: (858) 966-5990*

Fax: (858) 966-7508

 *After Hours Phone: (858)
966-5990*

 *Website: N/A*

Accepting New Patients: Yes


 *Site English Spoken: Y
TDD: U*

Min/Max Age: 0\19

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

SHELLINGER, KRISTON

Provider Gender: Female

License Number: PSY26313


NPI: 1710234273


Provider English Spoken: Y

Cultural Competency: N

KRISTON B SHELLINGER


 330 LEWIS ST
SAN DIEGO, CA 92103

 *Phone: (858) 246-1979*

 *After Hours Phone: (858)
246-1979*

 *Website: N/A*

Accepting New Patients: Yes


 *Site English Spoken: Y
TDD: U*

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

SHELLINGER, KRISTON

Provider Gender: Female

License Number: PSY26313

NPI: 1710234273


Provider English Spoken: Y


Cultural Competency: N

KRISTON B SHELLINGER

 9333 GENESEE AVE STE
200


SAN DIEGO, CA 92121

 *Phone: (800) 926-8273*

 *After Hours Phone: (800)
926-8273*

 *Website: N/A*

Accepting New Patients: Yes


 *Site English Spoken: Y
TDD: U*

Min/Max Age: 0\999

American Sign Language (ASL):

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F
8:00AM-5:00PM*

SHELLINGER, KRISTON

Provider Gender: Female

License Number: PSY26313

NPI: 1710234273


Provider English Spoken: Y


Cultural Competency: N


KRISTON B SHELLINGER

 9909 MIRA MESA BLVD
STE 200


SAN DIEGO, CA 92131

 *Phone: (858) 246-1979*

 *After Hours Phone: (858)
246-1979*

 *Website: N/A*











































Accepting New Patients: Yes

 *Site English Spoken: Y
TDD: U*

Min/Max Age: 0\999

American Sign Language (ASL):

D6. Directorio de salud mental

- N**
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
- SCHLOSSER, TARA**
Provider Gender: Female
License Number: MFC107868
NPI: 1407220437
Provider English Spoken: Y
Cultural Competency: N
TARA S SCHLOSSER
 330 LEWIS ST
SAN DIEGO, CA 92103
 *Phone: (800) 926-8273*
 *After Hours Phone: (800) 926-8273*
 *Website: N/A*
Accepting New Patients: Yes
 *Site English Spoken: Y*
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
- SERIO, TAYLOR**
Provider Gender: Female
License Number: LCS107050
NPI: 1093217382
Provider English Spoken: Y
Cultural Competency: N
TAYLOR L SERIO
 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 *Phone: (858) 810-8700*
Fax: (858) 633-4680
 *After Hours Phone: (858) 810-8700*
 *Website: N/A*
Accepting New Patients: Yes
 *Site English Spoken: Y*
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
- SERIO, TAYLOR**
Provider Gender: Female
License Number: LCS107050
NPI: 1093217382
Provider English Spoken: Y
Cultural Competency: N
TAYLOR L SERIO
 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 *Phone: (858) 279-0925*
Fax: (858) 633-4680
 *After Hours Phone: (858) 279-0925*
 *Website: N/A*
- SHU, I WEI**
Provider Gender: Male
License Number: A103813
NPI: 1992840144
Provider English Spoken: Y
Accepting New Patients: Yes
 *Site English Spoken: Y*
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
- SERIO, TAYLOR**
Provider Gender: Female
License Number: LCS107050
NPI: 1093217382
Provider English Spoken: Y
Cultural Competency: N
TAYLOR L SERIO
 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 *Phone: (858) 810-8700*
Fax: (858) 633-4680
 *After Hours Phone: (858) 810-8700*
 *Website: N/A*
Accepting New Patients: Yes
 *Site English Spoken: Y*
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*
- SILVEY, CHRISTOPHER**
Provider Gender: Male
License Number: LCS85942
NPI: 1932793502
Provider English Spoken: Y
Cultural Competency: N
CHRISTOPHER J SILVEY
 10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
 *Phone: (858) 578-4220*
Fax: (858) 578-4417
 *After Hours Phone: (858) 578-4220*
 *Website: N/A*
Accepting New Patients: Yes
 *Site English Spoken: Y*
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT*
- Cultural Competency: N**
I WEI SHU
 200 W ARBOR DR
SAN DIEGO, CA 92103
 *Phone: (858) 534-6200*
Fax: (858) 534-6205
 *After Hours Phone: (800) 926-8273*
 *Website: N/A*
Accepting New Patients: Yes
 *Site English Spoken: Y*
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM*





D6. Directorio de salud mental


 **PROVIDER**
Hours: M-F
8:00AM-5:00PM

SOLORIO JR, ROBERTO

Provider Gender: Male
License Number: LCS102729
NPI: 1972088185

Provider English Spoken: Y
Cultural Competency: N
ROBERTO SOLORIO JR

 4690 EL CAJON BLVD
SAN DIEGO, CA 92115
 *Phone: (619) 662-4100*
 *After Hours Phone: (619)*
662-4100
 *Website: N/A*

Accepting New Patients: Yes
 *Site English Spoken: Y*
TDD: U

Min/Max Age: 0\999
American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER


SUAREZ, ROBERTO

Provider Gender: Male
License Number: MFC25098
NPI: 1386785160

Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish

Cultural Competency: N
ROBERTO SUAREZ

 3025 BEYER BLVD
SAN DIEGO, CA 92154
 *Phone: (619) 662-4100*
Fax: (619) 662-4119
 *After Hours Phone: (619)*
662-4100
 *Website: N/A*

Accepting New Patients: Yes
 *Site English Spoken: Y*
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N



 *Accessibility: CONTACT*
PROVIDER

SWEIGERT, JAMIE

Provider Gender: Female
License Number: LCS112304
NPI: 1396353595


Provider English Spoken: Y
Cultural Competency: N
JAMIE L SWEIGERT

 2630 1ST AVE
SAN DIEGO, CA 92103
 *Phone: (619) 234-2158*
Fax: (619) 234-0206
 *After Hours Phone: (619)*
234-2158
 *Website: N/A*

Accepting New Patients: Yes
 *Site English Spoken: Y*
 *Site Language(s) Spoken:*
Spanish
TDD: U

Min/Max Age: 0\999
American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER



 *Hours: M-F*
8:00AM-5:00PM

TARLE, STEPHANIE

Provider Gender: Female
License Number: PSY32155
NPI: 1659920403

Provider English Spoken: Y


Cultural Competency: N
STEPHANIE J TARLE

 6655 ALVARADO RD
SAN DIEGO, CA 92120
 *Phone: (800) 926-8273*
Fax: (888) 539-8781

 *After Hours Phone: (800)*
926-8273

 *Website: N/A*

Accepting New Patients: Yes

 *Site English Spoken: Y*
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

TILTON, PETER

Provider Gender: Male
License Number: G27781
NPI: 1538258694


Provider English Spoken: Y
Cultural Competency: N
PETER A TILTON

 2630 1ST AVE
SAN DIEGO, CA 92103
 *Phone: (619) 234-2158*
Fax: (619) 234-0206

 *After Hours Phone: (619)*
234-2158

 *Website: N/A*

Accepting New Patients: Yes

 *Site English Spoken: Y*
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

 *Accessibility: CONTACT*
PROVIDER

TO, TUAN

D6. Directorio de salud mental

Provider Gender: Male
License Number: PSY30204
NPI: 1255696183
Provider English Spoken: Y
Provider Language(s) Spoken:
Vietnamese
Cultural Competency: N

TUAN TO

4290 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 563-0250
Fax: (858) 633-4681
After Hours Phone: (619)
563-0250
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 5\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

TO, TUAN

Provider Gender: Male
License Number: PSY30204
NPI: 1255696183
Provider English Spoken: Y
Provider Language(s) Spoken:
Vietnamese
Cultural Competency: N

TUAN TO

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
Fax: (858) 633-4680
After Hours Phone: (858)
279-0925
Website: N/A
Accepting New Patients: Yes

Site English Spoken: Y
TDD: U
Min/Max Age: 5\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

TO, TUAN

Provider Gender: Male
License Number: PSY30204
NPI: 1255696183
Provider English Spoken: Y
Provider Language(s) Spoken:
Vietnamese
Cultural Competency: N
TUAN TO

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858)
810-8700
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 5\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

TROYER, EMILY

Provider Gender: Female
License Number: A149101
NPI: 1326484437
Provider English Spoken: Y
Cultural Competency: N
EMILY A TROYER
4305 UNIVERSITY AVE STE

150
SAN DIEGO, CA 92105
Phone: (619) 280-2058
Fax: (858) 633-4682
After Hours Phone: (619)
280-2058
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken:
Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
SA 8:00AM-2:00PM





TROYER, EMILY

Provider Gender: Female
License Number: A149101
NPI: 1326484437
Provider English Spoken: Y
Cultural Competency: N
EMILY A TROYER
4290 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 563-0250
Fax: (858) 633-4681
After Hours Phone: (619)
563-0250
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken:
Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):

D6. Directorio de salud mental



- N**
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F
8:00AM-5:00PM
SA 8:00AM-2:00PM*
- TWAMLEY, ELIZABETH**
*Provider Gender: Female
License Number: PSY19150
NPI: 1700089141
Provider English Spoken: Y
Cultural Competency: N*
ELIZABETH W TWAMLEY
 1501 IMPERIAL AVE
SAN DIEGO, CA 92101
 *Phone: (619) 233-8500*
Fax: (619) 687-1067
 *After Hours Phone: (619)
233-8500*
 *Website: N/A*
Accepting New Patients: Yes
 *Site English Spoken: Y*
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-W
8:30AM-5:00PM
TH 8:30AM-9:00PM
F 8:30AM-5:00PM*
- WEISSMAN, CORY**
*Provider Gender: Male
License Number: A174625
NPI: 1528720661
Provider English Spoken: Y
Cultural Competency: N*
CORY R WEISSMAN
 16918 DOVE CANYON RD
- STE 100
SAN DIEGO, CA 92127
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800)
926-8273*
 *Website: N/A*
Accepting New Patients: Yes
 *Site English Spoken: Y*
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
- WU, MICHELLE**
*Provider Gender: Female
License Number: A125139
NPI: 1043650088
Provider English Spoken: Y
Cultural Competency: N*
MICHELLE L WU
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 *Phone: (858) 966-8145*
Fax: (858) 966-8164
 *After Hours Phone: (858)
966-8145*
 *Website: N/A*
Accepting New Patients: Yes
 *Site English Spoken: Y*
TDD: U
Min/Max Age: 0\19
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*
- YAGUDAYEVA, RAISA**
*Provider Gender: Female
License Number: 20A14848
NPI: 1942555990
Provider English Spoken: Y
Provider Language(s) Spoken:
Russian
Cultural Competency: N*
RAISA YAGUDAYEVA
 200 W ARBOR DR
SAN DIEGO, CA 92103
 *Phone: (800) 926-8273*
Fax: (888) 539-8781
 *After Hours Phone: (800)
926-8273*
 *Website: N/A*
Accepting New Patients: Yes
 *Site English Spoken: Y*
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 *Accessibility: CONTACT PROVIDER*
- YIDI, DIANA**
*Provider Gender: Female
License Number: LCS110300
NPI: 1194438663
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: N*
DIANA L YIDI
 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 *Phone: (858) 279-0925*
Fax: (858) 633-4680
 *After Hours Phone: (858)
279-0925*

D6. Directorio de salud mental



 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:30AM-5:30PM



ZAYAS, MARIO

Provider Gender: Male
License Number: MFC111273
NPI: 1275943557
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: N
MARIO E ZAYAS

 3025 BEYER BLVD STE
E-101
SAN DIEGO, CA 92154
 Phone: (619) 662-4100
Fax: (619) 662-4119

 After Hours Phone: (619)
662-4100




 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N



 Accessibility: CONTACT
PROVIDER
 Hours: M-TU
9:00AM-7:00PM
W-F 9:00AM-6:00PM

ZIMMERMAN, JENNIFER
Provider Gender: Female
License Number: LCS28729
NPI: 1811449077
Provider English Spoken: Y
Cultural Competency: N
JENNIFER A ZIMMERMAN



 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
Fax: (858) 633-4680

 After Hours Phone: (858)
810-8700

 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N





 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM

ZIMMERMAN, JENNIFER
Provider Gender: Female
License Number: LCS28729
NPI: 1811449077
Provider English Spoken: Y
Cultural Competency: N
JENNIFER A ZIMMERMAN

 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-9676
Fax: (858) 633-4680

 After Hours Phone: (858)
279-9676


 Website: N/A

Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM




SAN MARCOS


ALTAMIRANO, LEON

Provider Gender: Male
License Number: PSY23734
NPI: 1619271517
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: N
LEON ALTAMIRANO

 150 VALPRED A RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767
Fax: (760) 736-6744

 After Hours Phone: (760)
736-6767

 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N



 Accessibility: CONTACT
PROVIDER

D6. Directorio de salud mental

ARIELLA, LYNDA

Provider Gender: Female
License Number: PSY19450
NPI: 1073518965
Provider English Spoken: Y
Cultural Competency: N

LYNDA R ARIELLA


 150 VALPRED A RD
SAN MARCOS, CA 92069
 *Phone: (760) 736-6767*
Fax: (760) 736-6744

 *After Hours Phone: (760) 736-6767*

 *Website: N/A*

Accepting New Patients: Yes


 *Site English Spoken: Y*

 *Site Languages(s) Spoken: Spanish*

TDD: U

Min/Max Age: 5\50

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*



 *Hours: M-F*

8:00AM-5:00PM

CABREJOS, CLAUDIO

Provider Gender: Male
License Number: A71653
NPI: 1033133483
Provider English Spoken: Y
Provider Language(s) Spoken: Portuguese, Spanish
Cultural Competency: N


CLAUDIO O CABREJOS

 150 VALPRED A RD
SAN MARCOS, CA 92069
 *Phone: (760) 736-6767*
Fax: (760) 736-6744

 *After Hours Phone: (760) 736-6767*

 *Website: N/A*


Accepting New Patients: Yes

 *Site English Spoken: Y*
TDD: U

Min/Max Age: 18\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F*
8:00AM-5:00PM

FLYNN, DANIELLE


Provider Gender: Female
License Number: PSY26184
NPI: 1477785137

Provider English Spoken: Y

Cultural Competency: N


DANIELLE I FLYNN

 150 VALPRED A RD
SAN MARCOS, CA 92069


 *Phone: (760) 736-6767*

Fax: (760) 736-6744

 *After Hours Phone: (760) 736-6767*

 *Website: N/A*

Accepting New Patients: Yes

 *Site English Spoken: Y*
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

GEORGIEV, MARY-JO


Provider Gender: Female
License Number: PSY17954
NPI: 1518996875

Provider English Spoken: Y

Cultural Competency: N

MARY-JO GEORGIEV

 150 VALPRED A RD
SAN MARCOS, CA 92069


 *Phone: (760) 736-6767*

Fax: (760) 736-6744

 *After Hours Phone: (760) 736-6767*

 *Website: N/A*

Accepting New Patients: Yes

 *Site English Spoken: Y*
TDD: U

Min/Max Age: 18\999

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*

IMAM, SYED


Provider Gender: Male
License Number: PSY27695
NPI: 1447428271

Provider English Spoken: Y

Provider Language(s) Spoken: Hindi, Urdu


Cultural Competency: N


SYED IMAM

 150 VALPRED A RD
SAN MARCOS, CA 92069

 *Phone: (760) 736-6767*

Fax: (760) 736-6744

 *After Hours Phone: (760) 736-6767*

 *Website: N/A*

Accepting New Patients: Yes

 *Site English Spoken: Y*
 *Site Languages(s) Spoken: Spanish*

TDD: U

Min/Max Age: 15\999

American Sign Language (ASL): N

N

 *Accessibility: CONTACT*

D6. Directorio de salud mental

PROVIDER
Hours: M-F
8:00AM-5:00PM

REEG, JESSICA

Provider Gender: Female
License Number: MFC124306
NPI: 1144382987
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: N

JESSICA REEG

150 VALPRED A RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
Fax: (760) 736-6744

After Hours Phone: (760)
736-6767

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-8:00PM
SA 8:00AM-5:00PM

SO LORIO JR, ROBERTO

Provider Gender: Male
License Number: LCS102729
NPI: 1972088185
Provider English Spoken: Y
Cultural Competency: N

ROBERTO SO LORIO JR

150 VALPRED A RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767

Fax: (760) 736-8740

After Hours Phone: (760)
736-6767

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

TONG, GARRICK

Provider Gender: Male
License Number: A102192
NPI: 1831361278
Provider English Spoken: Y
Provider Language(s) Spoken:
Cantonese
Cultural Competency: N

GARRICK G TONG

150 VALPRED A RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
Fax: (760) 736-6744

After Hours Phone: (760)
736-6767

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 4\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-8:00PM
SA 8:00AM-5:00PM

TORRES, HECTOR

Provider Gender: Male
License Number: PSY13309
NPI: 1720265614
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: N

HECTOR M TORRES

150 VALPRED A RD
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)
736-6767

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

SAN YSIDRO

BALTRUS, JUSTINEANN

Provider Gender: Female
License Number: MFC132018
NPI: 1285040709
Provider English Spoken: Y
Provider Language(s) Spoken:
Tagalog
Cultural Competency: N

JUSTINEANN A BALTRUS

1666 PRECISION PARK LN
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 600-4870

D6. Directorio de salud mental

📞 After Hours Phone: (619) 662-4100

🌐 Website: N/A

Accepting New Patients: Yes

🗨️ Site English Spoken: Y

🗨️ Site Languages(s) Spoken: Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

CRAWFORD-DAY, ANN

Provider Gender: Female

License Number: A166646

NPI: 1386149706

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

ANN E CRAWFORD-DAY

📍 4004 BEYER BLVD
SAN YSIDRO, CA 92173

📞 Phone: (619) 662-4100

Fax: (619) 205-6305

📞 After Hours Phone: (619) 662-4100

🌐 Website: N/A

Accepting New Patients: Yes

🗨️ Site English Spoken: Y

🗨️ Site Languages(s) Spoken: Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-8:00PM
SA 8:00AM-2:00PM

DEPAOLO, AMANDA

Provider Gender: Female

License Number: LCS99056

NPI: 1215420138

Provider English Spoken: Y

Cultural Competency: N

AMANDA L DEPAOLO

📍 4004 BEYER BLVD
SAN YSIDRO, CA 92173

📞 Phone: (619) 662-4100

Fax: (619) 205-6305

📞 After Hours Phone: (619) 662-4100

🌐 Website: N/A

Accepting New Patients: Yes

🗨️ Site English Spoken: Y

🗨️ Site Languages(s) Spoken: Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-5:00PM

FONTANA, LOUIS

Provider Gender: Male

License Number: G49072

NPI: 1780734343

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

LOUIS A FONTANA

📍 4004 BEYER BLVD
SAN YSIDRO, CA 92173

📞 Phone: (619) 662-4100
Fax: (619) 205-6305

📞 After Hours Phone: (619) 662-4100

🌐 Website: N/A

Accepting New Patients: Yes

🗨️ Site English Spoken: Y

TDD: U

Min/Max Age: 18\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F
8:00AM-8:00PM
SA 8:00AM-2:00PM

GONZALEZ-GARCIA, CAROLINA

Provider Gender: Female

License Number: MFC41111

NPI: 1215321955

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

CAROLINA GONZALES GARCIA

📍 3364 BEYER BLVD
SAN YSIDRO, CA 92173

📞 Phone: (619) 662-4100
Fax: (619) 600-4870

📞 After Hours Phone: (619) 662-4100

🌐 Website: N/A

Accepting New Patients: Yes

🗨️ Site English Spoken: Y


TDD: U

Min/Max Age: 18\999

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER







D6. Directorio de salud mental

 Hours: M-F
8:00AM-5:00PM




IBANEZ, BERENICE


Provider Gender: Female
License Number: PSY22080
NPI: 1740394386
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: N


BERENICE B IBANEZ

 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
Fax: (619) 205-6305
 After Hours Phone: (619)
662-4100
 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 18\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER


JAMES, CHRISTINE

Provider Gender: Female
License Number: 20A13931
NPI: 1679834022
Provider English Spoken: Y
Cultural Competency: N
CHRISTINE E JAMES
 1666 PRECISION PARK LN
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
Fax: (619) 785-3384
 After Hours Phone: (619)
662-4100

 Website: N/A
Accepting New Patients: Yes



 Site English Spoken: Y
TDD: U
Min/Max Age: 18\999
American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER




 Hours: M-F
8:00AM-5:00PM

JENNINGS, AMY

Provider Gender: Female
License Number: LCS100075
NPI: 1609549161
Provider English Spoken: Y
Cultural Competency: N
AMY E JENNINGS


 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
Fax: (619) 205-6305

 After Hours Phone: (619)
662-4100

 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Language(s) Spoken:
Spanish
TDD: U

Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Hours: M-F
8:00AM-8:00PM
SA 8:00AM-2:00PM


JIMENEZ, NANCY

Provider Gender: Female


License Number: MFC141209
NPI: 1568023596



Provider English Spoken: Y
Cultural Competency: N
NANCY JIMENEZ

 1666 PRECISION PARK LN
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100
Fax: (619) 785-3384


 After Hours Phone: (619)
662-4100

 Website: N/A
Accepting New Patients: Yes

 Site English Spoken: Y
 Site Language(s) Spoken:
Spanish
TDD: U

Min/Max Age: 0\999
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


 Hours: M-F
8:00AM-5:00PM

LOPEZ, MARIBEL


Provider Gender: Female
License Number: LCS86171
NPI: 1669180600
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish

Cultural Competency: N
MARIBEL, LOPEZ

 4004 BEYER BLVD
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100
Fax: (619) 205-6305




 After Hours Phone: (619)
662-4100

 Website: N/A
Accepting New Patients: Yes





D6. Directorio de salud mental

 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-8:00PM
SA 8:00AM-2:00PM

PETERSEN, KATE





Provider Gender: Female
License Number: MFC130200
NPI: 1598237281
Provider English Spoken: Y
Cultural Competency: N
KATE PETERSEN
 1666 PRECISION PARK LN
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
Fax: (619) 785-3384
 After Hours Phone: (619)
662-4100
 Website: N/A

Accepting New Patients: Yes




 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM

SANTEE

MEAGHER, RAISHELLE

Provider Gender: Female
License Number: LCS109804
NPI: 1851821904
Provider English Spoken: Y
Cultural Competency: N
RAISHELLE L MEAGHER
 120 TOWN CENTER PKWY
SANTEE, CA 92071
 Phone: (619) 662-4100
Fax: (619) 662-4196
 After Hours Phone: (619)
662-4100
 Website: N/A

Accepting New Patients: Yes




 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M-F
8:00AM-5:00PM

VALLEY CENTER

PLASCENCIA, CINDY



Provider Gender: Female
License Number: MFC113536
NPI: 1952723736
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: N
CINDY PLASCENCIA
 28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
 Phone: (760) 742-9919
Fax: (360) 462-2750
 After Hours Phone: (760)

742-9919


 Website: N/A
Accepting New Patients: Yes
 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER




VISTA

ACOSTA, AZUCENA

Provider Gender: Female
License Number: LCS98304
NPI: 1255937496
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: N
AZUCENA ACOSTA
 134 GRAPEVINE RD
VISTA, CA 92083
 Phone: (760) 631-5000
Fax: (760) 414-3892





 After Hours Phone: (760)
631-5000

 Website: N/A
Accepting New Patients: Yes

 Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
 Hours: M 8:00AM-5:00PM
TU 10:30AM-7:30PM
W-F 8:00AM-5:00PM

ACOSTA, AZUCENA





D6. Directorio de salud mental

Provider Gender: Female
License Number: LCS98304
NPI: 1255937496
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
AZUCENA ACOSTA
 1000 VALE TERRACE DR
VISTA, CA 92084
 *Phone: (760) 631-5000*
Fax: (760) 414-3892
 *After Hours Phone: (760) 631-5000*
 *Website: N/A*
Accepting New Patients: Yes







 *Site English Spoken: Y*
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-TH 8:00AM-2:00PM F 8:00AM-5:00PM SA 9:00AM-6:00PM*

BELL, JENNIFER



Provider Gender: Female
License Number: 20A20702
NPI: 1154614956
Provider English Spoken: Y
Cultural Competency: N
JENNIFER L BELL
 1000 VALE TERRACE DR
VISTA, CA 92084
 *Phone: (760) 631-5000*
Fax: (760) 414-3892
 *After Hours Phone: (760) 631-5000*
 *Website: N/A*

Accepting New Patients: Yes
 *Site English Spoken: Y*
 *Site Languages(s) Spoken: Chinese, Farsi, Estonian, Vietnamese, Hindi, Tagalog, French, Korean, Marathi, Spanish, Telugu*
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM SA 9:00AM-4:00PM*





BELL, JENNIFER

Provider Gender: Female
License Number: 20A20702
NPI: 1154614956
Provider English Spoken: Y
Cultural Competency: N
JENNIFER L BELL
 1000 VALE TERRACE DR
VISTA, CA 92084
 *Phone: (760) 631-5000*
Fax: (760) 414-3892
 *After Hours Phone: (760) 631-5000*
 *Website: N/A*
Accepting New Patients: Yes
 *Site English Spoken: Y*
 *Site Languages(s) Spoken: Chinese, Farsi, Estonian, Vietnamese, Hindi, Tagalog, French, Korean, Marathi, Spanish, Telugu*
TDD: U

Min/Max Age: 5\80
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM SA 9:00AM-4:00PM*

BELL, JENNIFER

Provider Gender: Female
License Number: 20A20702
NPI: 1154614956
Provider English Spoken: Y
Cultural Competency: N
JENNIFER L BELL
 134 GRAPEVINE RD
VISTA, CA 92083
 *Phone: (760) 631-5000*
Fax: (760) 414-3892
 *After Hours Phone: (760) 631-5000*
 *Website: N/A*
Accepting New Patients: Yes
 *Site English Spoken: Y*
 *Site Languages(s) Spoken: Lithuanian, Urdu, Chinese, Vietnamese, Farsi, Tagalog, Arabic, Spanish*
TDD: U
Min/Max Age: 5\80
American Sign Language (ASL): N
 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F 8:00AM-5:00PM SA 9:00AM-4:00PM*

CHRISTIANSON, WARREN

Provider Gender: Male
License Number: 20A9664
NPI: 1932359445
Provider English Spoken: Y
Provider Language(s) Spoken:

D6. Directorio de salud mental

Spanish

Cultural Competency: N

WARREN R CHRISTIANSON II

134 GRAPEVINE RD
VISTA, CA 92083

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
8:00AM-7:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CHRISTIANSON, WARREN

Provider Gender: Male

License Number: 20A9664

NPI: 1932359445

Provider English Spoken: Y

Provider Language(s) Spoken:

Spanish

Cultural Competency: N

WARREN R CHRISTIANSON II

134 GRAPEVINE RD
VISTA, CA 92083

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
8:00AM-7:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CHRISTIANSON, WARREN

Provider Gender: Male

License Number: 20A9664

NPI: 1932359445

Provider English Spoken: Y

Provider Language(s) Spoken:

Spanish

Cultural Competency: N

WARREN R CHRISTIANSON II

1000 VALE TERRACE DR
VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Chinese, Korean, Marathi,
French, Estonian, Telugu,
Farsi, Vietnamese, Hindi,
Spanish, Tagalog

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
8:00AM-7:00PM
F 8:00AM-5:00PM

SA 9:00AM-4:00PM

CHRISTIANSON, WARREN

Provider Gender: Male

License Number: 20A9664

NPI: 1932359445

Provider English Spoken: Y

Provider Language(s) Spoken:

Spanish

Cultural Competency: N

WARREN R CHRISTIANSON II

1000 VALE TERRACE DR
VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Chinese, Korean, Marathi,
French, Estonian, Telugu,
Farsi, Vietnamese, Hindi,
Spanish, Tagalog

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
8:00AM-7:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CRUZ, VANESSA

Provider Gender: Female

License Number: LCS87166

NPI: 1285170662

Provider English Spoken: Y

Cultural Competency: N

D6. Directorio de salud mental

VANESSA Y CRUZ

1000 VALE TERRACE DR
VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Vietnamese, Chinese,
Estonian, Farsi, French,
Hindi, Korean, Marathi,
Spanish, Tagalog, Telugu

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-TU
8:00AM-8:00PM
W 9:00AM-7:00PM
TH 8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CRUZ, VANESSA

Provider Gender: Female

License Number: LCS87166

NPI: 1285170662

Provider English Spoken: Y

Cultural Competency: N

VANESSA Y CRUZ

1000 VALE TERRACE DR
VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Vietnamese, Chinese,
Estonian, Farsi, French,
Hindi, Korean, Marathi,
Spanish, Tagalog, Telugu

TDD: U

Min/Max Age: 4\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TU
8:00AM-8:00PM
W 9:00AM-7:00PM
TH 8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CRUZ, VANESSA

Provider Gender: Female

License Number: LCS87166

NPI: 1285170662

Provider English Spoken: Y

Cultural Competency: N

VANESSA Y CRUZ

134 GRAPEVINE RD
VISTA, CA 92083

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 4\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
9:00AM-7:00PM

F 9:00AM-5:00PM

SA 9:00AM-4:00PM

CRUZ, VANESSA

Provider Gender: Female

License Number: LCS87166

NPI: 1285170662

Provider English Spoken: Y

Cultural Competency: N

VANESSA Y CRUZ

134 GRAPEVINE RD
VISTA, CA 92083

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
9:00AM-7:00PM
F 9:00AM-5:00PM
SA 9:00AM-4:00PM

DOUGHERTY, CHRISTINE

Provider Gender: Female

License Number: LCS26686

NPI: 1003194960

Provider English Spoken: Y

Cultural Competency: N

CHRISTINE A DOUGHERTY

134 GRAPEVINE RD
VISTA, CA 92083

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)

D6. Directorio de salud mental

631-5000
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER

DOUGHERTY, CHRISTINE

Provider Gender: Female
License Number: LCS26686
NPI: 1003194960

Provider English Spoken: Y
Cultural Competency: N

CHRISTINE A DOUGHERTY

1000 VALE TERRACE DR
VISTA, CA 92084

Phone: (760) 631-5000
Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Language(s) Spoken:
Chinese, Estonian, Farsi,
French, Hindi, Korean,
Marathi, Spanish, Telugu,
Vietnamese, Tagalog

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-TH
9:00AM-8:00PM
F 9:00AM-5:00PM
SA 9:00AM-4:00PM

MENDEZ, ADRIANA

Provider Gender: Female
License Number: LCS86435
NPI: 1356777361

Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish

Cultural Competency: N

ADRIANA J MENDEZ

1000 VALE TERRACE DR
VISTA, CA 92084

Phone: (760) 631-5000

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M-F
8:00AM-8:00PM
SA 9:00AM-4:00PM

MENDEZ, ADRIANA

Provider Gender: Female
License Number: LCS86435
NPI: 1356777361

Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish

Cultural Competency: N

ADRIANA J MENDEZ

134 GRAPEVINE RD
VISTA, CA 92083

Phone: (760) 631-5000
Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

MEYERHOF, GRETA

Provider Gender: Female
License Number: MFC32299
NPI: 1487196333

Provider English Spoken: Y
Cultural Competency: N

GRETA R MEYERHOF

1000 VALE TERRACE DR
VISTA, CA 92084

Phone: (760) 631-5000
Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

MEYERHOF, GRETA

Provider Gender: Female
License Number: MFC32299
NPI: 1487196333

Provider English Spoken: Y
Cultural Competency: N

D6. Directorio de salud mental

GRETA R MEYERHOF

134 GRAPEVINE RD
VISTA, CA 92083

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

NEVILLE, MARGARET

Provider Gender: Female

License Number: LCS82407

NPI: 1073682407

Provider English Spoken: Y

Cultural Competency: N

MARGARET R NEVILLE

134 GRAPEVINE RD
VISTA, CA 92083

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
Site Languages(s) Spoken:
Arabic, Chinese, Lithuanian,
Farsi, Spanish, Tagalog,
Urdu, Vietnamese

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT

PROVIDER

Hours: M-F
8:00AM-5:00PM
SA 8:00AM-4:00PM

NEVILLE, MARGARET

Provider Gender: Female

License Number: LCS82407

NPI: 1073682407

Provider English Spoken: Y

Cultural Competency: N

MARGARET R NEVILLE

1000 VALE TERRACE DR
VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

PATEL, MITESH

Provider Gender: Male

License Number: A181164

NPI: 1568880292

Provider English Spoken: Y

Cultural Competency: N

MITESH K PATEL

1000 VALE TERRACE DR
VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-5:00PM
TU 10:00AM-7:00PM
W-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

PATEL, MITESH

Provider Gender: Male

License Number: A181164

NPI: 1568880292

Provider English Spoken: Y

Cultural Competency: N

MITESH K PATEL

134 GRAPEVINE RD
VISTA, CA 92083

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y
TDD: U

Min/Max Age: 18\999

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Hours: M 8:00AM-5:00PM
TU 10:00AM-7:00PM
W-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

SANCHEZ, ADRIANA

Provider Gender: Female

D6. Directorio de salud mental

License Number: LCS97093

NPI: 1609450451

Provider English Spoken: Y

Provider Language(s) Spoken:

Spanish

Cultural Competency: N

ADRIANA SANCHEZ

1000 VALE TERRACE DR
VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

SANCHEZ, ADRIANA

Provider Gender: Female

License Number: LCS97093

NPI: 1609450451

Provider English Spoken: Y

Provider Language(s) Spoken:

Spanish

Cultural Competency: N

ADRIANA SANCHEZ

134 GRAPEVINE RD
VISTA, CA 92083

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

SLOAN, CRISTINA

Provider Gender: Female

License Number: MFC137279

NPI: 1912456377

Provider English Spoken: Y

Cultural Competency: N

CRISTINA I SLOAN

134 GRAPEVINE RD
VISTA, CA 92083

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

SLOAN, CRISTINA

Provider Gender: Female

License Number: MFC137279

NPI: 1912456377

Provider English Spoken: Y

Cultural Competency: N

CRISTINA I SLOAN

1000 VALE TERRACE DR
VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Hours: M-F

8:00AM-5:00PM

SLOAN, CRISTINA

Provider Gender: Female

License Number: MFC137279

NPI: 1912456377

Provider English Spoken: Y

Cultural Competency: N

CRISTINA I SLOAN

1000 VALE TERRACE DR
VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish



TDD: U

Min/Max Age: 0\999

American Sign Language (ASL):

N

D6. Directorio de salud mental







 *Accessibility: CONTACT PROVIDER*
 *Hours: M-F
8:00AM-5:00PM*

SMITH, SONYA

*Provider Gender: Female
License Number: LCS82598
NPI: 1902070857
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish*

Cultural Competency: N

SONYA L SMITH

 134 GRAPEVINE RD
VISTA, CA 92083
 *Phone: (760) 631-5000*
Fax: (760) 414-3892
 *After Hours Phone: (760)
631-5000*
 *Website: N/A*
Accepting New Patients: Yes
 *Site English Spoken: Y*
TDD: U
Min/Max Age: 0\999
*American Sign Language (ASL):
N*
 *Accessibility: CONTACT
PROVIDER*

SMITH, SONYA

*Provider Gender: Female
License Number: LCS82598
NPI: 1902070857
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish*

Cultural Competency: N


SONYA L SMITH





 1000 VALE TERRACE DR
VISTA, CA 92084

 *Phone: (760) 631-5000*
 *After Hours Phone: (760)
631-5000*
 *Website: N/A*
Accepting New Patients: Yes
 *Site English Spoken: Y*
TDD: U
Min/Max Age: 0\999
*American Sign Language (ASL):
N*
 *Accessibility: CONTACT
PROVIDER*



WILSON, CARLENE

*Provider Gender: Female
License Number: LCS74685
NPI: 1508327081
Provider English Spoken: Y
Cultural Competency: N*

CARLENE WILSON
 1000 VALE TERRACE DR
VISTA, CA 92084

 *Phone: (760) 631-5000*
Fax: (760) 414-3892
 *After Hours Phone: (760)
631-5000*
 *Website: N/A*
Accepting New Patients: Yes
 *Site English Spoken: Y*
TDD: U

Min/Max Age: 0\999
*American Sign Language (ASL):
N*



 *Accessibility: CONTACT
PROVIDER*
 *Hours: M-TH
8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM*


WILSON, CARLENE


Provider Gender: Female

*License Number: LCS74685
NPI: 1508327081
Provider English Spoken: Y
Cultural Competency: N*

CARLENE WILSON
 134 GRAPEVINE RD
VISTA, CA 92083

 *Phone: (760) 631-5000*
Fax: (760) 414-3892
 *After Hours Phone: (760)
631-5000*

 *Website: N/A*
Accepting New Patients: Yes

 *Site English Spoken: Y*
TDD: U

Min/Max Age: 0\999

*American Sign Language (ASL):
N*

 *Accessibility: CONTACT
PROVIDER*

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

ALPINE

AOTO, KIM, OD

Provider Gender: Female

License Number: 14524

NPI: 1780935650

Provider English Spoken: Y

Provider Language(s) Spoken:

Spanish, Vietnamese

Cultural Competency: Y

ACUITY EYE GROUP

1620 ALPINE BLVD STE 117
ALPINE, CA 91901

Phone: (619) 445-2687

Fax: (619) 445-0801

After Hours Phone: (619)
445-2687

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM
F 9:00AM-4:00PM

BAUMANN, DANIELA, OD

Provider Gender: Female

License Number: 34530

NPI: 1982232146

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

1620 ALPINE BLVD STE 117
ALPINE, CA 91901

Phone: (619) 445-2687

Fax: (619) 445-0801

After Hours Phone: (619)
445-2687

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM
F 9:00AM-4:00PM

BINDER, NICHOLAS, MD

Provider Gender: Male

License Number: A124698

NPI: 1306076716

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

1620 ALPINE BLVD STE 117
ALPINE, CA 91901

Phone: (619) 445-2687

Fax: (619) 445-0801

After Hours Phone: (619)
445-2687

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM
F 9:00AM-4:00PM

DEAN, MOENA, OD

Provider Gender: Female

License Number: 33955

NPI: 1265927578

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

1620 ALPINE BLVD STE 117
ALPINE, CA 91901

Phone: (619) 445-2687

Fax: (619) 445-0801

After Hours Phone: (619)
445-2687

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM
F 9:00AM-4:00PM

DYER, SHARON, OD

Provider Gender: Female

License Number: 33450

NPI: 1063866887

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

1620 ALPINE BLVD STE 117
ALPINE, CA 91901




Phone: (619) 445-2687

Fax: (619) 445-0801




After Hours Phone: (619)
445-2687

Accepting New Patients: Yes



D7. Directorio de proveedores de la vista: servicios oculares y de la vista



 Site English Spoken: Y
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
 Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM
F 9:00AM-4:00PM





KALBAKJI, NATALY, OD
Provider Gender: Female
License Number: 34943
NPI: 1700556438
Provider English Spoken: Y
Provider Language(s) Spoken:
Arabic
Cultural Competency: Y
ACUITY EYE GROUP
 1620 ALPINE BLVD STE 117
ALPINE, CA 91901
 Phone: (619) 445-2687
Fax: (619) 445-0801
 After Hours Phone: (619)
445-2687

Accepting New Patients: Yes
 Site English Spoken: Y
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
 Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM
F 9:00AM-4:00PM

KATZMAN, BARRY, MD
Provider Gender: Male
License Number: A34834
NPI: 1760473797
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: Y
ACUITY EYE GROUP
 1620 ALPINE BLVD STE 117
ALPINE, CA 91901
 Phone: (619) 445-2687
Fax: (619) 445-0801
 After Hours Phone: (619)
445-2687
Accepting New Patients: Yes






























 Site English Spoken: Y
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
 Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM
F 9:00AM-4:00PM

KHALIL, VADY, OD
Provider Gender: Male
License Number: 35137
NPI: 1275263584
Provider English Spoken: Y
Provider Language(s) Spoken:
Arabic
Cultural Competency: Y
ACUITY EYE GROUP
 1620 ALPINE BLVD STE 117
ALPINE, CA 91901
 Phone: (619) 445-2687

Fax: (619) 445-0801
 After Hours Phone: (619)
445-2687
Accepting New Patients: Yes
 Site English Spoken: Y
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
 Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM
F 9:00AM-4:00PM

KHIEU, TINA, OD
Provider Gender: Female
License Number: 34777
NPI: 1962031617
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
 1620 ALPINE BLVD STE 117
ALPINE, CA 91901
 Phone: (619) 445-2687
Fax: (619) 445-0801
 After Hours Phone: (619)
445-2687
Accepting New Patients: Yes
 Site English Spoken: Y
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
 Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

<p>F 9:00AM-4:00PM</p> <p>MARR, RYAN, OD Provider Gender: Male License Number: 35302 NPI: 1235857525 Provider English Spoken: Y Cultural Competency: Y ACUITY EYE GROUP  1620 ALPINE BLVD STE 117 ALPINE, CA 91901  Phone: (619) 445-2687 Fax: (619) 445-0801  After Hours Phone: (619) 445-2687 Accepting New Patients: Yes  Site English Spoken: Y American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Public transportation (within 1/2 mile from Site): 1U  Hours: M 9:00AM-5:00PM TU 10:00AM-6:00PM W 9:00AM-5:00PM TH 8:00AM-5:00PM F 9:00AM-4:00PM</p>	<p>Accepting New Patients: Yes  Site English Spoken: Y American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Public transportation (within 1/2 mile from Site): 1U  Hours: M 9:00AM-5:00PM TU 10:00AM-6:00PM W 9:00AM-5:00PM TH 8:00AM-5:00PM F 9:00AM-4:00PM</p> <p>MORRISON REYES, JOSHUA, MD Provider Gender: Male License Number: A125435 NPI: 1235366782 Provider English Spoken: Y Provider Language(s) Spoken: Indonesian, Spanish Cultural Competency: Y ACUITY EYE GROUP  1620 ALPINE BLVD STE 117 ALPINE, CA 91901  Phone: (619) 445-2687 Fax: (619) 445-0801  After Hours Phone: (619) 445-2687 Accepting New Patients: Yes  Site English Spoken: Y American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Public transportation (within 1/2 mile from Site): 1U  Hours: M 9:00AM-5:00PM TU 10:00AM-6:00PM W 9:00AM-5:00PM TH 8:00AM-5:00PM</p>	<p>F 9:00AM-4:00PM</p> <p>PATEL, SARJAN, MD Provider Gender: Male License Number: A114976 NPI: 1316199326 Provider English Spoken: Y Provider Language(s) Spoken: Gujarati, Hindi, Spanish Cultural Competency: Y ACUITY EYE GROUP  1620 ALPINE BLVD STE 117 ALPINE, CA 91901  Phone: (619) 445-2687 Fax: (619) 445-0801  After Hours Phone: (619) 445-2687 Accepting New Patients: Yes  Site English Spoken: Y American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Public transportation (within 1/2 mile from Site): 1U  Hours: M 9:00AM-5:00PM TU 10:00AM-6:00PM W 9:00AM-5:00PM TH 8:00AM-5:00PM F 9:00AM-4:00PM</p>
<p>MCGRAW, JOSEPH, MD Provider Gender: Male License Number: A155228 NPI: 1588624852 Provider English Spoken: Y Cultural Competency: Y ACUITY EYE GROUP  1620 ALPINE BLVD STE 117 ALPINE, CA 91901  Phone: (619) 445-2687 Fax: (619) 445-0801  After Hours Phone: (619) 445-2687</p>	<p>Accepting New Patients: Yes  Site English Spoken: Y American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Public transportation (within 1/2 mile from Site): 1U  Hours: M 9:00AM-5:00PM TU 10:00AM-6:00PM W 9:00AM-5:00PM TH 8:00AM-5:00PM</p>	<p>PATEL, GITANE, MD Provider Gender: Male License Number: A108603 NPI: 1710171434 Provider English Spoken: Y Cultural Competency: Y ACUITY EYE GROUP  1620 ALPINE BLVD STE 117 ALPINE, CA 91901  Phone: (619) 445-2687 Fax: (619) 445-0801</p>

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

📞 After Hours Phone: (619) 445-2687

Accepting New Patients: Yes

🗒 Site English Spoken: Y

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM
F 9:00AM-4:00PM

PRABHU, SUJATA, MD

Provider Gender: Female

License Number: A115965

NPI: 1982872552

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: Y

ACUITY EYE GROUP

📍 1620 ALPINE BLVD STE 117
ALPINE, CA 91901

📞 Phone: (619) 445-2687

Fax: (619) 445-0801

📞 After Hours Phone: (619) 445-2687

Accepting New Patients: Yes

🗒 Site English Spoken: Y

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM

TH 8:00AM-5:00PM

F 9:00AM-4:00PM

TON-NU, MY LINH, OD

Provider Gender: Female

License Number: 34990

NPI: 1245733476

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 1620 ALPINE BLVD STE 117
ALPINE, CA 91901

📞 Phone: (619) 445-2687

Fax: (619) 445-0801

📞 After Hours Phone: (619) 445-2687

Accepting New Patients: Yes

🗒 Site English Spoken: Y

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM
F 9:00AM-4:00PM

VIVIRITO, MARY, OD

Provider Gender: Female

License Number: 33798

NPI: 1477968667

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: Y

ACUITY EYE GROUP

📍 1620 ALPINE BLVD STE 117
ALPINE, CA 91901

📞 Phone: (619) 445-2687

Fax: (619) 445-0801

📞 After Hours Phone: (619) 445-2687

Accepting New Patients: Yes

🗒 Site English Spoken: Y

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM
F 9:00AM-4:00PM

ZAIDI, NOORINA, OD

Provider Gender: Female

License Number: 35615

NPI: 1023477262

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 1620 ALPINE BLVD STE 117
ALPINE, CA 91901

📞 Phone: (619) 445-2687

Fax: (619) 445-0801

📞 After Hours Phone: (619) 445-2687

Accepting New Patients: Yes

🗒 Site English Spoken: Y

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

F 9:00AM-4:00PM

BONITA

CHA, DANIEL, OD

Provider Gender: Male

License Number: 14779

NPI: 1386078020

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

EYECARE OF BONITA

4502 BONITA RD
BONITA, CA 91902

Phone: (619) 479-7334

Fax: (619) 475-3456

After Hours Phone: (619)
479-7334

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M 8:00AM-6:30PM
W 8:00AM-6:00PM
TH 12:30AM-6:00PM
F 8:00AM-6:00PM
SA 9:00AM-2:00PM

CARLSBAD

HO, TRAM, OD

Provider Gender: Female

License Number: 13485

NPI: 1245464460

Provider English Spoken: Y

Provider Language(s) Spoken:
Vietnamese

Cultural Competency: Y

EYE STYLE OPTOMETRY

5814 VAN ALLEN WAY STE
146

CARLSBAD, CA 92008

Phone: (760) 606-2020

After Hours Phone: (760)
606-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Vietnamese

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: TU 9:00AM-5:00PM
W 10:00AM-6:00PM
TH 9:00AM-5:00PM
F 8:00AM-4:00PM
SA 9:00AM-3:00PM

CHULA VISTA

CASTILLEJOS, MARIA, MD

Provider Gender: Female

License Number: A37652

NPI: 1043395098

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

CASTILLEJOS EYE INSTITUTE
MED GROUP

342 F ST

CHULA VISTA, CA 91910

Phone: (619) 422-1471

Fax: (619) 271-7044

After Hours Phone: (619)
422-1471

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
French, Spanish, Tagalog

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M 8:00AM-5:00PM
TU 7:00AM-5:00PM
W-F 8:00AM-5:00PM

CASTILLEJOS, DAVID, MD

Provider Gender: Male

License Number: A44482

NPI: 1558446401

Provider English Spoken: Y

Provider Language(s) Spoken:
French, Portuguese, Spanish,
Tagalog

Cultural Competency: Y

CASTILLEJOS EYE INSTITUTE
MED GROUP

342 F ST

CHULA VISTA, CA 91910

Phone: (619) 422-1471

Fax: (619) 271-7044

After Hours Phone: (619)
422-1471

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
French, Spanish, Tagalog


American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

1/2 mile from Site): 1T

 Hours: M 8:00AM-5:00PM
TU 7:00AM-5:00PM
W-F 8:00AM-5:00PM

CHAN, KWOK FUNG, OD

Provider Gender: Male


License Number: 35087


NPI: 1407508385

Provider English Spoken: Y

Cultural Competency: Y

VILLA OPTOMETRY INC

 523 TELEGRAPH CANYON
RD
CHULA VISTA, CA 91910

 Phone: (619) 482-2020

Fax: (619) 482-2671

 After Hours Phone: (619)
482-2020


Accepting New Patients: Yes

Site English Spoken: Y


Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

 Hours: M-TU
9:00AM-6:00PM
W 11:00AM-6:00PM
TH-F 9:00AM-6:00PM

CHISHOLM, KAREN, OD

License Number: 35450

NPI: 1568155190

Provider English Spoken: Y

Provider Language(s) Spoken:

Spanish


Cultural Competency: Y

OTAY RANCH EYEWORKS


OPTOMETRY

 1741 EASTLAKE PKWY STE
101

CHULA VISTA, CA 91915

 Phone: (619) 421-6600

Fax: (619) 421-6006

 After Hours Phone: (619)
421-6600

Accepting New Patients: Yes

Site English Spoken: Y


Site Languages(s) Spoken:
Arabic, Hindi, Spanish

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

 Hours: SU 10:00AM-4:00PM
M-F 9:00AM-7:00PM
SA 9:00AM-5:00PM

HUANG, PETER, OD

Provider Gender: Male

License Number: 11659

NPI: 1639100522

Provider English Spoken: Y


Provider Language(s) Spoken:

Spanish

Cultural Competency: Y

PETER D HUANG OD INC

 557 H ST
CHULA VISTA, CA 91910

 Phone: (619) 422-0139

Fax: (619) 422-0066

 After Hours Phone: (619)
422-0139

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Vietnamese

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

 Hours: M 9:00AM-5:00PM
TU 9:00AM-6:00PM
W 9:00AM-5:00PM
TH 9:00AM-6:00PM
F 8:00AM-4:00PM
SA 9:00AM-2:00PM

KALRA, ANKUR, OD

Provider Gender: Male

License Number: 11898

NPI: 1124195789

Provider English Spoken: Y

Provider Language(s) Spoken:


Hindi

Cultural Competency: Y

OTAY RANCH EYEWORKS
OPTOMETRY

 1741 EASTLAKE PKWY STE
101

CHULA VISTA, CA 91915

 Phone: (619) 421-6600

Fax: (619) 421-6006

 After Hours Phone: (619)
421-6600

Accepting New Patients: Yes

Site English Spoken: Y


Site Languages(s) Spoken:
Arabic, Hindi, Spanish

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

 Hours: SU 10:00AM-4:00PM
M-F 9:00AM-7:00PM
SA 9:00AM-5:00PM

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

KEDDINGTON, JOAN, OD

Provider Gender: Female
License Number: 6263
NPI: 1992872691
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: Y

OTAY RANCH EYEWORKS OPTOMETRY

1741 EASTLAKE PKWY STE
101
CHULA VISTA, CA 91915
Phone: (619) 421-6600
Fax: (619) 421-6006
After Hours Phone: (619)
421-6600

Accepting New Patients: Yes

Site English Spoken: Y
Site Languages(s) Spoken:
Arabic, Hindi, Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: SU 10:00AM-4:00PM
M-F 9:00AM-7:00PM
SA 9:00AM-5:00PM

KING, MARY, OD

Provider Gender: Female
License Number: 13711
NPI: 1578792107
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: Y
OTAY RANCH EYEWORKS

OPTOMETRY

1741 EASTLAKE PKWY STE
101
CHULA VISTA, CA 91915
Phone: (619) 421-6600
Fax: (619) 421-6006
After Hours Phone: (619)
421-6600

Accepting New Patients: Yes

Site English Spoken: Y
Site Languages(s) Spoken:
Arabic, Hindi, Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: SU 10:00AM-4:00PM
M-F 9:00AM-7:00PM
SA 9:00AM-5:00PM

MASCARENO, EFRAIN, OD

Provider Gender: Male
License Number: 10906
NPI: 1457507279

Provider English Spoken: Y
Cultural Competency: Y

CLEAR VISION OPTOMETRY

DR MASCARENO
440 4TH AVE
CHULA VISTA, CA 91910
Phone: (619) 427-2020
Fax: (866) 254-5707

After Hours Phone: (619)
427-2020

Accepting New Patients: Yes

Site English Spoken: Y
Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T

Hours: M-TH
9:00AM-6:00PM
F 9:00AM-5:00PM

NGUYEN, TRACY, OD

Provider Gender: Female
License Number: 10859
NPI: 1265596621
Provider English Spoken: Y
Provider Language(s) Spoken:
Vietnamese

Cultural Competency: Y

ESSENTIAL EYECARE

OPTOMETRY

345 F ST STE 240
CHULA VISTA, CA 91910
Phone: (858) 467-0655
Fax: (619) 425-9797

After Hours Phone: (858)
467-0655

Accepting New Patients: Yes

Site English Spoken: Y
Site Languages(s) Spoken:
Spanish, Vietnamese

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-TH
10:00AM-3:00PM

NGUYEN, THERESA, OD

Provider Gender: Female
License Number: 35530TLG
NPI: 1609555713
Provider English Spoken: Y

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

Cultural Competency: Y
OTAY RANCH EYEWORKS
OPTOMETRY
📍 1741 EASTLAKE PKWY STE
101
CHULA VISTA, CA 91915
☎️ *Phone: (619) 421-6600*
Fax: (619) 421-6006
🕒 *After Hours Phone: (619)*
421-6600

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken:
Arabic, Hindi, Spanish

American Sign Language (ASL):
N

♿️ *Accessibility: CONTACT*
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 *Hours: SU 10:00AM-4:00PM*
M-F 9:00AM-7:00PM
SA 9:00AM-5:00PM

PHAM, NINA, OD

Provider Gender: Female

License Number: 35360

NPI: 1598403867

Provider English Spoken: Y

Cultural Competency: Y

CASTILLEJOS EYE INSTITUTE
MED GROUP

📍 342 F ST
CHULA VISTA, CA 91910

☎️ *Phone: (619) 422-1471*

Fax: (619) 271-7044

🕒 *After Hours Phone: (619)*
422-1471

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken:
French, Spanish, Tagalog

American Sign Language (ASL): *Provider English Spoken: Y*
N
♿️ *Accessibility: CONTACT*
PROVIDER
Public transportation (within
1/2 mile from Site): 1T
🕒 *Hours: M 8:00AM-5:00PM*
TU 7:00AM-5:00PM
W-F 8:00AM-5:00PM

PLUCINIK, STANLEY, OD

Provider Gender: Male

License Number: 35255

NPI: 1124751417

Provider English Spoken: Y

Cultural Competency: Y

CASTILLEJOS EYE INSTITUTE
MED GROUP

📍 342 F ST
CHULA VISTA, CA 91910

☎️ *Phone: (619) 422-1471*

Fax: (619) 271-7044

🕒 *After Hours Phone: (619)*
422-1471

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken:
French, Spanish, Tagalog

American Sign Language (ASL):
N

♿️ *Accessibility: CONTACT*
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 *Hours: M 8:00AM-5:00PM*
TU 7:00AM-5:00PM
W-F 8:00AM-5:00PM

SCOVILL, ALEXANDRA, OD

Provider Gender: Female

License Number: 33711

NPI: 1184146094

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

CASTILLEJOS EYE INSTITUTE
MED GROUP

📍 342 F ST
CHULA VISTA, CA 91910

☎️ *Phone: (619) 422-1471*

Fax: (619) 271-7044

🕒 *After Hours Phone: (619)*
422-1471

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken:
French, Spanish, Tagalog

American Sign Language (ASL):
N

♿️ *Accessibility: CONTACT*
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 *Hours: M 8:00AM-5:00PM*
TU 7:00AM-5:00PM
W-F 8:00AM-5:00PM

SOLIS, KEVIN, OD

Provider Gender: Male

License Number: 10420

NPI: 1538362116

Provider English Spoken: Y

Cultural Competency: Y

OTAY RANCH EYEWORKS
OPTOMETRY

📍 1741 EASTLAKE PKWY STE
101
CHULA VISTA, CA 91915

☎️ *Phone: (619) 421-6600*

Fax: (619) 421-6006

🕒 *After Hours Phone: (619)*
421-6600

Accepting New Patients: Yes




D7. Directorio de proveedores de la vista: servicios oculares y de la vista

 Site English Spoken: Y
 Site Languages(s) Spoken:
 Arabic, Hindi, Spanish
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Public transportation (within
 1/2 mile from Site): 1U
 Hours: SU 10:00AM-4:00PM
 M-F 9:00AM-7:00PM
 SA 9:00AM-5:00PM



TOUBIA, ELIAS, OD

Provider Gender: Male
 License Number: 33758
 NPI: 1740701481
 Provider English Spoken: Y
 Provider Language(s) Spoken:
 Arabic
 Cultural Competency: Y

OTAY RANCH EYEWORKS OPTOMETRY

 1741 EASTLAKE PKWY STE
 101
 CHULA VISTA, CA 91915
 Phone: (619) 421-6600
 Fax: (619) 421-6006
 After Hours Phone: (619)
 421-6600


Accepting New Patients: Yes

 Site English Spoken: Y
 Site Languages(s) Spoken:
 Arabic, Hindi, Spanish
 American Sign Language (ASL):

N

 Accessibility: CONTACT
 PROVIDER

Public transportation (within
 1/2 mile from Site): 1U


 Hours: SU 10:00AM-4:00PM
 M-F 9:00AM-7:00PM

SA 9:00AM-5:00PM



VILLA, ANGELICA, OD

Provider Gender: Female
 License Number: 10561
 NPI: 1962544965
 Provider English Spoken: Y
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: Y

VILLA OPTOMETRY INC

 523 TELEGRAPH CANYON
 RD
 CHULA VISTA, CA 91910
 Phone: (619) 482-2020
 Fax: (619) 482-2671
 After Hours Phone: (619)
 482-2020


Accepting New Patients: Yes

 Site English Spoken: Y
 Site Languages(s) Spoken:
 Spanish
 American Sign Language (ASL):

N

 Accessibility: CONTACT
 PROVIDER

Public transportation (within
 1/2 mile from Site): 1T

 Hours: M-TU
 9:00AM-6:00PM
 W 11:00AM-6:00PM
 TH-F 9:00AM-6:00PM

CORONADO

COCKERHAM, KIMBERLY, MD

Provider Gender: Female
 License Number: G86885
 NPI: 1366493629
 Provider English Spoken: Y
 Cultural Competency: Y

ALVARADO EYE ASSOCIATES

MED CLINIC INC

 801 ORANGE AVE STE 204
 CORONADO, CA 92118
 Phone: (619) 437-4406
 Fax: (619) 522-7983


 After Hours Phone: (619)
 437-4406

Accepting New Patients: Yes

 Site English Spoken: Y
 American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

Public transportation (within
 1/2 mile from Site): 1U

 Hours: M 9:00AM-4:30PM
 TU 9:00AM-3:00PM
 W-TH 9:00AM-4:30PM

GRAY, IGA, MD

Provider Gender: Female
 License Number: A174875
 NPI: 1033538350

Provider English Spoken: Y
 Cultural Competency: Y

ALVARADO EYE ASSOCIATES MED CLINIC INC

 801 ORANGE AVE STE 204
 CORONADO, CA 92118
 Phone: (619) 437-4406
 Fax: (619) 522-7983


 After Hours Phone: (619)
 437-4406

Accepting New Patients: Yes

 Site English Spoken: Y
 American Sign Language (ASL):
 N

 Accessibility: CONTACT
 PROVIDER

Public transportation (within
 1/2 mile from Site): 1U

 Hours: M 9:00AM-4:30PM

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

TU 9:00AM-3:00PM
W-TH 9:00AM-4:30PM

KATZMAN, LEE, MD

Provider Gender: Male
License Number: A135673
NPI: 1912297284
Provider English Spoken: Y
Cultural Competency: Y
ALVARADO EYE ASSOCIATES
MED CLINIC INC

801 ORANGE AVE STE 204
CORONADO, CA 92118

Phone: (619) 437-4406
Fax: (619) 522-7983

After Hours Phone: (619)
437-4406

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 9:00AM-4:30PM
TU 9:00AM-3:00PM
W-TH 9:00AM-4:30PM

MANNEN, JOSEPH, OD

Provider Gender: Male
License Number: 33650
NPI: 1851827034
Provider English Spoken: Y
Cultural Competency: Y
ALVARADO EYE ASSOCIATES
MED CLINIC INC

801 ORANGE AVE STE 204
CORONADO, CA 92118

Phone: (619) 437-4406
Fax: (619) 522-7983

After Hours Phone: (619)
437-4406

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 9:00AM-4:30PM
TU 9:00AM-3:00PM
W-TH 9:00AM-4:30PM

OU, JOCELYN, OD

Provider Gender: Female
License Number: 34063
NPI: 1225518996
Provider English Spoken: Y
Cultural Competency: Y
ALVARADO EYE ASSOCIATES
MED CLINIC INC

801 ORANGE AVE STE 204
CORONADO, CA 92118

Phone: (619) 437-4406
Fax: (619) 522-7983

After Hours Phone: (619)
437-4406

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 9:00AM-4:30PM
TU 9:00AM-3:00PM
W-TH 9:00AM-4:30PM

YOUNG, ALLA, OD

Provider Gender: Female

License Number: 34191

NPI: 1285085142

Provider English Spoken: Y
Provider Language(s) Spoken:
Russian

Cultural Competency: Y

ALVARADO EYE ASSOCIATES
MED CLINIC INC

801 ORANGE AVE STE 204
CORONADO, CA 92118

Phone: (619) 437-4406
Fax: (619) 522-7983

After Hours Phone: (619)
437-4406

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 9:00AM-4:30PM
TU 9:00AM-3:00PM
W-TH 9:00AM-4:30PM

EL CAJON

AOTO, KIM, OD

Provider Gender: Female
License Number: 14524
NPI: 1780935650
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish, Vietnamese
Cultural Competency: Y

RETINA INSTITUTE OF
CALIFORNIA MEDICAL GROUP

300 S PIERCE ST STE 200
EL CAJON, CA 92020

Phone: (619) 440-5400

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

Fax: (619) 440-0239

📞 After Hours Phone: (619) 440-5400

Accepting New Patients: Yes

🗨️ Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F
8:30AM-6:00PM

ASIS, STEPHANIE, OD

Provider Gender: Female

License Number: 34013

NPI: 1902383540

Provider English Spoken: Y

Cultural Competency: Y

RETINA INSTITUTE OF

CALIFORNIA MEDICAL GROUP

📍 300 S PIERCE ST STE 200
EL CAJON, CA 92020

📞 Phone: (619) 440-5400

Fax: (619) 440-0239

📞 After Hours Phone: (619) 440-5400

Accepting New Patients: Yes

🗨️ Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F
8:30AM-6:00PM

BAUMANN, DANIELA, OD

Provider Gender: Female

License Number: 34530

NPI: 1982232146

Provider English Spoken: Y

Cultural Competency: Y

RETINA INSTITUTE OF

CALIFORNIA MEDICAL GROUP

📍 300 S PIERCE ST STE 200
EL CAJON, CA 92020

📞 Phone: (619) 440-5400

Fax: (619) 440-0239

📞 After Hours Phone: (619) 440-5400

Accepting New Patients: Yes

🗨️ Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F
8:30AM-6:00PM

BINDER, NICHOLAS, MD

Provider Gender: Male

License Number: A124698

NPI: 1306076716

Provider English Spoken: Y

Cultural Competency: Y

RETINA INSTITUTE OF

CALIFORNIA MEDICAL GROUP

📍 300 S PIERCE ST STE 200
EL CAJON, CA 92020

📞 Phone: (619) 440-5400

Fax: (619) 440-0239

📞 After Hours Phone: (619) 440-5400

Accepting New Patients: Yes

🗨️ Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F
8:30AM-6:00PM

BUTLER, KIM, OD

Provider Gender: Male

License Number: 6405

NPI: 1467444844

Provider English Spoken: Y

Cultural Competency: Y

KIM J BUTLER OD

📍 1273 BROADWAY
EL CAJON, CA 92021

📞 Phone: (619) 579-2345

Fax: (619) 579-0876

📞 After Hours Phone: (619) 579-2345

Accepting New Patients: Yes

🗨️ Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F
9:00AM-5:00PM
SA 9:00AM-12:00AM

CHAN, KWOK FUNG, OD

Provider Gender: Male

License Number: 35087

NPI: 1407508385

Provider English Spoken: Y

Cultural Competency: Y

WERNER OPTOMETRY

📍 2650 JAMACHA RD STE 155
EL CAJON, CA 92019

📞 Phone: (619) 670-6296

Fax: (619) 670-8852

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

☎ After Hours Phone: (619)
670-6296

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:
Italian, Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M 9:00AM-5:00PM
TU 10:00AM-5:00PM
W-TH 9:00AM-5:00PM
F 8:00AM-2:00PM

DEAN, MOENA, OD

Provider Gender: Female

License Number: 33955

NPI: 1265927578

Provider English Spoken: Y

Cultural Competency: Y

RETINA INSTITUTE OF
CALIFORNIA MEDICAL GROUP

📍 300 S PIERCE ST STE 200
EL CAJON, CA 92020

☎ Phone: (619) 440-5400

Fax: (619) 440-0239

☎ After Hours Phone: (619)
440-5400

Accepting New Patients: Yes

☐ Site English Spoken: Y

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:30AM-6:00PM

DYER, SHARON, OD

Provider Gender: Female

License Number: 33450

NPI: 1063866887

Provider English Spoken: Y

Cultural Competency: Y

RETINA INSTITUTE OF
CALIFORNIA MEDICAL GROUP

📍 300 S PIERCE ST STE 200
EL CAJON, CA 92020

☎ Phone: (619) 440-5400

Fax: (619) 440-0239

☎ After Hours Phone: (619)
440-5400

Accepting New Patients: Yes

☐ Site English Spoken: Y

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:30AM-6:00PM

HAMOUIE, JUDY, OD

Provider Gender: Female

License Number: 34984

NPI: 1518638287

Provider English Spoken: Y

Cultural Competency: Y

RETINA INSTITUTE OF
CALIFORNIA MEDICAL GROUP

📍 300 S PIERCE ST STE 200
EL CAJON, CA 92020

☎ Phone: (619) 440-5400

Fax: (619) 440-0239

☎ After Hours Phone: (619)
440-5400

Accepting New Patients: Yes

☐ Site English Spoken: Y

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:30AM-6:00PM

HAN, SULKI, OD

Provider Gender: Female

License Number: 34171

NPI: 1750802195

Provider English Spoken: Y

Provider Language(s) Spoken:
Korean

Cultural Competency: Y

RETINA INSTITUTE OF
CALIFORNIA MEDICAL GROUP

📍 300 S PIERCE ST STE 200
EL CAJON, CA 92020

☎ Phone: (619) 440-5400

Fax: (619) 440-0239

☎ After Hours Phone: (619)
440-5400

Accepting New Patients: Yes

☐ Site English Spoken: Y

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:30AM-6:00PM

HSU, CHRISTOPHER, MD

Provider Gender: Male

License Number: A65973

NPI: 1336167618

Provider English Spoken: Y

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

Cultural Competency: Y
RETINA INSTITUTE OF
CALIFORNIA MEDICAL GROUP

300 S PIERCE ST STE 200
EL CAJON, CA 92020

Phone: (619) 440-5400
Fax: (619) 440-0239

After Hours Phone: (619)
440-5400

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:30AM-6:00PM

KATZMAN, BARRY, MD

Provider Gender: Male

License Number: A34834

NPI: 1760473797

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

RETINA INSTITUTE OF
CALIFORNIA MEDICAL GROUP

300 S PIERCE ST STE 200
EL CAJON, CA 92020

Phone: (619) 440-5400
Fax: (619) 440-0239

After Hours Phone: (619)
440-5400

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:30AM-6:00PM

KHALIL, VADY, OD

Provider Gender: Male

License Number: 35137

NPI: 1275263584

Provider English Spoken: Y

Provider Language(s) Spoken:
Arabic

Cultural Competency: Y

RETINA INSTITUTE OF
CALIFORNIA MEDICAL GROUP

300 S PIERCE ST STE 200
EL CAJON, CA 92020

Phone: (619) 440-5400
Fax: (619) 440-0239

After Hours Phone: (619)
440-5400

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:30AM-6:00PM

KHIEU, TINA, OD

Provider Gender: Female

License Number: 34777

NPI: 1962031617

Provider English Spoken: Y

Cultural Competency: Y

RETINA INSTITUTE OF
CALIFORNIA MEDICAL GROUP

300 S PIERCE ST STE 200

EL CAJON, CA 92020

Phone: (619) 440-5400
Fax: (619) 440-0239

After Hours Phone: (619)
440-5400

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:30AM-6:00PM

MARR, RYAN, OD

Provider Gender: Male

License Number: 35302

NPI: 1235857525

Provider English Spoken: Y

Cultural Competency: Y

RETINA INSTITUTE OF
CALIFORNIA MEDICAL GROUP

300 S PIERCE ST STE 200
EL CAJON, CA 92020

Phone: (619) 440-5400
Fax: (619) 440-0239

After Hours Phone: (619)
440-5400

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:30AM-6:00PM

MCMURREN, BRITTANY, OD

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

Provider Gender: Female
License Number: 14824
NPI: 1104243815
Provider English Spoken: Y
Cultural Competency: Y
WERNER OPTOMETRY
2650 JAMACHA RD STE 155
EL CAJON, CA 92019
Phone: (619) 670-6296
Fax: (619) 670-8852
After Hours Phone: (619)
670-6296
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken:
Italian, Spanish
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T
Hours: M 9:00AM-5:00PM
TU 10:00AM-5:00PM
W-TH 9:00AM-5:00PM
F 8:00AM-2:00PM

PANDYA, BHUMIKA, OD
Provider Gender: Female
License Number: 35025
NPI: 1063182822
Provider English Spoken: Y
Provider Language(s) Spoken:
Hindi
Cultural Competency: Y
RETINA INSTITUTE OF
CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
Phone: (619) 440-5400
Fax: (619) 440-0239
After Hours Phone: (619)

440-5400
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T
Hours: M-F
8:30AM-6:00PM

PATEL, SARJAN, MD
Provider Gender: Male
License Number: A114976
NPI: 1316199326
Provider English Spoken: Y
Provider Language(s) Spoken:
Gujarati, Hindi, Spanish
Cultural Competency: Y
RETINA INSTITUTE OF
CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
Phone: (619) 440-5400
Fax: (619) 440-0239
After Hours Phone: (619)
440-5400



Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T
Hours: M-F
8:30AM-6:00PM

PATEL, GITANE, MD
Provider Gender: Male

License Number: A108603
NPI: 1710171434
Provider English Spoken: Y
Cultural Competency: Y
RETINA INSTITUTE OF
CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
Phone: (619) 440-5400
Fax: (619) 440-0239
After Hours Phone: (619)
440-5400
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T
Hours: M-F
8:30AM-6:00PM

SCOTT, JEFFREY, OD
Provider Gender: Male
License Number: 34978
NPI: 1568813434
Provider English Spoken: Y
Cultural Competency: Y
RETINA INSTITUTE OF
CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
Phone: (619) 440-5400
Fax: (619) 440-0239
After Hours Phone: (619)
440-5400
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL):
N

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

 **Accessibility:** CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 **Hours:** M-F
8:30AM-6:00PM

TON-NU, MY LINH, OD



Provider Gender: Female
License Number: 34990
NPI: 1245733476
Provider English Spoken: Y

Cultural Competency: Y
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP

 300 S PIERCE ST STE 200
EL CAJON, CA 92020
 Phone: (619) 440-5400
Fax: (619) 440-0239
 After Hours Phone: (619) 440-5400

Accepting New Patients: Yes


Site English Spoken: Y
American Sign Language (ASL): N

 **Accessibility:** CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 **Hours:** M-F
8:30AM-6:00PM

TONNU, ANH, OD



Provider Gender: Female
License Number: 11318
NPI: 1679521280
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: Y
RETINA INSTITUTE OF

CALIFORNIA MEDICAL GROUP

 300 S PIERCE ST STE 200
EL CAJON, CA 92020
 Phone: (619) 440-5400
Fax: (619) 440-0239
 After Hours Phone: (619) 440-5400

Accepting New Patients: Yes


Site English Spoken: Y
American Sign Language (ASL): N

 **Accessibility:** CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 **Hours:** M-F
8:30AM-6:00PM

VINH, JOHN, OD



Provider Gender: Male
License Number: 14177
NPI: 1003102724
Provider English Spoken: Y
Cultural Competency: Y

RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP

 300 S PIERCE ST STE 200
EL CAJON, CA 92020
 Phone: (619) 440-5400
Fax: (619) 440-0239
 After Hours Phone: (619) 440-5400

Accepting New Patients: Yes




Site English Spoken: Y
American Sign Language (ASL): N

 **Accessibility:** CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 **Hours:** M-F
8:30AM-6:00PM

WERNER, REX, OD

Provider Gender: Male
License Number: 9378
NPI: 1891760716
Provider English Spoken: Y
Provider Language(s) Spoken: Italian, Spanish


WERNER OPTOMETRY


 2650 JAMACHA RD STE 155
EL CAJON, CA 92019
 Phone: (619) 670-6296
Fax: (619) 670-8852
 After Hours Phone: (619) 670-6296

Accepting New Patients: Yes

Site English Spoken: Y
 Site Language(s) Spoken: Italian, Spanish

American Sign Language (ASL): N

 **Accessibility:** CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T

 **Hours:** M 9:00AM-5:00PM
TU 10:00AM-5:00PM
W-TH 9:00AM-5:00PM
F 8:00AM-2:00PM

WERNER, R AARON, OD

Provider Gender: Male
License Number: 13478
NPI: 1821259458
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish

Cultural Competency: Y

WERNER OPTOMETRY

 2650 JAMACHA RD STE 155

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

EL CAJON, CA 92019
☎ Phone: (619) 670-6296
Fax: (619) 670-8852
🕒 After Hours Phone: (619) 670-6296
Accepting New Patients: Yes
☐ Site English Spoken: Y
☐ Site Languages(s) Spoken: Italian, Spanish
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
🕒 Hours: M 9:00AM-5:00PM
TU 10:00AM-5:00PM
W-TH 9:00AM-5:00PM
F 8:00AM-2:00PM

ZAIDI, NOORINA, OD

Provider Gender: Female
License Number: 35615
NPI: 1023477262
Provider English Spoken: Y
Cultural Competency: Y
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
📍 300 S PIERCE ST STE 200 EL CAJON, CA 92020
☎ Phone: (619) 440-5400
Fax: (619) 440-0239
🕒 After Hours Phone: (619) 440-5400
Accepting New Patients: Yes
☐ Site English Spoken: Y
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F
8:30AM-6:00PM

ZHAO, TAILUN, MD

Provider Gender: Male
License Number: C186414
NPI: 1952659203
Provider English Spoken: Y
Cultural Competency: Y
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
📍 300 S PIERCE ST STE 200 EL CAJON, CA 92020
☎ Phone: (619) 440-5400
Fax: (619) 440-0239
🕒 After Hours Phone: (619) 440-5400
Accepting New Patients: Yes
☐ Site English Spoken: Y
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
🕒 Hours: M-F
8:30AM-6:00PM

ZVANUT, DONALD, OD

Provider Gender: Male
License Number: 8642
NPI: 1336211804
Provider English Spoken: Y
Cultural Competency: Y
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
📍 300 S PIERCE ST STE 200 EL CAJON, CA 92020
☎ Phone: (619) 440-5400
Fax: (619) 440-0239
🕒 After Hours Phone: (619)

440-5400
Accepting New Patients: Yes
☐ Site English Spoken: Y
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
🕒 Hours: M-F
8:30AM-6:00PM

ENCINITAS

ADAMS, MONA, OD

Provider Gender: Female
License Number: 14457
NPI: 1942564521
Provider English Spoken: Y
Cultural Competency: Y
RADY CHILDRENS HOSPITAL ENCINITAS
📍 477 N EL CAMINO REAL STE D302 ENCINITAS, CA 92024
☎ Phone: (858) 309-7702
Fax: (858) 966-7403
🕒 After Hours Phone: (858) 309-7702
Accepting New Patients: Yes
☐ Site English Spoken: Y
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
🕒 Hours: M-F
8:00AM-5:00PM
AOTO, KIM, OD
Provider Gender: Female

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

License Number: 14524

NPI: 1780935650

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish, Vietnamese

Cultural Competency: Y

ACUITY EYE GROUP

320 SANTA FE DR STE 104
ENCINITAS, CA 92024

Phone: (760) 943-7141

Fax: (760) 943-0371

After Hours Phone: (760)
943-7141

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

BANSAL, PREETI, MD

Provider Gender: Female

License Number: A90890

NPI: 1871664631

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

RADY CHILDRENS HOSPITAL
ENCINITAS

477 N EL CAMINO REAL
STE D302

ENCINITAS, CA 92024

Phone: (858) 309-7702

Fax: (858) 966-7403

After Hours Phone: (858)
309-7702

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-5:00PM

BAUMANN, DANIELA, OD

Provider Gender: Female

License Number: 34530

NPI: 1982232146

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

320 SANTA FE DR STE 104
ENCINITAS, CA 92024

Phone: (760) 943-7141

Fax: (760) 943-0371

After Hours Phone: (760)
943-7141

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

BHATIA, SHAGUN, MD

Provider Gender: Female

License Number: A154902

NPI: 1104237353

Provider English Spoken: Y

Cultural Competency: Y

RADY CHILDRENS HOSPITAL
ENCINITAS

477 N EL CAMINO REAL
STE D302

ENCINITAS, CA 92024

Phone: (858) 309-7702

Fax: (858) 966-7403

After Hours Phone: (858)
309-7702

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-5:00PM

CHANG, TOM, MD

Provider Gender: Male

License Number: A69909

NPI: 1609848969

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

320 SANTA FE DR STE 104
ENCINITAS, CA 92024

Phone: (760) 943-7141

Fax: (760) 943-0371

After Hours Phone: (760)
943-7141



Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N


D7. Directorio de proveedores de la vista: servicios oculares y de la vista

 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
8:00AM-5:00PM

CHIU, STEPHAN, MD

Provider Gender: Male
License Number: A172634
NPI: 1053846956
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP

 320 SANTA FE DR STE 104
ENCINITAS, CA 92024

 Phone: (760) 943-7141
Fax: (760) 943-0371

 After Hours Phone: (760)
943-7141

Accepting New Patients: Yes


Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F
8:00AM-5:00PM

DEAN, MOENA, OD

Provider Gender: Female
License Number: 33955
NPI: 1265927578
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP

 320 SANTA FE DR STE 104
ENCINITAS, CA 92024

 Phone: (760) 943-7141
Fax: (760) 943-0371

 After Hours Phone: (760)
943-7141

Accepting New Patients: Yes


Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER


Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F
8:00AM-5:00PM

DYER, SHARON, OD

Provider Gender: Female
License Number: 33450
NPI: 1063866887
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP

 320 SANTA FE DR STE 104
ENCINITAS, CA 92024

 Phone: (760) 943-7141
Fax: (760) 943-0371

 After Hours Phone: (760)
943-7141

Accepting New Patients: Yes


Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T


 Hours: M-F
8:00AM-5:00PM


HAMOUIE, JUDY, OD

Provider Gender: Female
License Number: 34984
NPI: 1518638287
Provider English Spoken: Y
Cultural Competency: Y

ACUITY EYE GROUP

 320 SANTA FE DR STE 104
ENCINITAS, CA 92024

 Phone: (760) 943-7141
Fax: (760) 943-0371


 After Hours Phone: (760)
943-7141

Accepting New Patients: Yes


Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T


 Hours: M-F
8:00AM-5:00PM


HUDSON, HENRY, MD

Provider Gender: Male
License Number: G76091
NPI: 1851349195
Provider English Spoken: Y
Cultural Competency: Y

ACUITY EYE GROUP

 320 SANTA FE DR STE 104
ENCINITAS, CA 92024


 Phone: (760) 943-7141
Fax: (760) 943-0371

 After Hours Phone: (760)
943-7141

Accepting New Patients: Yes

Site English Spoken: Y

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

-  *Site Languages(s) Spoken:* Spanish
American Sign Language (ASL): N
 *Accessibility:* CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 *Hours:* M-F 8:00AM-5:00PM
- KALBAKJI, NATALY, OD**
Provider Gender: Female
License Number: 34943
NPI: 1700556438
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: Y
ACUITY EYE GROUP
 320 SANTA FE DR STE 104 ENCINITAS, CA 92024
 *Phone:* (760) 943-7141
Fax: (760) 943-0371
 *After Hours Phone:* (760) 943-7141
Accepting New Patients: Yes
 *Site English Spoken:* Y
 *Site Languages(s) Spoken:* Spanish
American Sign Language (ASL): N
 *Accessibility:* CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 *Hours:* M-F 8:00AM-5:00PM
- KHALIL, VADY, OD**
Provider Gender: Male
License Number: 35137
- NPI:* 1275263584
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: Y
ACUITY EYE GROUP
 320 SANTA FE DR STE 104 ENCINITAS, CA 92024
 *Phone:* (760) 943-7141
Fax: (760) 943-0371
 *After Hours Phone:* (760) 943-7141
Accepting New Patients: Yes
 *Site English Spoken:* Y
 *Site Languages(s) Spoken:* Spanish
American Sign Language (ASL): N
 *Accessibility:* CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 *Hours:* M-F 8:00AM-5:00PM
- KHIEU, TINA, OD**
Provider Gender: Female
License Number: 34777
NPI: 1962031617
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
 320 SANTA FE DR STE 104 ENCINITAS, CA 92024
 *Phone:* (760) 943-7141
Fax: (760) 943-0371
 *After Hours Phone:* (760) 943-7141
Accepting New Patients: Yes
 *Site English Spoken:* Y
 *Site Languages(s) Spoken:* Spanish
- American Sign Language (ASL):* N
 *Accessibility:* CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 *Hours:* M-F 8:00AM-5:00PM
- LEE, JASON, OD**
Provider Gender: Male
License Number: 14881
NPI: 1679985584
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y
RADY CHILDRENS HOSPITAL ENCINITAS
 477 N EL CAMINO REAL STE D302 ENCINITAS, CA 92024
 *Phone:* (858) 309-7702
Fax: (858) 966-7403
 *After Hours Phone:* (858) 309-7702
Accepting New Patients: Yes
 *Site English Spoken:* Y
American Sign Language (ASL): N
 *Accessibility:* CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
 *Hours:* M-F 8:00AM-5:00PM
- MARR, RYAN, OD**
Provider Gender: Male
License Number: 35302
NPI: 1235857525

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

320 SANTA FE DR STE 104
ENCINITAS, CA 92024

Phone: (760) 943-7141

Fax: (760) 943-0371

After Hours Phone: (760)
943-7141

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

MCGRAW, JOSEPH, MD

Provider Gender: Male

License Number: A155228

NPI: 1588624852

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

320 SANTA FE DR STE 104
ENCINITAS, CA 92024

Phone: (760) 943-7141

Fax: (760) 943-0371

After Hours Phone: (760)
943-7141

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

MOLL, ANGELA, MD

Provider Gender: Female

License Number: A105472

NPI: 1861648602

Provider English Spoken: Y

Cultural Competency: Y

RADY CHILDRENS HOSPITAL
ENCINITAS

477 N EL CAMINO REAL
STE D302

ENCINITAS, CA 92024

Phone: (858) 309-7702

Fax: (858) 966-7403

After Hours Phone: (858)
309-7702

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-5:00PM

MORRISON REYES, JOSHUA, MD

Provider Gender: Male

License Number: A125435

NPI: 1235366782

Provider English Spoken: Y

Provider Language(s) Spoken:

Indonesian, Spanish

Cultural Competency: Y

ACUITY EYE GROUP

320 SANTA FE DR STE 104
ENCINITAS, CA 92024

Phone: (760) 943-7141

Fax: (760) 943-0371

After Hours Phone: (760)
943-7141

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

O HALLORAN, HENRY, MD

Provider Gender: Male

License Number: A73282

NPI: 1235287947

Provider English Spoken: Y

Provider Language(s) Spoken:

German, Spanish

Cultural Competency: Y

RADY CHILDRENS HOSPITAL
ENCINITAS

477 N EL CAMINO REAL
STE D302

ENCINITAS, CA 92024

Phone: (858) 309-7702

Fax: (858) 966-7403

After Hours Phone: (858)
309-7702

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

PROVIDER
Public transportation (within
1/2 mile from Site): 1U
🕒 Hours: M-F
8:00AM-5:00PM

SAMUEL, MICHAEL, MD

Provider Gender: Male
License Number: A83237
NPI: 1730175670
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP

📍 320 SANTA FE DR STE 104
ENCINITAS, CA 92024
☎ Phone: (760) 943-7141
Fax: (760) 943-0371
🕒 After Hours Phone: (760)
943-7141

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-5:00PM

TON-NU, MY LINH, OD

Provider Gender: Female
License Number: 34990
NPI: 1245733476
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP

📍 320 SANTA FE DR STE 104
ENCINITAS, CA 92024
☎ Phone: (760) 943-7141

Fax: (760) 943-0371

🕒 After Hours Phone: (760)
943-7141

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-5:00PM

VINH, JOHN, OD

Provider Gender: Male
License Number: 14177
NPI: 1003102724

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 320 SANTA FE DR STE 104
ENCINITAS, CA 92024

☎ Phone: (760) 943-7141
Fax: (760) 943-0371

🕒 After Hours Phone: (760)
943-7141

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-5:00PM

VIVIRITO, MARY, OD

Provider Gender: Female
License Number: 33798
NPI: 1477968667
Provider English Spoken: Y
Provider Language(s) Spoken:

Cultural Competency: Y

ACUITY EYE GROUP

📍 320 SANTA FE DR STE 104
ENCINITAS, CA 92024

☎ Phone: (760) 943-7141
Fax: (760) 943-0371

🕒 After Hours Phone: (760)
943-7141

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-5:00PM

ZHAO, TAILUN, MD

Provider Gender: Male
License Number: C186414
NPI: 1952659203

Provider English Spoken: Y
Cultural Competency: Y

ACUITY EYE GROUP

📍 320 SANTA FE DR STE 104
ENCINITAS, CA 92024

☎ Phone: (760) 943-7141
Fax: (760) 943-0371

🕒 After Hours Phone: (760)
943-7141

Accepting New Patients: Yes

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
8:00AM-5:00PM

ZVANUT, DONALD, OD

Provider Gender: Male
License Number: 8642
NPI: 1336211804
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
 320 SANTA FE DR STE 104
ENCINITAS, CA 92024
 Phone: (760) 943-7141
Fax: (760) 943-0371
 After Hours Phone: (760) 943-7141

Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
8:00AM-5:00PM

ESCONDIDO

ADAMS, MONA, OD

Provider Gender: Female

License Number: 14457
NPI: 1942564521
Provider English Spoken: Y
Cultural Competency: Y
RADY CHILDRENS SPECIALISTS
 2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
 Phone: (760) 755-7600
Fax: (760) 755-7699

After Hours Phone: (760) 755-7600
Accepting New Patients: Yes
 Site English Spoken: Y
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
8:30AM-4:30PM

ASIS, STEPHANIE, OD

Provider Gender: Female
License Number: 34013
NPI: 1902383540
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
 Phone: (760) 743-5872
Fax: (760) 743-5879
 After Hours Phone: (760) 743-5872

Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
8:00AM-5:00PM

BANDAK, DIANA, OD

Provider Gender: Female
License Number: 34850
NPI: 1235805318
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: Y
ACUITY EYE GROUP
 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
 Phone: (760) 743-5872
Fax: (760) 743-5879
 After Hours Phone: (760) 743-5872

Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
8:00AM-5:00PM

BANSAL, PREETI, MD

Provider Gender: Female
License Number: A90890
NPI: 1871664631

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: Y
RADY CHILDRENS
SPECIALISTS

📍 2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029

☎ Phone: (760) 755-7600

Fax: (760) 755-7699

📞 After Hours Phone: (760)
755-7600

Accepting New Patients: Yes

📄 Site English Spoken: Y
American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:30AM-4:30PM

BAUMANN, DANIELA, OD

Provider Gender: Female

License Number: 34530

NPI: 1982232146

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026

☎ Phone: (760) 743-5872

Fax: (760) 743-5879

📞 After Hours Phone: (760)
743-5872

Accepting New Patients: Yes

📄 Site English Spoken: Y

📄 Site Languages(s) Spoken:
Spanish

American Sign Language (ASL): RADY CHILDRENS
SPECIALISTS

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-5:00PM

BEAUDRY, AMANDA, OD

Provider Gender: Female

License Number: 33385

NPI: 1477903516

Provider English Spoken: Y

Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

📍 2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029

☎ Phone: (760) 755-7600

Fax: (760) 755-7699

📞 After Hours Phone: (760)
755-7600

Accepting New Patients: Yes

📄 Site English Spoken: Y
American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:30AM-4:30PM

BERGMARK, JAMIE, OD

Provider Gender: Female

License Number: 33657

NPI: 1669920757

Provider English Spoken: Y

Cultural Competency: Y

📍 2125 CITRACADO PKWY
STE 200

ESCONDIDO, CA 92029

☎ Phone: (760) 755-7600

Fax: (760) 755-7699

📞 After Hours Phone: (760)
755-7600

Accepting New Patients: Yes

📄 Site English Spoken: Y
American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:30AM-4:30PM

BHATIA, SHAGUN, MD

Provider Gender: Female

License Number: A154902

NPI: 1104237353

Provider English Spoken: Y

Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

📍 2125 CITRACADO PKWY
STE 200

ESCONDIDO, CA 92029

☎ Phone: (760) 755-7600

Fax: (760) 755-7699

📞 After Hours Phone: (760)
755-7600

Accepting New Patients: Yes

📄 Site English Spoken: Y
American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

1/2 mile from Site): 1T

🕒 Hours: M-F
8:30AM-4:30PM

BINDER, NICHOLAS, MD

Provider Gender: Male
License Number: A124698
NPI: 1306076716
Provider English Spoken: Y
Cultural Competency: Y

ACUITY EYE GROUP

📍 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
📞 Phone: (760) 743-5872
Fax: (760) 743-5879

🕒 After Hours Phone: (760)
743-5872

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-5:00PM

CHANG, TOM, MD

Provider Gender: Male
License Number: A69909
NPI: 1609848969
Provider English Spoken: Y
Cultural Competency: Y

ACUITY EYE GROUP

📍 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
📞 Phone: (760) 743-5872

Fax: (760) 743-5879

🕒 After Hours Phone: (760)
743-5872

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-5:00PM

CHAU, VIVIAN, OD

Provider Gender: Female
License Number: 35427
NPI: 1558052951
Provider English Spoken: Y
Provider Language(s) Spoken:
Chinese

Cultural Competency: Y

ACUITY EYE GROUP

📍 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
📞 Phone: (760) 743-5872
Fax: (760) 743-5879

🕒 After Hours Phone: (760)
743-5872

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-5:00PM

DUONG, KIM, OD

Provider Gender: Female
License Number: 34222
NPI: 1114448651
Provider English Spoken: Y
Provider Language(s) Spoken:
Vietnamese

Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

📍 2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
📞 Phone: (760) 755-7600
Fax: (760) 755-7699

🕒 After Hours Phone: (760)
755-7600

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:30AM-4:30PM


GOLDSTONE, ADAM, OD


Provider Gender: Male
License Number: 11051
NPI: 1316972995
Provider English Spoken: Y
Cultural Competency: Y

ACUITY EYE GROUP

📍 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

 Phone: (760) 743-5872
Fax: (760) 743-5879

 After Hours Phone: (760) 743-5872


Accepting New Patients: Yes

Site English Spoken: Y


Site Languages(s) Spoken: Spanish

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F
8:00AM-5:00PM

HAMOUIE, JUDY, OD

Provider Gender: Female


License Number: 34984


NPI: 1518638287

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026

 Phone: (760) 743-5872
Fax: (760) 743-5879

 After Hours Phone: (760) 743-5872

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F

8:00AM-5:00PM

HSU, CHRISTOPHER, MD

Provider Gender: Male


License Number: A65973


NPI: 1336167618

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026

 Phone: (760) 743-5872
Fax: (760) 743-5879

 After Hours Phone: (760) 743-5872

Accepting New Patients: Yes

Site English Spoken: Y


Site Languages(s) Spoken: Spanish

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F
8:00AM-5:00PM

HUDSON, HENRY, MD

Provider Gender: Male


License Number: G76091


NPI: 1851349195

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026

 Phone: (760) 743-5872
Fax: (760) 743-5879

 After Hours Phone: (760)

743-5872

Accepting New Patients: Yes

Site English Spoken: Y


Site Languages(s) Spoken: Spanish

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F
8:00AM-5:00PM

KALBAKJI, NATALY, OD

Provider Gender: Female

License Number: 34943

NPI: 1700556438


Provider English Spoken: Y


Provider Language(s) Spoken:

Arabic

Cultural Competency: Y

ACUITY EYE GROUP

 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026

 Phone: (760) 743-5872
Fax: (760) 743-5879

 After Hours Phone: (760) 743-5872

Accepting New Patients: Yes

Site English Spoken: Y


Site Languages(s) Spoken: Spanish

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F
8:00AM-5:00PM

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

KARAPETIAN, ELENA, OD

Provider Gender: Female
License Number: 34514
NPI: 1184250417
Provider English Spoken: Y
Cultural Competency: Y

ACUITY EYE GROUP

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone: (760)
743-5872

Accepting New Patients: Yes

Site English Spoken: Y
Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

KHALIL, VADY, OD

Provider Gender: Male
License Number: 35137
NPI: 1275263584
Provider English Spoken: Y
Provider Language(s) Spoken:
Arabic
Cultural Competency: Y

ACUITY EYE GROUP

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Phone: (760) 743-5872
Fax: (760) 743-5879

After Hours Phone: (760)
743-5872

Accepting New Patients: Yes

Site English Spoken: Y
Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

KHIEU, TINA, OD

Provider Gender: Female
License Number: 34777
NPI: 1962031617

Provider English Spoken: Y
Cultural Competency: Y

ACUITY EYE GROUP

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Phone: (760) 743-5872
Fax: (760) 743-5879

After Hours Phone: (760)
743-5872

Accepting New Patients: Yes

Site English Spoken: Y
Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

KIM, PHILIP, OD

Provider Gender: Male
License Number: 33893
NPI: 1376929034
Provider English Spoken: Y
Cultural Competency: Y

ACUITY EYE GROUP

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Phone: (760) 743-5872
Fax: (760) 743-5879

After Hours Phone: (760)
743-5872

Accepting New Patients: Yes

Site English Spoken: Y
Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

KLAREN, AMANDA, OD

Provider Gender: Female
License Number: 12617
NPI: 1396876611
Provider English Spoken: Y
Cultural Competency: Y

RADY CHILDRENS SPECIALISTS

2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
Phone: (760) 755-7600
Fax: (760) 755-7699

After Hours Phone: (760)
755-7600

D7. Directorio de proveedores de la vista: servicios oculares y de la vista


Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

 Hours: M-F
8:30AM-4:30PM

KWAK, ANGELA, OD

Provider Gender: Female

License Number: 13692


NPI: 1255564860


Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

ACUITY EYE GROUP

 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026

 Phone: (760) 743-5872

Fax: (760) 743-5879

 After Hours Phone: (760)
743-5872

Accepting New Patients: Yes


Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

 Hours: M-F
8:00AM-5:00PM

LE, TAM, OD

Provider Gender: Female

License Number: 12951


NPI: 1235268707


Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish, Vietnamese

Cultural Competency: Y

TAM T LE OD INC

 1711 E VALLEY PKWY STE
109
ESCONDIDO, CA 92027

 Phone: (760) 737-6064

Fax: (760) 737-6064

 After Hours Phone: (760)
737-6064

Accepting New Patients: Yes


Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Vietnamese

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

 Hours: M-TH
9:00AM-5:30PM
F 9:00AM-1:00PM

LEE, JASON, OD

Provider Gender: Male

License Number: 14881

NPI: 1679985584

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish


Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

 2125 CITRACADO PKWY
STE 200

ESCONDIDO, CA 92029

 Phone: (760) 755-7600

Fax: (760) 755-7699

 After Hours Phone: (760)
755-7600


Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

 Hours: M-F
8:30AM-4:30PM

MARR, RYAN, OD

Provider Gender: Male

License Number: 35302

NPI: 1235857525


Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

 700 W EL NORTE PKWY
STE 200

ESCONDIDO, CA 92026

 Phone: (760) 743-5872

Fax: (760) 743-5879

 After Hours Phone: (760)
743-5872

Accepting New Patients: Yes


Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

 Hours: M-F
8:00AM-5:00PM

MCGRAW, JOSEPH, MD

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

Provider Gender: Male

License Number: A155228

NPI: 1588624852

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026

Phone: (760) 743-5872

Fax: (760) 743-5879

After Hours Phone: (760)
743-5872

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

MOLL, ANGELA, MD

Provider Gender: Female

License Number: A105472

NPI: 1861648602

Provider English Spoken: Y

Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029

Phone: (760) 755-7600

Fax: (760) 755-7699

After Hours Phone: (760)
755-7600

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:30AM-4:30PM

MORRISON REYES, JOSHUA, MD

Provider Gender: Male

License Number: A125435

NPI: 1235366782

Provider English Spoken: Y

Provider Language(s) Spoken:

Indonesian, Spanish

Cultural Competency: Y

ACUITY EYE GROUP

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026

Phone: (760) 743-5872

Fax: (760) 743-5879

After Hours Phone: (760)
743-5872

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

MOVAGHAR, MANSOOR, MD

Provider Gender: Male

License Number: A100897

NPI: 1497792220

Provider English Spoken: Y

Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029

Phone: (760) 755-7600

Fax: (760) 755-7699

After Hours Phone: (760)
755-7600

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:30AM-4:30PM

O HALLORAN, HENRY, MD

Provider Gender: Male

License Number: A73282

NPI: 1235287947

Provider English Spoken: Y

Provider Language(s) Spoken:

German, Spanish

Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029

Phone: (760) 755-7600

Fax: (760) 755-7699

After Hours Phone: (760)
755-7600

Accepting New Patients: Yes

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

Site English Spoken: Y
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T
 Hours: M-F
8:30AM-4:30PM

PANSARA, MEGHA, MD

Provider Gender: Female
License Number: A143429
NPI: 1184983728
Provider English Spoken: Y
Provider Language(s) Spoken:
Gujarati
Cultural Competency: Y

RADY CHILDRENS SPECIALISTS

2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
 Phone: (760) 755-7600
Fax: (760) 755-7699
 After Hours Phone: (760)
755-7600
Accepting New Patients: Yes
 Site English Spoken: Y
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T
 Hours: M-F
8:30AM-4:30PM

PATEL, SARJAN, MD

Provider Gender: Male
License Number: A114976

NPI: 1316199326
Provider English Spoken: Y
Provider Language(s) Spoken:
Gujarati, Hindi, Spanish
Cultural Competency: Y
ACUITY EYE GROUP
 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
 Phone: (760) 743-5872
Fax: (760) 743-5879

After Hours Phone: (760)
743-5872

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T
 Hours: M-F
8:00AM-5:00PM

PATEL, GITANE, MD

Provider Gender: Male
License Number: A108603
NPI: 1710171434
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
 Phone: (760) 743-5872
Fax: (760) 743-5879

After Hours Phone: (760)
743-5872

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T
 Hours: M-F
8:00AM-5:00PM

PRABHU, SUJATA, MD

Provider Gender: Female
License Number: A115965
NPI: 1982872552
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: Y

ACUITY EYE GROUP
 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
 Phone: (760) 743-5872
Fax: (760) 743-5879
 After Hours Phone: (760)
743-5872

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T
 Hours: M-F
8:00AM-5:00PM

SAMUEL, MICHAEL, MD

Provider Gender: Male

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

License Number: A83237

NPI: 1730175670

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

700 W EL NORTE PKWY
STE 200

ESCONDIDO, CA 92026

Phone: (760) 743-5872

Fax: (760) 743-5879

After Hours Phone: (760)
743-5872

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

THACH, TERILYN, OD

Provider Gender: Female

License Number: 11456

NPI: 1710030861

Provider English Spoken: Y

Provider Language(s) Spoken:
Vietnamese

Cultural Competency: Y

INSIGHT VISION OPTOMETRY

2419 E VALLEY PKWY
ESCONDIDO, CA 92027

Phone: (760) 738-9931

Fax: (760) 888-2181

After Hours Phone: (760)
738-9931

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Vietnamese

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-TU
9:30AM-5:00PM
TH 10:00AM-6:00PM
F 9:30AM-5:00PM

TON-NU, MY LINH, OD

Provider Gender: Female

License Number: 34990

NPI: 1245733476

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

700 W EL NORTE PKWY
STE 200

ESCONDIDO, CA 92026

Phone: (760) 743-5872

Fax: (760) 743-5879

After Hours Phone: (760)
743-5872

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

TRAN, ALEXANDER, OD

Provider Gender: Male

License Number: 14136

NPI: 1902414790

Provider English Spoken: Y

Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

2125 CITRACADO PKWY
STE 200

ESCONDIDO, CA 92029

Phone: (760) 755-7600

Fax: (760) 755-7699

After Hours Phone: (760)
755-7600

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:30AM-4:30PM

VERRET, ERIC, OD

Provider Gender: Male

License Number: 11401

NPI: 1194891853

Provider English Spoken: Y

Provider Language(s) Spoken:

French, Spanish

Cultural Competency: Y

ESCONDIDO EYECARE

613 E GRAND AVE
ESCONDIDO, CA 92025

Phone: (760) 747-7979

Fax: (760) 747-7799

After Hours Phone: (760)
747-7979

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

Arabic, French, Spanish
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T
Hours: M-TU
9:00AM-6:00PM
W-TH 9:00AM-8:00PM

VIVIRITO, MARY, OD

Provider Gender: Female
License Number: 33798
NPI: 1477968667
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: Y
ACUITY EYE GROUP
700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone: (760)
743-5872

Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken:
Spanish
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T
Hours: M-F
8:00AM-5:00PM

ZAIDI, NOORINA, OD

Provider Gender: Female

License Number: 35615
NPI: 1023477262
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone: (760)
743-5872

Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken:
Spanish
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T
Hours: M-F
8:00AM-5:00PM

ZHAO, TAILUN, MD

Provider Gender: Male
License Number: C186414
NPI: 1952659203
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone: (760)
743-5872

Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken:

Spanish
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T
Hours: M-F
8:00AM-5:00PM

ZVANUT, DONALD, OD

Provider Gender: Male
License Number: 8642
NPI: 1336211804
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone: (760)
743-5872

Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken:
Spanish
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T
Hours: M-F
8:00AM-5:00PM

FALLBROOK

ARCHIBALD, JOHN, OD

Provider Gender: Male
License Number: 11813

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

NPI: 1902893357

Provider English Spoken: Y

Cultural Competency: Y

INLAND EYE SPECIALISTS

521 E ELDER ST STE 102
FALLBROOK, CA 92028

Phone: (760) 728-5728

Fax: (760) 728-5934

After Hours Phone: (760)
728-5728

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-5:00PM

COLEMAN, BROOKE, OD

Provider Gender: Female

License Number: 13551

NPI: 1700040748

Provider English Spoken: Y

Cultural Competency: Y

INLAND EYE SPECIALISTS

521 E ELDER ST STE 102
FALLBROOK, CA 92028

Phone: (760) 728-5728

Fax: (760) 728-5934

After Hours Phone: (760)
728-5728

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-5:00PM

CONNOR, JEFFREY, OD

Provider Gender: Male

License Number: 33683

NPI: 1063968980

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

INLAND EYE SPECIALISTS

521 E ELDER ST STE 102
FALLBROOK, CA 92028

Phone: (760) 728-5728

Fax: (760) 728-5934

After Hours Phone: (760)
728-5728

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-5:00PM

COOPER, MICHAEL, OD

Provider Gender: Male

License Number: 10476

NPI: 1164586244

Provider English Spoken: Y

Cultural Competency: Y

INLAND EYE SPECIALISTS

521 E ELDER ST STE 102
FALLBROOK, CA 92028

Phone: (760) 728-5728

Fax: (760) 728-5934

After Hours Phone: (760)
728-5728

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-5:00PM

DUONG, CHERYL, OD

Provider Gender: Female

License Number: 34070

NPI: 1366935678

Provider English Spoken: Y

Cultural Competency: Y

INLAND EYE SPECIALISTS

521 E ELDER ST STE 102
FALLBROOK, CA 92028

Phone: (760) 728-5728

Fax: (760) 728-5934

After Hours Phone: (760)
728-5728

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-5:00PM

GEORGE, BRUCE, OD

Provider Gender: Male

License Number: 7696

NPI: 1356414551

Provider English Spoken: Y

Provider Language(s) Spoken:

Korean, Spanish

Cultural Competency: Y

BRUCE D GEORGE OD

📍 1102 S MAIN AVE
FALLBROOK, CA 92028

📞 Phone: (760) 723-8417

Fax: (760) 758-2063

🕒 After Hours Phone: (760)
723-8417

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M 1:00PM-5:00PM
TU-W 9:00AM-6:00PM
TH-F 9:00AM-5:00PM
SA 9:00AM-1:00PM

GEORGE, KENDALL, OD

Provider Gender: Male

License Number: 34270

NPI: 1619529948

Provider English Spoken: Y

Provider Language(s) Spoken:

Spanish

Cultural Competency: Y

BRUCE D GEORGE OD

📍 1102 S MAIN AVE
FALLBROOK, CA 92028

📞 Phone: (760) 723-8417

Fax: (760) 758-2063

🕒 After Hours Phone: (760)
723-8417

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M 1:00PM-5:00PM
TU-W 9:00AM-6:00PM
TH-F 9:00AM-5:00PM
SA 9:00AM-1:00PM

KHINDA, SUNEHA, OD

Provider Gender: Female

License Number: 35494

NPI: 1750066726

Provider English Spoken: Y

Cultural Competency: Y

INLAND EYE SPECIALISTS

📍 521 E ELDER ST STE 102
FALLBROOK, CA 92028

📞 Phone: (760) 728-5728

Fax: (760) 728-5934

🕒 After Hours Phone: (760)
728-5728

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-5:00PM

TEW, JOHN, MD

Provider Gender: Male

License Number: A83206

NPI: 1174593354

Provider English Spoken: Y

Provider Language(s) Spoken:

Portuguese

Cultural Competency: Y

INLAND EYE SPECIALISTS

📍 521 E ELDER ST STE 102
FALLBROOK, CA 92028

📞 Phone: (760) 728-5728

Fax: (760) 728-5934

🕒 After Hours Phone: (760)
728-5728

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-5:00PM

IMPERIAL BEACH

HANONO, HELFON, OD

Provider Gender: Male

License Number: 6681

NPI: 1619942034

Provider English Spoken: Y

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

Provider Language(s) Spoken: Spanish
 Cultural Competency: Y
 IMPERIAL BEACH
 OPTOMETRY INC APC
 894 PALM AVE STE B
 IMPERIAL BEACH, CA 91932
 Phone: (619) 424-9333
 Fax: (619) 424-3356
 After Hours Phone: (619) 424-9333

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F
 9:00AM-6:00PM

HANONO, ABRAHAM, OD

Provider Gender: Male
 License Number: 14900
 NPI: 1356754741
 Provider English Spoken: Y
 Provider Language(s) Spoken: Hebrew, Spanish
 Cultural Competency: Y
 IMPERIAL BEACH
 OPTOMETRY INC APC
 894 PALM AVE STE B
 IMPERIAL BEACH, CA 91932
 Phone: (619) 424-9333
 Fax: (619) 424-3356
 After Hours Phone: (619) 424-9333
 Accepting New Patients: Yes
 Site English Spoken: Y

Site Languages(s) Spoken: Spanish
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F
 9:00AM-6:00PM

LA JOLLA

BAUMANN, DANIELA, OD

Provider Gender: Female
 License Number: 34530
 NPI: 1982232146
 Provider English Spoken: Y
 Cultural Competency: Y
 ACUITY EYE GROUP
 9850 GENESEE AVE STE 310
 LA JOLLA, CA 92037
 Phone: (858) 457-3010
 Fax: (858) 457-0028
 After Hours Phone: (858) 457-3010

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish, Tagalog
 American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F
 8:00AM-4:30PM

CHIU, STEPHAN, MD

Provider Gender: Male

License Number: A172634
 NPI: 1053846956
 Provider English Spoken: Y
 Cultural Competency: Y
 ACUITY EYE GROUP
 9850 GENESEE AVE STE 310
 LA JOLLA, CA 92037
 Phone: (858) 457-3010
 Fax: (858) 457-0028
 After Hours Phone: (858) 457-3010

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish, Tagalog

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
 Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F
 8:00AM-4:30PM



CODEN, DANIEL, MD

Provider Gender: Male
 License Number: G57587
 NPI: 1942317508
 Provider English Spoken: Y
 Cultural Competency: Y
 ACUITY EYE GROUP
 9850 GENESEE AVE STE 310
 LA JOLLA, CA 92037
 Phone: (858) 457-3010
 Fax: (858) 457-0028
 After Hours Phone: (858) 457-3010

Accepting New Patients: Yes








Site English Spoken: Y
 Site Languages(s) Spoken:

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

Spanish, Tagalog
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
 Hours: M-F
8:00AM-4:30PM

DEAN, MOENA, OD

Provider Gender: Female
License Number: 33955
NPI: 1265927578
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP

 9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
 Phone: (858) 457-3010
Fax: (858) 457-0028
 After Hours Phone: (858)
457-3010
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish, Tagalog
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
 Hours: M-F
8:00AM-4:30PM

DYER, SHARON, OD


Provider Gender: Female
License Number: 33450
NPI: 1063866887
Provider English Spoken: Y

Cultural Competency: Y
ACUITY EYE GROUP
 9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
 Phone: (858) 457-3010
Fax: (858) 457-0028
 After Hours Phone: (858)
457-3010
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish, Tagalog
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
 Hours: M-F
8:00AM-4:30PM

HO, AMIEE, OD

Provider Gender: Female
License Number: 14527
NPI: 1396009478
Provider English Spoken: Y
Cultural Competency: Y


PERLMAN
OPHTHALMOLOGY-UCSD
 9350 CAMPUS POINT DR
STE 1B
LA JOLLA, CA 92037
 Phone: (858) 534-6290
Fax: (858) 732-0921
 After Hours Phone: (858)
534-6290
Accepting New Patients: Yes
 Site English Spoken: Y
American Sign Language (ASL):
N
 Accessibility: CONTACT

PROVIDER
Public transportation (within
1/2 mile from Site): 1T
 Hours: M-F
8:00AM-4:30PM

HO, AMIEE, OD

Provider Gender: Female
License Number: 14527
NPI: 1396009478
Provider English Spoken: Y
Cultural Competency: Y
UCSD SHILEY EYE CENTER
 9415 CAMPUS POINT DR
LA JOLLA, CA 92093
 Phone: (858) 534-6290
Fax: (858) 732-0921
 After Hours Phone: (858)
534-6290
Accepting New Patients: Yes
 Site English Spoken: Y
American Sign Language (ASL):
N
 Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
 Hours: M-F
8:00AM-4:30PM
SA 8:00AM-2:00PM

HOO, PAMELA, OD

Provider Gender: Female
License Number: 11033
NPI: 1275566010
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: Y
UCSD SHILEY EYE CENTER
 9415 CAMPUS POINT DR

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

LA JOLLA, CA 92093
☎ Phone: (858) 534-6290
Fax: (858) 732-0921

🕒 After Hours Phone: (858) 534-6290

Accepting New Patients: Yes

🗨 Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-4:30PM
SA 8:00AM-2:00PM

HOO, PAMELA, OD

Provider Gender: Female

License Number: 11033

NPI: 1275566010

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

PERLMAN

OPHTHALMOLOGY-UCSD

📍 9350 CAMPUS POINT DR
STE 1B

LA JOLLA, CA 92037
☎ Phone: (858) 534-6290
Fax: (858) 732-0921

🕒 After Hours Phone: (858) 534-6290

Accepting New Patients: Yes

🗨 Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-4:30PM

HUDSON, HENRY, MD

Provider Gender: Male

License Number: G76091

NPI: 1851349195

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 9850 GENESEE AVE STE
310

LA JOLLA, CA 92037
☎ Phone: (858) 457-3010
Fax: (858) 457-0028

🕒 After Hours Phone: (858) 457-3010

Accepting New Patients: Yes

🗨 Site English Spoken: Y

🗨 Site Language(s) Spoken:
Spanish, Tagalog

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-4:30PM

HUSTANA, LARA, OD

Provider Gender: Female

License Number: 11472

NPI: 1235161597

Provider English Spoken: Y

Provider Language(s) Spoken:
French

Cultural Competency: Y

PERLMAN

OPHTHALMOLOGY-UCSD

📍 9350 CAMPUS POINT DR

STE 1B

LA JOLLA, CA 92037

☎ Phone: (858) 534-6290
Fax: (858) 732-0921

🕒 After Hours Phone: (858) 534-6290

Accepting New Patients: Yes

🗨 Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-4:30PM

HUSTANA, LARA, OD

Provider Gender: Female

License Number: 11472

NPI: 1235161597

Provider English Spoken: Y

Provider Language(s) Spoken:
French

Cultural Competency: Y

UCSD SHILEY EYE CENTER

📍 9415 CAMPUS POINT DR
LA JOLLA, CA 92093

☎ Phone: (858) 534-6290
Fax: (858) 732-0921

🕒 After Hours Phone: (858) 534-6290

Accepting New Patients: Yes

🗨 Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-4:30PM

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

- SA 8:00AM-2:00PM
- JOMOC, CAITLIN, OD**
Provider Gender: Female
License Number: 35009
NPI: 1861164642
Provider English Spoken: Y
Cultural Competency: Y
PERLMAN
OPHTHALMOLOGY-UCSD
📍 9350 CAMPUS POINT DR
STE 1B
LA JOLLA, CA 92037
☎ Phone: (858) 534-6290
Fax: (858) 732-0921
🕒 After Hours Phone: (858)
534-6290
Accepting New Patients: Yes
🗒 Site English Spoken: Y
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T
🕒 Hours: M-F
8:00AM-4:30PM
- JOMOC, CAITLIN, OD**
Provider Gender: Female
License Number: 35009
NPI: 1861164642
Provider English Spoken: Y
Cultural Competency: Y
UCSD SHILEY EYE CENTER
📍 9415 CAMPUS POINT DR
LA JOLLA, CA 92093
☎ Phone: (858) 534-6290
Fax: (858) 732-0921
🕒 After Hours Phone: (858)
534-6290
Accepting New Patients: Yes
- 🗒 Site English Spoken: Y
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
🕒 Hours: M-F
8:00AM-4:30PM
- KALBAKJI, NATALY, OD**
Provider Gender: Female
License Number: 34943
NPI: 1700556438
Provider English Spoken: Y
Provider Language(s) Spoken:
Arabic
Cultural Competency: Y
ACUITY EYE GROUP
📍 9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
☎ Phone: (858) 457-3010
Fax: (858) 457-0028
🕒 After Hours Phone: (858)
457-3010
Accepting New Patients: Yes
🗒 Site English Spoken: Y
🗒 Site Languages(s) Spoken:
Spanish, Tagalog
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
🕒 Hours: M-F
8:00AM-4:30PM
- KHIEU, TINA, OD**
Provider Gender: Female
License Number: 34777
NPI: 1962031617
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
📍 9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
☎ Phone: (858) 457-3010
Fax: (858) 457-0028
🕒 After Hours Phone: (858)
457-3010
Accepting New Patients: Yes
- KHALIL, VADY, OD**
Provider Gender: Male
- License Number: 35137
NPI: 1275263584
Provider English Spoken: Y
Provider Language(s) Spoken:
Arabic
Cultural Competency: Y
ACUITY EYE GROUP
📍 9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
☎ Phone: (858) 457-3010
Fax: (858) 457-0028
🕒 After Hours Phone: (858)
457-3010
Accepting New Patients: Yes

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish, Tagalog
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F
8:00AM-4:30PM

KIM, PHILIP, OD

Provider Gender: Male
License Number: 33893
NPI: 1376929034
Provider English Spoken: Y
Cultural Competency: Y
PERLMAN

OPHTHALMOLOGY-UCSD

9350 CAMPUS POINT DR
STE 1B
LA JOLLA, CA 92037
 Phone: (858) 534-6290
Fax: (858) 732-0921
 After Hours Phone: (858) 534-6290

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
8:00AM-4:30PM

KIM, PHILIP, OD

Provider Gender: Male
License Number: 33893
NPI: 1376929034

Provider English Spoken: Y
Cultural Competency: Y
UCSD SHILEY EYE CENTER
 9415 CAMPUS POINT DR
LA JOLLA, CA 92093
 Phone: (858) 534-6290
Fax: (858) 732-0921

After Hours Phone: (858) 534-6290

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F
8:00AM-4:30PM
SA 8:00AM-2:00PM

KULISCHAK, JOHN, OD

Provider Gender: Male
License Number: 9279
NPI: 1740205236

Provider English Spoken: Y

Cultural Competency: Y

UCSD SHILEY EYE CENTER

9415 CAMPUS POINT DR
LA JOLLA, CA 92093
 Phone: (858) 534-6290
Fax: (858) 732-0921

After Hours Phone: (858) 534-6290

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U

Hours: M-F
8:00AM-4:30PM
SA 8:00AM-2:00PM

KULISCHAK, JOHN, OD

Provider Gender: Male
License Number: 9279
NPI: 1740205236

Provider English Spoken: Y
Cultural Competency: Y

PERLMAN
OPHTHALMOLOGY-UCSD

9350 CAMPUS POINT DR
STE 1B
LA JOLLA, CA 92037
 Phone: (858) 534-6290
Fax: (858) 732-0921

After Hours Phone: (858) 534-6290

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
8:00AM-4:30PM

LAM, ANNE, OD

Provider Gender: Female
License Number: 12810
NPI: 1174550768

Provider English Spoken: Y
Cultural Competency: Y

UCSD SHILEY EYE CENTER
 9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (858) 534-6290
Fax: (858) 732-0921

After Hours Phone: (858)

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

534-6290
Accepting New Patients: Yes
 Site English Spoken: Y
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F
8:00AM-4:30PM
SA 8:00AM-2:00PM

LAM, ANNE, OD

Provider Gender: Female
License Number: 12810
NPI: 1174550768
Provider English Spoken: Y
Cultural Competency: Y
PERLMAN

OPHTHALMOLOGY-UCSD

9350 CAMPUS POINT DR
STE 1B
LA JOLLA, CA 92037
 Phone: (858) 534-6290
Fax: (858) 732-0921
 After Hours Phone: (858)
534-6290
Accepting New Patients: Yes
 Site English Spoken: Y
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
8:00AM-4:30PM

LUSBY, FRANKLIN, MD

Provider Gender: Male
License Number: G41830

NPI: 1265526180
Provider English Spoken: Y
Cultural Competency: Y
LUSBY VISION INSTITUTE
 9850 GENESEE AVE STE
220
LA JOLLA, CA 92037
 Phone: (858) 459-6200
Fax: (858) 459-2025
 After Hours Phone: (858)
459-6200
Accepting New Patients: Yes
 Site English Spoken: Y
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
9:00AM-5:00PM

MARR, RYAN, OD

Provider Gender: Male
License Number: 35302
NPI: 1235857525
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
 9850 GENESEE AVE STE
310
LA JOLLA, CA 92037
 Phone: (858) 457-3010
Fax: (858) 457-0028
 After Hours Phone: (858)
457-3010
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish, Tagalog
American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F
8:00AM-4:30PM

MCCLEAN, ESMERALDA, OD

Provider Gender: Female
License Number: 15001
NPI: 1962817981
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: Y
PERLMAN

OPHTHALMOLOGY-UCSD

9350 CAMPUS POINT DR
STE 1B
LA JOLLA, CA 92037
 Phone: (858) 534-6290
Fax: (858) 732-0921
 After Hours Phone: (858)
534-6290
Accepting New Patients: Yes
 Site English Spoken: Y
American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
8:00AM-4:30PM

MIZOGUCHI, LIANNE, OD

Provider Gender: Female
License Number: 10104
NPI: 1619900313
Provider English Spoken: Y
Cultural Competency: Y

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

PERLMAN

OPHTHALMOLOGY-UCSD

9350 CAMPUS POINT DR
STE 1B

LA JOLLA, CA 92037

Phone: (858) 534-6290

Fax: (858) 732-0921

After Hours Phone: (858)
534-6290

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-4:30PM

MIZOGUCHI, LIANNE, OD

Provider Gender: Female

License Number: 10104

NPI: 1619900313

Provider English Spoken: Y

Cultural Competency: Y

UCSD SHILEY EYE CENTER

9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (858) 534-6290

Fax: (858) 732-0921

After Hours Phone: (858)
534-6290

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F

8:00AM-4:30PM

SA 8:00AM-2:00PM

MOOR, TRACY, OD

Provider Gender: Female

License Number: 35085

NPI: 1184283277

Provider English Spoken: Y

Cultural Competency: Y

UCSD SHILEY EYE CENTER

9415 CAMPUS POINT DR
LA JOLLA, CA 92093

Phone: (858) 534-6290

Fax: (858) 732-0921

After Hours Phone: (858)
534-6290

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-4:30PM

SA 8:00AM-2:00PM

MOOR, TRACY, OD

Provider Gender: Female

License Number: 35085

NPI: 1184283277

Provider English Spoken: Y

Cultural Competency: Y

PERLMAN

OPHTHALMOLOGY-UCSD

9350 CAMPUS POINT DR
STE 1B

LA JOLLA, CA 92037

Phone: (858) 534-6290

Fax: (858) 732-0921

After Hours Phone: (858)

534-6290

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-4:30PM

**MORRISON REYES, JOSHUA,
MD**

Provider Gender: Male

License Number: A125435

NPI: 1235366782

Provider English Spoken: Y

Provider Language(s) Spoken:

Indonesian, Spanish

Cultural Competency: Y

ACUITY EYE GROUP

9850 GENESEE AVE STE
310

LA JOLLA, CA 92037

Phone: (858) 457-3010

Fax: (858) 457-0028

After Hours Phone: (858)
457-3010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Tagalog

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-4:30PM

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

PERRY, ARTHUR, MD

Provider Gender: Male

License Number: C37934

NPI: 1194832725

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

ACUITY EYE GROUP

9850 GENESEE AVE STE
310

LA JOLLA, CA 92037

Phone: (858) 457-3010

Fax: (858) 457-0028

After Hours Phone: (858)
457-3010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Tagalog

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-4:30PM

PRATT, STEVEN, MD

Provider Gender: Male

License Number: G32379

NPI: 1407963044

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

ACUITY EYE GROUP

9850 GENESEE AVE STE
310

LA JOLLA, CA 92037

Phone: (858) 457-3010

Fax: (858) 457-0028

After Hours Phone: (858)
457-3010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Tagalog

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-4:30PM

TON-NU, MY LINH, OD

Provider Gender: Female

License Number: 34990

NPI: 1245733476

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

9850 GENESEE AVE STE
310

LA JOLLA, CA 92037

Phone: (858) 457-3010

Fax: (858) 457-0028

After Hours Phone: (858)
457-3010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Tagalog

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F

8:00AM-4:30PM

TONNU, ANH, OD

Provider Gender: Female

License Number: 11318

NPI: 1679521280

Provider English Spoken: Y

Provider Language(s) Spoken:
Vietnamese

Cultural Competency: Y

ACUITY EYE GROUP

9850 GENESEE AVE STE
310

LA JOLLA, CA 92037

Phone: (858) 457-3010

Fax: (858) 457-0028

After Hours Phone: (858)
457-3010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Tagalog

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-4:30PM

VINH, JOHN, OD

Provider Gender: Male

License Number: 14177

NPI: 1003102724

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

9850 GENESEE AVE STE
310

LA JOLLA, CA 92037

Phone: (858) 457-3010

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

Fax: (858) 457-0028

☎ After Hours Phone: (858) 457-3010

Accepting New Patients: Yes

Site English Spoken: Y

Site Language(s) Spoken: Spanish, Tagalog

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-4:30PM

VIVIRITO, MARY, OD

Provider Gender: Female

License Number: 33798

NPI: 1477968667

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: Y

ACUITY EYE GROUP

📍 9850 GENESEE AVE STE 310

LA JOLLA, CA 92037

☎ Phone: (858) 457-3010

Fax: (858) 457-0028


☎ After Hours Phone: (858) 457-3010

Accepting New Patients: Yes

Site English Spoken: Y

Site Language(s) Spoken: Spanish, Tagalog

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-4:30PM

VO, ANDREW MINH, OD

Provider Gender: Male

License Number: 33869

NPI: 1790291565

Provider English Spoken: Y

Provider Language(s) Spoken: Vietnamese

Cultural Competency: Y

PERLMAN

OPHTHALMOLOGY-UCSD

📍 9350 CAMPUS POINT DR STE 1B

LA JOLLA, CA 92037

☎ Phone: (858) 534-6290

Fax: (858) 732-0921

☎ After Hours Phone: (858) 534-6290

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-4:30PM

VO, ANDREW MINH, OD

Provider Gender: Male

License Number: 33869

NPI: 1790291565

Provider English Spoken: Y

Provider Language(s) Spoken: Vietnamese

Cultural Competency: Y

UCSD SHILEY EYE CENTER

📍 9415 CAMPUS POINT DR

LA JOLLA, CA 92093

☎ Phone: (858) 534-6290

Fax: (858) 732-0921

☎ After Hours Phone: (858) 534-6290

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-4:30PM
SA 8:00AM-2:00PM

YU, CAROL, OD

Provider Gender: Female

License Number: 34047

NPI: 1639697451

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish, Chinese

Cultural Competency: Y

UCSD SHILEY EYE CENTER

📍 9415 CAMPUS POINT DR

LA JOLLA, CA 92093

☎ Phone: (858) 534-6290

Fax: (858) 732-0921

☎ After Hours Phone: (858) 534-6290

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-4:30PM

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

SA 8:00AM-2:00PM

YU, CAROL, OD

Provider Gender: Female
License Number: 34047
NPI: 1639697451
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish, Chinese
Cultural Competency: Y

PERLMAN

OPHTHALMOLOGY-UCSD

9350 CAMPUS POINT DR
STE 1B
LA JOLLA, CA 92037

Phone: (858) 534-6290
Fax: (858) 732-0921

After Hours Phone: (858)
534-6290

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-4:30PM

ZAIDI, NOORINA, OD

Provider Gender: Female
License Number: 35615
NPI: 1023477262
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037

Phone: (858) 457-3010

Fax: (858) 457-0028

After Hours Phone: (858)
457-3010

Accepting New Patients: Yes

Site English Spoken: Y
Site Language(s) Spoken:
Spanish, Tagalog

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-4:30PM

ZHAO, TAILUN, MD

Provider Gender: Male
License Number: C186414
NPI: 1952659203
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037

Phone: (858) 457-3010
Fax: (858) 457-0028

After Hours Phone: (858)
457-3010

Accepting New Patients: Yes

Site English Spoken: Y
Site Language(s) Spoken:
Spanish, Tagalog

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-4:30PM

ZVANUT, DONALD, OD

Provider Gender: Male
License Number: 8642
NPI: 1336211804
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP

9850 GENESEE AVE STE
310
LA JOLLA, CA 92037

Phone: (858) 457-3010
Fax: (858) 457-0028

After Hours Phone: (858)
457-3010

Accepting New Patients: Yes

Site English Spoken: Y
Site Language(s) Spoken:
Spanish, Tagalog

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-4:30PM

LA MESA

AOTO, KIM, OD

Provider Gender: Female
License Number: 14524
NPI: 1780935650
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish, Vietnamese
Cultural Competency: Y
ACUITY EYE GROUP

7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Phone: (619) 722-8460

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

Fax: (619) 722-8465

☎ After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-5:00PM

ASIS, STEPHANIE, OD

Provider Gender: Female

License Number: 34013

NPI: 1902383540

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 7339 EL CAJON BLVD STE J
LA MESA, CA 91942

☎ Phone: (619) 722-8460

Fax: (619) 722-8465

☎ After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-5:00PM

AVALLONE, THOMAS, MD

Provider Gender: Male

License Number: A147199

NPI: 1679865950

Provider English Spoken: Y

Cultural Competency: Y

EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP

📍 5565 GROSSMONT
CENTER DR # 551
LA MESA, CA 91942

☎ Phone: (619) 465-2020

Fax: (619) 698-1189

☎ After Hours Phone: (619)
465-2020

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-5:00PM

BAGHOUMIAN, MARINEH, OD

Provider Gender: Female

License Number: 14842

NPI: 1972929438

Provider English Spoken: Y

Provider Language(s) Spoken:
Armenian

Cultural Competency: Y

ACUITY EYE GROUP

📍 7339 EL CAJON BLVD STE J
LA MESA, CA 91942

☎ Phone: (619) 722-8460

Fax: (619) 722-8465

☎ After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-5:00PM

BAUMANN, DANIELA, OD

Provider Gender: Female

License Number: 34530

NPI: 1982232146

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 7339 EL CAJON BLVD STE J
LA MESA, CA 91942

☎ Phone: (619) 722-8460

Fax: (619) 722-8465

☎ After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-5:00PM

BAUMANN, DANIELA, OD

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

Provider Gender: Female
License Number: 34530
NPI: 1982232146
Provider English Spoken: Y
Cultural Competency: Y
EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP

5565 GROSSMONT
CENTER DR # 551
LA MESA, CA 91942

Phone: (619) 465-2020
Fax: (619) 698-1189

After Hours Phone: (619)
465-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-5:00PM

BINDER, NICHOLAS, MD

Provider Gender: Male
License Number: A124698
NPI: 1306076716

Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP

7339 EL CAJON BLVD STE J
LA MESA, CA 91942

Phone: (619) 722-8460
Fax: (619) 722-8465

After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

BUI, TINA, OD

Provider Gender: Female
License Number: 33435
NPI: 1497107312

Provider English Spoken: Y

Provider Language(s) Spoken:
Vietnamese

Cultural Competency: Y

BUIQUE OPTOMETRY

5020 BALTIMORE DR STE B
LA MESA, CA 91942

Phone: (619) 464-8303
Fax: (619) 464-4971

After Hours Phone: (619)
464-8303

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Vietnamese

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
9:00AM-5:00PM
SA 9:00AM-2:00PM

CAUCHI, CAROLINE GUERRERO, OD

Provider Gender: Female
License Number: 6882
NPI: 1831268903
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish

Cultural Competency: Y
VISION SOLUTIONS
OPTOMETRY

8235 UNIVERSITY AVE
LA MESA, CA 91942

Phone: (619) 461-4913
Fax: (888) 509-6483

After Hours Phone: (619)
461-4913

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-TU
9:00AM-5:30PM
W 8:00AM-5:00PM
TH 9:00AM-6:00PM
F 8:00AM-1:00PM

CHANG, TOM, MD

Provider Gender: Male
License Number: A69909
NPI: 1609848969

Provider English Spoken: Y
Cultural Competency: Y

EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP

5565 GROSSMONT
CENTER DR # 551
LA MESA, CA 91942

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

☎ Phone: (619) 465-2020

Fax: (619) 698-1189

📞 After Hours Phone: (619)
465-2020

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-5:00PM

CHEW, WESLEY, OD

Provider Gender: Male

License Number: 14901

NPI: 1952714446

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 7339 EL CAJON BLVD STE J
LA MESA, CA 91942

☎ Phone: (619) 722-8460

Fax: (619) 722-8465

📞 After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-5:00PM

CHIU, STEPHAN, MD

Provider Gender: Male

License Number: A172634

NPI: 1053846956

Provider English Spoken: Y

Cultural Competency: Y

EYE ASSOCIATES OF SAN

DIEGO/ACUITY EYE GROUP

📍 5565 GROSSMONT
CENTER DR # 551

LA MESA, CA 91942

☎ Phone: (619) 465-2020

Fax: (619) 698-1189

📞 After Hours Phone: (619)
465-2020

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-5:00PM

COCKERHAM, KIMBERLY, MD

Provider Gender: Female

License Number: G86885

NPI: 1366493629

Provider English Spoken: Y

Cultural Competency: Y

ALVARADO EYE ASSOCIATES

MED CLINIC INC

📍 7877 PARKWAY DR STE 100
LA MESA, CA 91942

☎ Phone: (619) 460-3711

Fax: (619) 460-2184

📞 After Hours Phone: (619)
460-3711

Accepting New Patients: Yes

☐ Site English Spoken: Y

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
8:30AM-4:30PM

CONRAD, RANDALL, OD

Provider Gender: Male

License Number: 6423

NPI: 1962617464

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

ALVARADO EYE ASSOCIATES
MED CLINIC INC

📍 7877 PARKWAY DR STE 100
LA MESA, CA 91942

☎ Phone: (619) 460-3711

Fax: (619) 460-2184

📞 After Hours Phone: (619)
460-3711

Accepting New Patients: Yes

☐ Site English Spoken: Y

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
8:30AM-4:30PM

DEAN, MOENA, OD

Provider Gender: Female

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

License Number: 33955
NPI: 1265927578
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone: (619)
722-8460

Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken:
Spanish
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T
Hours: M-F
8:00AM-5:00PM

DEAN, MOENA, OD

Provider Gender: Female
License Number: 33955
NPI: 1265927578
Provider English Spoken: Y
Cultural Competency: Y
EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP
5565 GROSSMONT
CENTER DR # 551
LA MESA, CA 91942
Phone: (619) 465-2020
Fax: (619) 698-1189
After Hours Phone: (619)
465-2020

Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken:

Spanish
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
Hours: M-F
8:00AM-5:00PM

DYER, SHARON, OD

Provider Gender: Female
License Number: 33450
NPI: 1063866887
Provider English Spoken: Y
Cultural Competency: Y
EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP
5565 GROSSMONT
CENTER DR # 551
LA MESA, CA 91942
Phone: (619) 465-2020
Fax: (619) 698-1189
After Hours Phone: (619)
465-2020

Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken:
Spanish
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
Hours: M-F
8:00AM-5:00PM

DYER, SHARON, OD

Provider Gender: Female
License Number: 33450
NPI: 1063866887

Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone: (619)
722-8460
Accepting New Patients: Yes



Site English Spoken: Y
Site Languages(s) Spoken:
Spanish
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T
Hours: M-F
8:00AM-5:00PM

GOLLOGLY, HEIDRUN, MD


Provider Gender: Female
License Number: A134761
NPI: 1477879823
Provider English Spoken: Y
Provider Language(s) Spoken:
German, French, Spanish
Cultural Competency: Y
EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP
5565 GROSSMONT
CENTER DR # 551
LA MESA, CA 91942
Phone: (619) 465-2020
Fax: (619) 698-1189
After Hours Phone: (619)
465-2020

Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken:

D7. Directorio de proveedores de la vista: servicios oculares y de la vista


Spanish
American Sign Language (ASL):
 N
 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1U
 *Hours: M-F 8:00AM-5:00PM*




GOLLOGLY, HEIDRUN, MD

Provider Gender: Female
License Number: A134761
NPI: 1477879823
Provider English Spoken: Y
Provider Language(s) Spoken: German, French, Spanish
Cultural Competency: Y
 ACUITY EYE GROUP
 7339 EL CAJON BLVD STE J
 LA MESA, CA 91942
 *Phone: (619) 722-8460*
Fax: (619) 722-8465
 *After Hours Phone: (619) 722-8460*
Accepting New Patients: Yes
 *Site English Spoken: Y*
 *Site Language(s) Spoken: Spanish*
American Sign Language (ASL):
 N
 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1T
 *Hours: M-F 8:00AM-5:00PM*


GRAY, IGA, MD



Provider Gender: Female
License Number: A174875
NPI: 1033538350



Provider English Spoken: Y
Cultural Competency: Y
 ALVARADO EYE ASSOCIATES
 MED CLINIC INC
 7877 PARKWAY DR STE 100
 LA MESA, CA 91942
 *Phone: (619) 460-3711*
Fax: (619) 460-2184
 *After Hours Phone: (619) 460-3711*

Accepting New Patients: Yes
 *Site English Spoken: Y*
American Sign Language (ASL):
 N
 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1U
 *Hours: M-F 8:30AM-4:30PM*

HAIGHT, BRUCE, MD

Provider Gender: Male
License Number: G41117
NPI: 1427029628
Provider English Spoken: Y
Cultural Competency: Y
 EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
 5565 GROSSMONT
 CENTER DR # 551
 LA MESA, CA 91942
 *Phone: (619) 465-2020*
Fax: (619) 698-1189
 *After Hours Phone: (619) 465-2020*


Accepting New Patients: Yes
 *Site English Spoken: Y*
 *Site Language(s) Spoken: Spanish*
American Sign Language (ASL):
 N

 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1U
 *Hours: M-F 8:00AM-5:00PM*


HAIGHT, BRUCE, MD

Provider Gender: Male
License Number: G41117
NPI: 1427029628
Provider English Spoken: Y
Cultural Competency: Y
 ACUITY EYE GROUP
 7339 EL CAJON BLVD STE J
 LA MESA, CA 91942
 *Phone: (619) 722-8460*
Fax: (619) 722-8465
 *After Hours Phone: (619) 722-8460*
Accepting New Patients: Yes
 *Site English Spoken: Y*
 *Site Language(s) Spoken: Spanish*
American Sign Language (ASL):
 N
 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1T
 *Hours: M-F 8:00AM-5:00PM*

HAMOUIE, JUDY, OD

Provider Gender: Female
License Number: 34984
NPI: 1518638287
Provider English Spoken: Y
Cultural Competency: Y
 ACUITY EYE GROUP
 7339 EL CAJON BLVD STE J
 LA MESA, CA 91942

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

 Phone: (619) 722-8460

Fax: (619) 722-8465

 After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

Site English Spoken: Y


Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

 Hours: M-F
8:00AM-5:00PM

HAN, SULKI, OD

Provider Gender: Female

License Number: 34171

NPI: 1750802195


Provider English Spoken: Y

Provider Language(s) Spoken:
Korean

Cultural Competency: Y

ACUITY EYE GROUP

 7339 EL CAJON BLVD STE J
LA MESA, CA 91942

 Phone: (619) 722-8460

Fax: (619) 722-8465

 After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

Site English Spoken: Y


Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

 Hours: M-F
8:00AM-5:00PM

HIXSON, THOMAS, OD

Provider Gender: Male

License Number: 7490


NPI: 1528072683

Provider English Spoken: Y

Cultural Competency: Y

LA MESA VISION CARE

 8007 LA MESA BLVD
LA MESA, CA 91942

 Phone: (619) 466-5665

Fax: (619) 466-5688

 After Hours Phone: (619)
466-5665

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

 Hours: M 8:00AM-4:00PM
TU 9:00AM-6:00PM
W 8:00AM-4:00PM
TH 9:00AM-6:00PM
F 9:00AM-5:00PM
SA 8:00AM-1:00PM

HSU, CHRISTOPHER, MD

Provider Gender: Male


License Number: A65973


NPI: 1336167618

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

 7339 EL CAJON BLVD STE J
LA MESA, CA 91942

 Phone: (619) 722-8460

Fax: (619) 722-8465

 After Hours Phone: (619)
722-8460

Accepting New Patients: Yes


Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

 Hours: M-F
8:00AM-5:00PM

HUDSON, HENRY, MD

Provider Gender: Male

License Number: G76091


NPI: 1851349195

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

 7339 EL CAJON BLVD STE J
LA MESA, CA 91942

 Phone: (619) 722-8460

Fax: (619) 722-8465


 After Hours Phone: (619)
722-8460

Accepting New Patients: Yes


Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

 Hours: M-F
8:00AM-5:00PM

HUDSON, HENRY, MD

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

Provider Gender: Male
License Number: G76091
NPI: 1851349195
Provider English Spoken: Y
Cultural Competency: Y
EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP

5565 GROSSMONT
CENTER DR # 551
LA MESA, CA 91942

Phone: (619) 465-2020
Fax: (619) 698-1189

After Hours Phone: (619)
465-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-5:00PM

HUNG, JANICE, OD

Provider Gender: Female
License Number: 34296
NPI: 1750917936
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP

7339 EL CAJON BLVD STE J
LA MESA, CA 91942

Phone: (619) 722-8460
Fax: (619) 722-8465

After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

KALBAKJI, NATALY, OD

Provider Gender: Female
License Number: 34943
NPI: 1700556438

Provider English Spoken: Y

Provider Language(s) Spoken:
Arabic

Cultural Competency: Y
ACUITY EYE GROUP

7339 EL CAJON BLVD STE J
LA MESA, CA 91942

Phone: (619) 722-8460
Fax: (619) 722-8465

After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

KALBAKJI, NATALY, OD

Provider Gender: Female
License Number: 34943

NPI: 1700556438

Provider English Spoken: Y

Provider Language(s) Spoken:
Arabic

Cultural Competency: Y

EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP

5565 GROSSMONT
CENTER DR # 551
LA MESA, CA 91942

Phone: (619) 465-2020
Fax: (619) 698-1189

After Hours Phone: (619)
465-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-5:00PM

KATZMAN, BARRY, MD

Provider Gender: Male
License Number: A34834
NPI: 1760473797

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942

Phone: (619) 722-8460
Fax: (619) 722-8465

After Hours Phone: (619)
722-8460

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

KATZMAN, LEE, MD

Provider Gender: Male

License Number: A135673

NPI: 1912297284

Provider English Spoken: Y

Cultural Competency: Y

ALVARADO EYE ASSOCIATES
MED CLINIC INC

7877 PARKWAY DR STE 100
LA MESA, CA 91942

Phone: (619) 460-3711

Fax: (619) 460-2184

After Hours Phone: (619)
460-3711

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F
8:30AM-4:30PM

KHALIL, VADY, OD

Provider Gender: Male

License Number: 35137

NPI: 1275263584

Provider English Spoken: Y

Provider Language(s) Spoken: Arabic

Cultural Competency: Y

ACUITY EYE GROUP

7339 EL CAJON BLVD STE J
LA MESA, CA 91942

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

KHALIL, VADY, OD

Provider Gender: Male

License Number: 35137

NPI: 1275263584

Provider English Spoken: Y

Provider Language(s) Spoken: Arabic

Cultural Competency: Y

EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP

5565 GROSSMONT
CENTER DR # 551
LA MESA, CA 91942

Phone: (619) 465-2020

Fax: (619) 698-1189

After Hours Phone: (619)
465-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F
8:00AM-5:00PM

KHIEU, TINA, OD

Provider Gender: Female

License Number: 34777

NPI: 1962031617

Provider English Spoken: Y

Cultural Competency: Y

EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP

5565 GROSSMONT
CENTER DR # 551
LA MESA, CA 91942

Phone: (619) 465-2020

Fax: (619) 698-1189

After Hours Phone: (619)
465-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F
8:00AM-5:00PM

KHIEU, TINA, OD

Provider Gender: Female

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

License Number: 34777

NPI: 1962031617

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

7339 EL CAJON BLVD STE J
LA MESA, CA 91942

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

LEE, SALLY, DO

Provider Gender: Female

License Number: 20A8088

NPI: 1457468514

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish, Chinese

Cultural Competency: Y

SAN DIEGO EYE

PROFESSIONALS

8291 LA MESA BLVD
LA MESA, CA 91942

Phone: (619) 583-4295

Fax: (619) 393-1133

After Hours Phone: (619)
583-4295

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
German, Spanish, Chinese
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: TU-F
9:00AM-5:00PM
SA 9:00AM-5:00PM

LEVY, PHILLIP, OD

Provider Gender: Male

License Number: 4884

NPI: 1528189115

Provider English Spoken: Y

Cultural Competency: Y

BUIRIQUE OPTOMETRY

5020 BALTIMORE DR STE B
LA MESA, CA 91942

Phone: (619) 464-8303

Fax: (619) 464-4971

After Hours Phone: (619)
464-8303

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Vietnamese

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
9:00AM-5:00PM
SA 9:00AM-2:00PM

MANNEN, JOSEPH, OD

Provider Gender: Male

License Number: 33650

NPI: 1851827034

Provider English Spoken: Y

Cultural Competency: Y

ALVARADO EYE ASSOCIATES
MED CLINIC INC

7877 PARKWAY DR STE 100
LA MESA, CA 91942

Phone: (619) 460-3711

Fax: (619) 460-2184

After Hours Phone: (619)
460-3711

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:30AM-4:30PM

MARR, RYAN, OD

Provider Gender: Male

License Number: 35302

NPI: 1235857525

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

7339 EL CAJON BLVD STE J
LA MESA, CA 91942

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

PROVIDER
Public transportation (within
1/2 mile from Site): 1T
🕒 Hours: M-F
8:00AM-5:00PM

MARR, RYAN, OD
Provider Gender: Male
License Number: 35302
NPI: 1235857525
Provider English Spoken: Y
Cultural Competency: Y

EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP
📍 5565 GROSSMONT
CENTER DR # 551
LA MESA, CA 91942
📞 Phone: (619) 465-2020
📠 Fax: (619) 698-1189
🕒 After Hours Phone: (619)
465-2020

Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish
American Sign Language (ASL):
N

🦽 Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
🕒 Hours: M-F
8:00AM-5:00PM

MCGRAW, JOSEPH, MD
Provider Gender: Male
License Number: A155228
NPI: 1588624852
Provider English Spoken: Y
Cultural Competency: Y
EYE ASSOCIATES OF SAN

DIEGO/ACUITY EYE GROUP
📍 5565 GROSSMONT
CENTER DR # 551
LA MESA, CA 91942
📞 Phone: (619) 465-2020
📠 Fax: (619) 698-1189

🕒 After Hours Phone: (619)
465-2020
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N
🦽 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U
🕒 Hours: M-F
8:00AM-5:00PM

MCGRAW, JOSEPH, MD
Provider Gender: Male
License Number: A155228
NPI: 1588624852
Provider English Spoken: Y
Cultural Competency: Y

ACUITY EYE GROUP
📍 7339 EL CAJON BLVD STE J
LA MESA, CA 91942
📞 Phone: (619) 722-8460
📠 Fax: (619) 722-8465
🕒 After Hours Phone: (619)
722-8460

Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish
American Sign Language (ASL):
N

🦽 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T
🕒 Hours: M-F
8:00AM-5:00PM

MERALI, MURTAZA, OD
Provider Gender: Female
License Number: 14558
NPI: 1972944189
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: Y

ACUITY EYE GROUP
📍 7339 EL CAJON BLVD STE J
LA MESA, CA 91942
📞 Phone: (619) 722-8460
📠 Fax: (619) 722-8465
🕒 After Hours Phone: (619)
722-8460

Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish
American Sign Language (ASL):
N

🦽 Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T
🕒 Hours: M-F
8:00AM-5:00PM

**MORRISON REYES, JOSHUA,
MD**
Provider Gender: Male
License Number: A125435
NPI: 1235366782
Provider English Spoken: Y
Provider Language(s) Spoken:
Indonesian, Spanish

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

Cultural Competency: Y

ACUITY EYE GROUP

7339 EL CAJON BLVD STE J
LA MESA, CA 91942

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

MORRISON REYES, JOSHUA, MD

Provider Gender: Male

License Number: A125435

NPI: 1235366782

Provider English Spoken: Y

Provider Language(s) Spoken:
Indonesian, Spanish

Cultural Competency: Y

EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP

5565 GROSSMONT
CENTER DR # 551
LA MESA, CA 91942

Phone: (619) 465-2020

Fax: (619) 698-1189

After Hours Phone: (619)
465-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:

Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-5:00PM

NGUYEN, THY, OD

Provider Gender: Female

License Number: 12746

NPI: 1750490413

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish, Vietnamese

Cultural Competency: Y

ACUITY EYE GROUP

7339 EL CAJON BLVD STE J
LA MESA, CA 91942

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

OU, JOCELYN, OD

Provider Gender: Female

License Number: 34063

NPI: 1225518996

Provider English Spoken: Y

Cultural Competency: Y

ALVARADO EYE ASSOCIATES
MED CLINIC INC

7877 PARKWAY DR STE 100
LA MESA, CA 91942

Phone: (619) 460-3711

Fax: (619) 460-2184

After Hours Phone: (619)
460-3711

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:30AM-4:30PM

PANDYA, BHUMIKA, OD

Provider Gender: Female

License Number: 35025

NPI: 1063182822

Provider English Spoken: Y

Provider Language(s) Spoken:
Hindi

Cultural Competency: Y

ACUITY EYE GROUP

7339 EL CAJON BLVD STE J
LA MESA, CA 91942

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone: (619)
722-8460



Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1T
 *Hours: M-F*
8:00AM-5:00PM

PATEL, GITANE, MD



Provider Gender: Male
License Number: A108603
NPI: 1710171434
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP

 7339 EL CAJON BLVD STE J
 LA MESA, CA 91942
 *Phone: (619) 722-8460*
Fax: (619) 722-8465
 *After Hours Phone: (619) 722-8460*

Accepting New Patients: Yes

Site English Spoken: Y
 Site Language(s) Spoken: Spanish

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1T
 *Hours: M-F*
8:00AM-5:00PM

PATEL, SARJAN, MD

Provider Gender: Male
License Number: A114976
NPI: 1316199326
Provider English Spoken: Y
Provider Language(s) Spoken: Gujarati, Hindi, Spanish
Cultural Competency: Y


ACUITY EYE GROUP
 7339 EL CAJON BLVD STE J
 LA MESA, CA 91942
 *Phone: (619) 722-8460*
Fax: (619) 722-8465
 *After Hours Phone: (619) 722-8460*

Accepting New Patients: Yes

Site English Spoken: Y
 Site Language(s) Spoken: Spanish

American Sign Language (ASL): N




 *Accessibility: CONTACT PROVIDER*

Public transportation (within 1/2 mile from Site): 1T
 *Hours: M-F*
8:00AM-5:00PM

PETERS, JAMIE, OD

Provider Gender: Female
License Number: 10724
NPI: 1073691077
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y

VISION SOLUTIONS OPTOMETRY

 8235 UNIVERSITY AVE
 LA MESA, CA 91942
 *Phone: (619) 461-4913*
Fax: (888) 509-6483
 *After Hours Phone: (619) 461-4913*

Accepting New Patients: Yes

Site English Spoken: Y
 Site Language(s) Spoken: Spanish

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1T
 *Hours: M-TU*
9:00AM-5:30PM
W 8:00AM-5:00PM
TH 9:00AM-6:00PM
F 8:00AM-1:00PM

PRABHU, SUJATA, MD



Provider Gender: Female
License Number: A115965
NPI: 1982872552
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y
ACUITY EYE GROUP

 7339 EL CAJON BLVD STE J
 LA MESA, CA 91942
 *Phone: (619) 722-8460*
Fax: (619) 722-8465
 *After Hours Phone: (619) 722-8460*

Accepting New Patients: Yes

Site English Spoken: Y
 Site Language(s) Spoken: Spanish

American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1T
 *Hours: M-F*
8:00AM-5:00PM

PRABHU, SUJATA, MD

Provider Gender: Female
License Number: A115965
NPI: 1982872552

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

Provider English Spoken: Y
 Provider Language(s) Spoken:
 Spanish
 Cultural Competency: Y
 EYE ASSOCIATES OF SAN
 DIEGO/ACUITY EYE GROUP
 5565 GROSSMONT
 CENTER DR # 551
 LA MESA, CA 91942
 Phone: (619) 465-2020
 Fax: (619) 698-1189

After Hours Phone: (619)
 465-2020
 Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
 Spanish
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Public transportation (within
 1/2 mile from Site): 1U
 Hours: M-F
 8:00AM-5:00PM

QUACH, PHUC, OD

Provider Gender: Male
 License Number: 12891
 NPI: 1770617805
 Provider English Spoken: Y
 Provider Language(s) Spoken:
 Spanish, Vietnamese
 Cultural Competency: Y
 ACUITY EYE GROUP
 7339 EL CAJON BLVD STE J
 LA MESA, CA 91942
 Phone: (619) 722-8460
 Fax: (619) 722-8465
 After Hours Phone: (619)
 722-8460
 Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken:
 Spanish
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Public transportation (within
 1/2 mile from Site): 1T
 Hours: M-F
 8:00AM-5:00PM

SAMUEL, MICHAEL, MD

Provider Gender: Male
 License Number: A83237
 NPI: 1730175670
 Provider English Spoken: Y
 Cultural Competency: Y
 EYE ASSOCIATES OF SAN
 DIEGO/ACUITY EYE GROUP
 5565 GROSSMONT
 CENTER DR # 551
 LA MESA, CA 91942
 Phone: (619) 465-2020
 Fax: (619) 698-1189

After Hours Phone: (619)
 465-2020
 Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
 Spanish
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Public transportation (within
 1/2 mile from Site): 1U
 Hours: M-F
 8:00AM-5:00PM

SCOTT, JEFFREY, OD

Provider Gender: Male
































License Number: 34978
 NPI: 1568813434
 Provider English Spoken: Y
 Cultural Competency: Y
 ACUITY EYE GROUP
 7339 EL CAJON BLVD STE J
 LA MESA, CA 91942
 Phone: (619) 722-8460
 Fax: (619) 722-8465
 After Hours Phone: (619)
 722-8460

Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
 Spanish
 American Sign Language (ASL):
 N
 Accessibility: CONTACT
 PROVIDER
 Public transportation (within
 1/2 mile from Site): 1T
 Hours: M-F
 8:00AM-5:00PM


TILLMAN, SYLVIA, OD

Provider Gender: Female
 License Number: 9726
 NPI: 1174730824
 Provider English Spoken: Y
 Cultural Competency: Y
 ACUITY EYE GROUP
 7339 EL CAJON BLVD STE J
 LA MESA, CA 91942
 Phone: (619) 722-8460
 Fax: (619) 722-8465
 After Hours Phone: (619)
 722-8460
 Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken:
 Spanish
 American Sign Language (ASL):

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

- N**
 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1T
 *Hours: M-F 8:00AM-5:00PM*
- TON-NU, MY LINH, OD**
Provider Gender: Female
License Number: 34990
NPI: 1245733476
Provider English Spoken: Y
Cultural Competency: Y
- ACUITY EYE GROUP**
 7339 EL CAJON BLVD STE J LA MESA, CA 91942
 *Phone: (619) 722-8460*
Fax: (619) 722-8465
 *After Hours Phone: (619) 722-8460*
Accepting New Patients: Yes
 *Site English Spoken: Y*
 *Site Languages(s) Spoken: Spanish*
American Sign Language (ASL): N
-  *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1T
 *Hours: M-F 8:00AM-5:00PM*
- TON-NU, MY LINH, OD**
Provider Gender: Female
License Number: 34990
NPI: 1245733476
Provider English Spoken: Y
Cultural Competency: Y
- EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP**
 5565 GROSSMONT CENTER DR # 551 LA MESA, CA 91942
 *Phone: (619) 465-2020*
Fax: (619) 698-1189
 *After Hours Phone: (619) 465-2020*
Accepting New Patients: Yes
 *Site English Spoken: Y*
 *Site Languages(s) Spoken: Spanish*
American Sign Language (ASL): N
-  *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1U
 *Hours: M-F 8:00AM-5:00PM*
- TONNU, ANH, OD**
Provider Gender: Female
License Number: 11318
NPI: 1679521280
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: Y
- ACUITY EYE GROUP**
 7339 EL CAJON BLVD STE J LA MESA, CA 91942
 *Phone: (619) 722-8460*
Fax: (619) 722-8465
 *After Hours Phone: (619) 722-8460*
Accepting New Patients: Yes
 *Site English Spoken: Y*
 *Site Languages(s) Spoken: Spanish*
American Sign Language (ASL): N
-  *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1T
 *Hours: M-F 8:00AM-5:00PM*
- TRAN, HENRY, OD**
Provider Gender: Male
License Number: 15159
NPI: 1467846709
Provider English Spoken: Y
Cultural Competency: Y
- ACUITY EYE GROUP**
 7339 EL CAJON BLVD STE J LA MESA, CA 91942
 *Phone: (619) 722-8460*
Fax: (619) 722-8465
 *After Hours Phone: (619) 722-8460*
Accepting New Patients: Yes
 *Site English Spoken: Y*
 *Site Languages(s) Spoken: Spanish*
American Sign Language (ASL): N
-  *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1T
 *Hours: M-F 8:00AM-5:00PM*
- TSUI, NANCY, OD**
Provider Gender: Female
License Number: 33944
NPI: 1841785037
Provider English Spoken: Y
Cultural Competency: Y
- ACUITY EYE GROUP**
 7339 EL CAJON BLVD STE J LA MESA, CA 91942

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

 Phone: (619) 722-8460

Fax: (619) 722-8465

 After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

Site English Spoken: Y


Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

 Hours: M-F
8:00AM-5:00PM

TU, BEVERLY, OD

Provider Gender: Female

License Number: 34108

NPI: 1053892794


Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish, Vietnamese

Cultural Competency: Y

ACUITY EYE GROUP

 7339 EL CAJON BLVD STE J
LA MESA, CA 91942

 Phone: (619) 722-8460

Fax: (619) 722-8465

 After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

Site English Spoken: Y


Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

 Hours: M-F
8:00AM-5:00PM

VINH, JOHN, OD

Provider Gender: Male


License Number: 14177


NPI: 1003102724

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

 7339 EL CAJON BLVD STE J
LA MESA, CA 91942

 Phone: (619) 722-8460

Fax: (619) 722-8465

 After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

Site English Spoken: Y


Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

 Hours: M-F
8:00AM-5:00PM

VINH, JOHN, OD

Provider Gender: Male

License Number: 14177


NPI: 1003102724

Provider English Spoken: Y

Cultural Competency: Y

EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP

 5565 GROSSMONT
CENTER DR # 551
LA MESA, CA 91942

 Phone: (619) 465-2020

Fax: (619) 698-1189

 After Hours Phone: (619)
465-2020

Accepting New Patients: Yes

Site English Spoken: Y


Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

 Hours: M-F
8:00AM-5:00PM

VIVIRITO, MARY, OD

Provider Gender: Female

License Number: 33798


NPI: 1477968667


Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP

 5565 GROSSMONT
CENTER DR # 551
LA MESA, CA 91942

 Phone: (619) 465-2020

Fax: (619) 698-1189

 After Hours Phone: (619)
465-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish


American Sign Language (ASL):

N

 Accessibility: CONTACT
PROVIDER


Public transportation (within
1/2 mile from Site): 1U


D7. Directorio de proveedores de la vista: servicios oculares y de la vista

 Hours: M-F
8:00AM-5:00PM

VIVIRITO, MARY, OD

Provider Gender: Female
License Number: 33798
NPI: 1477968667
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: Y
ACUITY EYE GROUP

 7339 EL CAJON BLVD STE J
LA MESA, CA 91942

 Phone: (619) 722-8460
Fax: (619) 722-8465

 After Hours Phone: (619)
722-8460


Accepting New Patients: Yes

Site English Spoken: Y
 Site Language(s) Spoken:
Spanish

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T


 Hours: M-F
8:00AM-5:00PM

WONG, SHARON, OD

Provider Gender: Female
License Number: 15137
NPI: 1497159552
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: Y
ACUITY EYE GROUP

 7339 EL CAJON BLVD STE J

LA MESA, CA 91942

 Phone: (619) 722-8460
Fax: (619) 722-8465

 After Hours Phone: (619)
722-8460


Accepting New Patients: Yes

Site English Spoken: Y
 Site Language(s) Spoken:
Spanish

American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Public transportation (within
1/2 mile from Site): 1T

 Hours: M-F
8:00AM-5:00PM

YOUNG, ALLA, OD

Provider Gender: Female
License Number: 34191
NPI: 1285085142
Provider English Spoken: Y
Provider Language(s) Spoken:
Russian
Cultural Competency: Y
ALVARADO EYE ASSOCIATES
MED CLINIC INC

 7877 PARKWAY DR STE 100
LA MESA, CA 91942

 Phone: (619) 460-3711
Fax: (619) 460-2184


 After Hours Phone: (619)
460-3711

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N

 Accessibility: CONTACT
PROVIDER


Public transportation (within
1/2 mile from Site): 1U

 Hours: M-F
8:30AM-4:30PM

ZAIDI, NOORINA, OD

Provider Gender: Female
License Number: 35615
NPI: 1023477262
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP

 7339 EL CAJON BLVD STE J
LA MESA, CA 91942

 Phone: (619) 722-8460
Fax: (619) 722-8465

 After Hours Phone: (619)
722-8460


Accepting New Patients: Yes

Site English Spoken: Y
 Site Language(s) Spoken:
Spanish

American Sign Language (ASL):
N


 Accessibility: CONTACT
PROVIDER


Public transportation (within
1/2 mile from Site): 1T

 Hours: M-F
8:00AM-5:00PM

ZAIDI, NOORINA, OD

Provider Gender: Female
License Number: 35615
NPI: 1023477262
Provider English Spoken: Y
Cultural Competency: Y
EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP

 5565 GROSSMONT
CENTER DR # 551
LA MESA, CA 91942

 Phone: (619) 465-2020
Fax: (619) 698-1189

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

📞 After Hours Phone: (619)
465-2020

Accepting New Patients: Yes

🗳 Site English Spoken: Y

🗳 Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-5:00PM

ZVANUT, DONALD, OD

Provider Gender: Male

License Number: 8642

NPI: 1336211804

Provider English Spoken: Y

Cultural Competency: Y

EYE ASSOCIATES OF SAN
DIEGO/ACUITY EYE GROUP

📍 5565 GROSSMONT
CENTER DR # 551
LA MESA, CA 91942

📞 Phone: (619) 465-2020

Fax: (619) 698-1189

📞 After Hours Phone: (619)
465-2020

Accepting New Patients: Yes

🗳 Site English Spoken: Y

🗳 Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-5:00PM

ZVANUT, DONALD, OD

Provider Gender: Male

License Number: 8642

NPI: 1336211804

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 7339 EL CAJON BLVD STE J
LA MESA, CA 91942

📞 Phone: (619) 722-8460

Fax: (619) 722-8465

📞 After Hours Phone: (619)
722-8460

Accepting New Patients: Yes

🗳 Site English Spoken: Y

🗳 Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-5:00PM

LAKESIDE

FLEMING, JOHN, OD

Provider Gender: Male

License Number: 8461

NPI: 1033192133

Provider English Spoken: Y

Cultural Competency: Y

JOHN C FLEMING OD

📍 9710 WINTER GARDENS
BLVD STE A

LAKESIDE, CA 92040

📞 Phone: (619) 443-1075

Fax: (619) 443-9382

📞 After Hours Phone: (619)

443-1075

Accepting New Patients: Yes

🗳 Site English Spoken: Y

American Sign Language (ASL):

N

♿ Accessibility: CONTACT

PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-TH
9:00AM-5:00PM
F 9:00AM-4:00PM

HOANG, KENNY, OD

Provider Gender: Male

License Number: 35207

NPI: 1740868603

Provider English Spoken: Y

Cultural Competency: Y

JOHN C FLEMING OD

📍 9710 WINTER GARDENS
BLVD STE A

LAKESIDE, CA 92040

📞 Phone: (619) 443-1075

Fax: (619) 443-9382

📞 After Hours Phone: (619)
443-1075

Accepting New Patients: Yes

🗳 Site English Spoken: Y

American Sign Language (ASL):

N

♿ Accessibility: CONTACT

PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-TH
9:00AM-5:00PM
F 9:00AM-4:00PM

JOHNSON, CHRISTOPHER, OD

Provider Gender: Male

License Number: 15100

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

NPI: 1568861425

Provider English Spoken: Y

Cultural Competency: Y

JOHN C FLEMING OD

9710 WINTER GARDENS
BLVD STE A

LAKESIDE, CA 92040

Phone: (619) 443-1075

Fax: (619) 443-9382

After Hours Phone: (619)
443-1075

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-TH
9:00AM-5:00PM
F 9:00AM-4:00PM

NATIONAL CITY

AOTO, KIM, OD

Provider Gender: Female

License Number: 14524

NPI: 1780935650

Provider English Spoken: Y

Provider Language(s) Spoken:

Spanish, Vietnamese

Cultural Competency: Y

WEST COAST EYE CARE

2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950

Phone: (619) 470-2700

Fax: (619) 267-8221

After Hours Phone: (619)
470-2700

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL): Provider English Spoken: Y
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-4:30PM

BAUMANN, DANIELA, OD

Provider Gender: Female

License Number: 34530

NPI: 1982232146

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

Phone: (619) 472-1010

Fax: (619) 479-5233

After Hours Phone: (619)
472-1010

Accepting New Patients: Yes

Site English Spoken: Y

Site Language(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-TU
8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM

BAUMANN, DANIELA, OD

Provider Gender: Female

License Number: 34530

NPI: 1982232146

Cultural Competency: Y

WEST COAST EYE CARE

2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950

Phone: (619) 470-2700

Fax: (619) 267-8221

After Hours Phone: (619)
470-2700

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-4:30PM

BINDER, NICHOLAS, MD

Provider Gender: Male

License Number: A124698

NPI: 1306076716

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950

Phone: (619) 470-2700

Fax: (619) 267-8221

After Hours Phone: (619)
470-2700

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

8:00AM-4:30PM

DEAN, MOENA, OD

Provider Gender: Female
License Number: 33955
NPI: 1265927578
Provider English Spoken: Y
Cultural Competency: Y

WEST COAST EYE CARE

2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950

Phone: (619) 470-2700

Fax: (619) 267-8221

After Hours Phone: (619)
470-2700

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-4:30PM

DEAN, MOENA, OD

Provider Gender: Female
License Number: 33955
NPI: 1265927578
Provider English Spoken: Y
Cultural Competency: Y

ACUITY EYE GROUP

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

Phone: (619) 472-1010

Fax: (619) 479-5233

After Hours Phone: (619)
472-1010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:

Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-TU
8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM

DYER, SHARON, OD

Provider Gender: Female

License Number: 33450

NPI: 1063866887

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

Phone: (619) 472-1010

Fax: (619) 479-5233

After Hours Phone: (619)
472-1010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-TU
8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM

DYER, SHARON, OD

Provider Gender: Female

License Number: 33450

NPI: 1063866887

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950

Phone: (619) 470-2700

Fax: (619) 267-8221

After Hours Phone: (619)
470-2700

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-4:30PM

GOLLOGLY, HEIDRUN, MD

Provider Gender: Female

License Number: A134761

NPI: 1477879823

Provider English Spoken: Y

Provider Language(s) Spoken:

German, French, Spanish

Cultural Competency: Y

ACUITY EYE GROUP

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

Phone: (619) 472-1010

Fax: (619) 479-5233

After Hours Phone: (619)
472-1010

Accepting New Patients: Yes

Site English Spoken: Y

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

- Site Languages(s) Spoken:* **HUDSON, HENRY, MD**
Spanish
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-TU
8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM
- HAIGHT, BRUCE, MD**
Provider Gender: Male
License Number: G41117
NPI: 1427029628
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
 Phone: (619) 472-1010
Fax: (619) 479-5233
 After Hours Phone: (619) 472-1010
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-TU
8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM
- HUNG, JANICE, OD**
Provider Gender: Female
License Number: 34296
NPI: 1750917936
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE
 2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
 Phone: (619) 470-2700
Fax: (619) 267-8221
 After Hours Phone: (619) 470-2700
- Accepting New Patients:* Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F
8:00AM-4:30PM
- KALBAKJI, NATALY, OD**
Provider Gender: Female
License Number: 34943
NPI: 1700556438
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: Y
ACUITY EYE GROUP
 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
 Phone: (619) 472-1010
Fax: (619) 479-5233
 After Hours Phone: (619) 472-1010
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-TU
8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

KALBAKJI, NATALY, OD

Provider Gender: Female
License Number: 34943
NPI: 1700556438
Provider English Spoken: Y
Provider Language(s) Spoken:
Arabic
Cultural Competency: Y

WEST COAST EYE CARE

2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
Phone: (619) 470-2700
Fax: (619) 267-8221
After Hours Phone: (619)
470-2700

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-4:30PM

KALRA, ANKUR, OD

Provider Gender: Male
License Number: 11898
NPI: 1124195789
Provider English Spoken: Y
Provider Language(s) Spoken:
Hindi
Cultural Competency: Y

LUSTRO EYEWORKS OPTOMETRY

1481 E PLAZA BLVD
NATIONAL CITY, CA 91950
Phone: (619) 477-2159
Fax: (619) 477-2128
After Hours Phone: (619)

477-2159

Accepting New Patients: Yes

Site English Spoken: Y
Site Language(s) Spoken:
Arabic, Hindi, Spanish
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: SU 10:00AM-4:00PM
M-F 9:00AM-6:00PM
SA 9:00AM-5:00PM

KATZMAN, BARRY, MD

Provider Gender: Male
License Number: A34834
NPI: 1760473797

Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: Y

WEST COAST EYE CARE

2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
Phone: (619) 470-2700
Fax: (619) 267-8221
After Hours Phone: (619)
470-2700

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-4:30PM

KEDDINGTON, JOAN, OD

Provider Gender: Female

License Number: 6263

NPI: 1992872691

Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: Y

LUSTRO EYEWORKS OPTOMETRY

1481 E PLAZA BLVD
NATIONAL CITY, CA 91950
Phone: (619) 477-2159
Fax: (619) 477-2128
After Hours Phone: (619)
477-2159

Accepting New Patients: Yes

Site English Spoken: Y
Site Language(s) Spoken:
Arabic, Hindi, Spanish
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: SU 10:00AM-4:00PM
M-F 9:00AM-6:00PM
SA 9:00AM-5:00PM

KHALIL, VADY, OD

Provider Gender: Male
License Number: 35137
NPI: 1275263584
Provider English Spoken: Y
Provider Language(s) Spoken:
Arabic
Cultural Competency: Y

WEST COAST EYE CARE

2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
Phone: (619) 470-2700

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

Fax: (619) 267-8221

☎ After Hours Phone: (619)
470-2700

Accepting New Patients: Yes

☐ Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-4:30PM

KHALIL, VADY, OD

Provider Gender: Male

License Number: 35137

NPI: 1275263584

Provider English Spoken: Y

Provider Language(s) Spoken:
Arabic

Cultural Competency: Y

ACUITY EYE GROUP

📍 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

☎ Phone: (619) 472-1010

Fax: (619) 479-5233

☎ After Hours Phone: (619)
472-1010

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-TU
8:00AM-6:00PM
W 8:30AM-5:00PM

TH 8:00AM-6:00PM

F 8:00AM-5:00PM

KHIEU, TINA, OD

Provider Gender: Female

License Number: 34777

NPI: 1962031617

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

📍 2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950

☎ Phone: (619) 470-2700

Fax: (619) 267-8221

☎ After Hours Phone: (619)
470-2700

Accepting New Patients: Yes

☐ Site English Spoken: Y

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-4:30PM

KHIEU, TINA, OD

Provider Gender: Female

License Number: 34777

NPI: 1962031617

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

☎ Phone: (619) 472-1010

Fax: (619) 479-5233

☎ After Hours Phone: (619)
472-1010

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-TU
8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM

KING, MARY, OD

Provider Gender: Female

License Number: 13711

NPI: 1578792107

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

LUSTRO EYEWORKS

OPTOMETRY

📍 1481 E PLAZA BLVD
NATIONAL CITY, CA 91950

☎ Phone: (619) 477-2159

Fax: (619) 477-2128

☎ After Hours Phone: (619)
477-2159

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:
Arabic, Hindi, Spanish

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: SU 10:00AM-4:00PM
M-F 9:00AM-6:00PM


D7. Directorio de proveedores de la vista: servicios oculares y de la vista

- SA 9:00AM-5:00PM
- LEE, AUSTIN, OD**
Provider Gender: Male
License Number: 14519
NPI: 1922356914
Provider English Spoken: Y
Cultural Competency: Y
VIVE OPTOMETRY
1033 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 477-2771
Fax: (619) 477-1680
After Hours Phone: (619) 477-2771
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Tagalog
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: TU 10:00AM-5:00PM
W-F 9:30AM-5:00PM
- LEE, SALLY, DO**
Provider Gender: Female
License Number: 20A8088
NPI: 1457468514
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Chinese
Cultural Competency: Y
SAN DIEGO EYE PROFESSIONALS
2345 E 8TH ST STE 111
NATIONAL CITY, CA 91950
Phone: (619) 583-4295
- Fax: (619) 825-7300
After Hours Phone: (619) 583-4295
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: TH-F 9:00AM-5:00PM
- MARR, RYAN, OD**
Provider Gender: Male
License Number: 35302
NPI: 1235857525
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
Phone: (619) 470-2700
Fax: (619) 267-8221
After Hours Phone: (619) 470-2700
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8:00AM-4:30PM
- MARLAY, GREG, OD**
Provider Gender: Male
License Number: 6998
NPI: 1306903083
Provider English Spoken: Y
Cultural Competency: Y
MARLAY ENTERPRISES
1132 E PLAZA BLVD STE 201
NATIONAL CITY, CA 91950
Phone: (619) 477-4166
After Hours Phone: (619) 477-4166
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 10:00AM-6:00PM
W 10:00AM-6:00PM
F 10:00AM-6:00PM
SA 10:00AM-2:00PM
- MARR, RYAN, OD**
Provider Gender: Male
License Number: 35302
NPI: 1235857525
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone: (619) 472-1010
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

American Sign Language (ASL): Provider Gender: Male

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T



 Hours: M-TU
8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM

MCGRAW, JOSEPH, MD

Provider Gender: Male
License Number: A155228
NPI: 1588624852



Provider English Spoken: Y
Cultural Competency: Y

ACUITY EYE GROUP

 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
 Phone: (619) 472-1010
Fax: (619) 479-5233

 After Hours Phone: (619) 472-1010

Accepting New Patients: Yes

 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-TU
8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM

MCGRAW, JOSEPH, MD

License Number: A155228


NPI: 1588624852

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

 2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950

 Phone: (619) 470-2700

Fax: (619) 267-8221

 After Hours Phone: (619) 470-2700


Accepting New Patients: Yes

 Site English Spoken: Y

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M-F
8:00AM-4:30PM

MENDOZA, RAYMUNDO, OD

Provider Gender: Male

License Number: 8150

NPI: 1306837760


Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

NATIONAL CITY EYECARE

 2403 E PLAZA BLVD
NATIONAL CITY, CA 91950


 Phone: (619) 475-2184

Fax: (619) 475-3917

 After Hours Phone: (619) 475-2184

Accepting New Patients: Yes

 Site English Spoken: Y


 Site Languages(s) Spoken: Spanish, Tagalog

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M-TU
10:00AM-5:00PM
TH-F 10:00AM-5:00PM

MORRISON REYES, JOSHUA, MD

Provider Gender: Male

License Number: A125435

NPI: 1235366782


Provider English Spoken: Y

Provider Language(s) Spoken:

Indonesian, Spanish

Cultural Competency: Y
WEST COAST EYE CARE

 2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950

 Phone: (619) 470-2700

Fax: (619) 267-8221

 After Hours Phone: (619) 470-2700


Accepting New Patients: Yes

 Site English Spoken: Y

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M-F
8:00AM-4:30PM

MORRISON REYES, JOSHUA, MD

Provider Gender: Male

License Number: A125435

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

NPI: 1235366782

Provider English Spoken: Y

Provider Language(s) Spoken:

Indonesian, Spanish

Cultural Competency: Y

ACUITY EYE GROUP

2240 E PLAZA BLVD STE 302
NATIONAL CITY, CA 91950

Phone: (619) 472-1010

Fax: (619) 479-5233

After Hours Phone: (619)
472-1010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-TU
8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM

NGUYEN, THERESA, OD

Provider Gender: Female

License Number: 35530TLG

NPI: 1609555713

Provider English Spoken: Y

Cultural Competency: Y

LUSTRO EYEWORKS

OPTOMETRY

1481 E PLAZA BLVD
NATIONAL CITY, CA 91950

Phone: (619) 477-2159

Fax: (619) 477-2128

After Hours Phone: (619)
477-2159

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Arabic, Hindi, Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: SU 10:00AM-4:00PM
M-F 9:00AM-6:00PM
SA 9:00AM-5:00PM

PATEL, SARJAN, MD

Provider Gender: Male

License Number: A114976

NPI: 1316199326

Provider English Spoken: Y

Provider Language(s) Spoken:

Gujarati, Hindi, Spanish

Cultural Competency: Y

WEST COAST EYE CARE

2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950

Phone: (619) 470-2700

Fax: (619) 267-8221

After Hours Phone: (619)
470-2700

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-4:30PM

PATEL, GITANE, MD

Provider Gender: Male

License Number: A108603

NPI: 1710171434

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950

Phone: (619) 470-2700

Fax: (619) 267-8221

After Hours Phone: (619)
470-2700

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-4:30PM

PRABHU, SUJATA, MD

Provider Gender: Female

License Number: A115965

NPI: 1982872552

Provider English Spoken: Y

Provider Language(s) Spoken:

Spanish

Cultural Competency: Y

WEST COAST EYE CARE

2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950

Phone: (619) 470-2700

Fax: (619) 267-8221

After Hours Phone: (619)
470-2700



Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

D7. Directorio de proveedores de la vista: servicios oculares y de la vista


 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F
8:00AM-4:30PM

SCOTT, JEFFREY, OD

Provider Gender: Male
License Number: 34978
NPI: 1568813434
Provider English Spoken: Y
Cultural Competency: Y

WEST COAST EYE CARE

 2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950

 Phone: (619) 470-2700

Fax: (619) 267-8221

 After Hours Phone: (619)
470-2700


Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U


 Hours: M-F
8:00AM-4:30PM

TON-NU, MY LINH, OD

Provider Gender: Female
License Number: 34990
NPI: 1245733476
Provider English Spoken: Y
Cultural Competency: Y

ACUITY EYE GROUP

 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

 Phone: (619) 472-1010

Fax: (619) 479-5233

 After Hours Phone: (619)
472-1010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-TU
8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM

TON-NU, MY LINH, OD


Provider Gender: Female
License Number: 34990
NPI: 1245733476

Provider English Spoken: Y


Cultural Competency: Y

WEST COAST EYE CARE

 2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950

 Phone: (619) 470-2700

Fax: (619) 267-8221

 After Hours Phone: (619)
470-2700


Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M-F
8:00AM-4:30PM

TOUBIA, ELIAS, OD

Provider Gender: Male

License Number: 33758

NPI: 1740701481

Provider English Spoken: Y


Provider Language(s) Spoken:
Arabic

Cultural Competency: Y

LUSTRO EYEWORKS

OPTOMETRY

 1481 E PLAZA BLVD
NATIONAL CITY, CA 91950

 Phone: (619) 477-2159

Fax: (619) 477-2128

 After Hours Phone: (619)
477-2159

Accepting New Patients: Yes


Site English Spoken: Y

Site Languages(s) Spoken:
Arabic, Hindi, Spanish

American Sign Language (ASL):
N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: SU 10:00AM-4:00PM
M-F 9:00AM-6:00PM
SA 9:00AM-5:00PM

VINH, JOHN, OD

Provider Gender: Male

License Number: 14177


NPI: 1003102724

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

 2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950

 Phone: (619) 470-2700

Fax: (619) 267-8221

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

☎ After Hours Phone: (619) 470-2700

Accepting New Patients: Yes

☐ Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-4:30PM

VINH, JOHN, OD

Provider Gender: Male

License Number: 14177

NPI: 1003102724

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

☎ Phone: (619) 472-1010

Fax: (619) 479-5233

☎ After Hours Phone: (619) 472-1010

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-TU
8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM

VIVIRITO, MARY, OD

Provider Gender: Female

License Number: 33798

NPI: 1477968667

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

ACUITY EYE GROUP

📍 655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

☎ Phone: (619) 472-1010

Fax: (619) 479-5233

☎ After Hours Phone: (619) 472-1010

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-TU
8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM

VIVIRITO, MARY, OD

Provider Gender: Female

License Number: 33798

NPI: 1477968667

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

WEST COAST EYE CARE

📍 2240 E PLAZA BLVD STE FG

NATIONAL CITY, CA 91950

☎ Phone: (619) 470-2700

Fax: (619) 267-8221

☎ After Hours Phone: (619) 470-2700

Accepting New Patients: Yes

☐ Site English Spoken: Y
American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-4:30PM

WU, EVA, OD

Provider Gender: Female

License Number: 14743

NPI: 1073954442

Provider English Spoken: Y

Provider Language(s) Spoken:

Spanish, Chinese

Cultural Competency: Y

VIVE OPTOMETRY

📍 1033 HIGHLAND AVE
NATIONAL CITY, CA 91950

☎ Phone: (619) 477-2771

Fax: (619) 477-1680

☎ After Hours Phone: (619) 477-2771

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:
Spanish, Tagalog

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: TU 10:00AM-5:00PM

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

W-F 9:30AM-5:00PM

ZAIDI, NOORINA, OD

Provider Gender: Female
 License Number: 35615
 NPI: 1023477262
 Provider English Spoken: Y
 Cultural Competency: Y

WEST COAST EYE CARE

2240 E PLAZA BLVD STE FG
 NATIONAL CITY, CA 91950

Phone: (619) 470-2700

Fax: (619) 267-8221

After Hours Phone: (619)
 470-2700

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
 PROVIDER

Public transportation (within
 1/2 mile from Site): 1U

Hours: M-F
 8:00AM-4:30PM

ZAIDI, NOORINA, OD

Provider Gender: Female
 License Number: 35615
 NPI: 1023477262
 Provider English Spoken: Y
 Cultural Competency: Y

ACUITY EYE GROUP

655 EUCLID AVE STE 302
 NATIONAL CITY, CA 91950

Phone: (619) 472-1010

Fax: (619) 479-5233

After Hours Phone: (619)
 472-1010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:

Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
 PROVIDER

Public transportation (within
 1/2 mile from Site): 1T

Hours: M-TU
 8:00AM-6:00PM
 W 8:30AM-5:00PM
 TH 8:00AM-6:00PM
 F 8:00AM-5:00PM

ZVANUT, DONALD, OD

Provider Gender: Male

License Number: 8642

NPI: 1336211804

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

655 EUCLID AVE STE 302
 NATIONAL CITY, CA 91950

Phone: (619) 472-1010

Fax: (619) 479-5233

After Hours Phone: (619)
 472-1010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
 Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
 PROVIDER

Public transportation (within
 1/2 mile from Site): 1T

Hours: M-TU
 8:00AM-6:00PM
 W 8:30AM-5:00PM
 TH 8:00AM-6:00PM
 F 8:00AM-5:00PM

OCEANSIDE

KASAI, SARAH, OD

Provider Gender: Female

License Number: 34226

NPI: 1023406238

Provider English Spoken: Y

Cultural Competency: Y

NORTH COAST OPTOMETRY

3915 MISSION AVE STE 2
 OCEANSIDE, CA 92058

Phone: (760) 757-8771

After Hours Phone: (760)
 757-8771

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
 Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
 PROVIDER

Public transportation (within
 1/2 mile from Site): 1T

Hours: M-TU
 9:00AM-6:00PM
 W 10:00AM-7:00PM
 TH 9:00AM-6:00PM
 F 9:00AM-5:00PM

NISKANEN, RACHEL, OD

Provider Gender: Female

License Number: 34663

NPI: 1467065797

Provider English Spoken: Y

Cultural Competency: Y

NORTH COAST OPTOMETRY

3915 MISSION AVE STE 2
 OCEANSIDE, CA 92058

Phone: (760) 757-8771

After Hours Phone: (760)
 757-8771

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

Accepting New Patients: Yes

Site English Spoken: Y

Site Language(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-TU
9:00AM-6:00PM
W 10:00AM-7:00PM
TH 9:00AM-6:00PM
F 9:00AM-5:00PM

ROSA, ADAM, OD

Provider Gender: Male

License Number: 34093

NPI: 1295250264

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

NORTH COAST OPTOMETRY

3915 MISSION AVE STE 2
OCEANSIDE, CA 92058

Phone: (760) 757-8771

After Hours Phone: (760)
757-8771

Accepting New Patients: Yes

Site English Spoken: Y

Site Language(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-TU
9:00AM-6:00PM

W 10:00AM-7:00PM

TH 9:00AM-6:00PM

F 9:00AM-5:00PM

RAMONA

HOMESLEY, SUSAN, OD

Provider Gender: Female

License Number: 6693

NPI: 1720068984

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

SUSAN D HOMESLEY OD

1516 MAIN ST STE 102
RAMONA, CA 92065

Phone: (760) 789-0950

Fax: (760) 789-6057

After Hours Phone: (760)
789-0950

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-5:00PM
SA 8:00AM-11:00AM

SAN DIEGO

ACKROYD, ARCHIE, OD

Provider Gender: Male

License Number: 4774

NPI: 1629107172

Provider English Spoken: Y

Cultural Competency: Y

VAN HOOSE OPTOMETRIC

CORPORATION

7246 CLAIREMONT MESA
BLVD

SAN DIEGO, CA 92111

Phone: (858) 292-7193

Fax: (858) 292-8247

After Hours Phone: (858)
292-7193

Accepting New Patients: Yes

Site English Spoken: Y

Site Language(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M 8:00AM-5:00PM
TU-TH 9:00AM-6:00PM
F 8:00AM-5:00PM

ADAMS, MONA, OD

Provider Gender: Female

License Number: 14457

NPI: 1942564521

Provider English Spoken: Y

Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

7910 FROST ST STE 200
SAN DIEGO, CA 92123

Phone: (858) 309-7702

Fax: (858) 966-8901

After Hours Phone: (858)
309-7702

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F
7:00AM-5:00PM

AOTO, KIM, OD

Provider Gender: Female

License Number: 14524

NPI: 1780935650

Provider English Spoken: Y

Provider Language(s) Spoken:

Spanish, Vietnamese

Cultural Competency: Y

WEST COAST EYE CARE

📍 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

📞 Phone: (858) 565-8822
Fax: (858) 565-2449

🕒 After Hours Phone: (858)
565-8822

Accepting New Patients: Yes

🗨️ Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

AOTO, KIM, OD

Provider Gender: Female

License Number: 14524

NPI: 1780935650

Provider English Spoken: Y

Provider Language(s) Spoken:

Spanish, Vietnamese

Cultural Competency: Y

WEST COAST EYE CARE

📍 6945 EL CAJON BLVD
SAN DIEGO, CA 92115

📞 Phone: (619) 697-4600
Fax: (619) 697-2410

🕒 After Hours Phone: (619)
697-4600

Accepting New Patients: Yes

🗨️ Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM

ARCHIBALD, JOHN, OD

Provider Gender: Male

License Number: 11813

NPI: 1902893357

Provider English Spoken: Y

Cultural Competency: Y

EYELUX OPTOMETRY

📍 16615 DOVE CANYON RD
STE 105
SAN DIEGO, CA 92127

📞 Phone: (858) 487-7900
Fax: (858) 487-1896

🕒 After Hours Phone: (858)
487-7900

Accepting New Patients: Yes

🗨️ Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-5:00PM
SA 8:30AM-2:00PM

BANSAL, PREETI, MD

Provider Gender: Female

License Number: A90890

NPI: 1871664631

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

📍 7910 FROST ST STE 200
SAN DIEGO, CA 92123

📞 Phone: (858) 309-7702
Fax: (858) 966-8901

🕒 After Hours Phone: (858)
309-7702

Accepting New Patients: Yes

🗨️ Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F
7:00AM-5:00PM

BAUMANN, DANIELA, OD

Provider Gender: Female

License Number: 34530

NPI: 1982232146

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

📍 4344 CONVOY ST STE C2

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

SAN DIEGO, CA 92111
☎ Phone: (858) 565-8822
Fax: (858) 565-2449
🕒 After Hours Phone: (858) 565-8822
Accepting New Patients: Yes
🗉 Site English Spoken: Y
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
🕒 Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

BAUMANN, DANIELA, OD
Provider Gender: Female
License Number: 34530
NPI: 1982232146
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE
📍 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
☎ Phone: (619) 697-4600
Fax: (619) 697-2410
🕒 After Hours Phone: (619) 697-4600
Accepting New Patients: Yes
🗉 Site English Spoken: Y
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
🕒 Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM

W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM
BEAUDRY, AMANDA, OD
Provider Gender: Female
License Number: 33385
NPI: 1477903516
Provider English Spoken: Y
Cultural Competency: Y
RADY CHILDRENS
SPECIALISTS

📍 7910 FROST ST STE 200
SAN DIEGO, CA 92123
☎ Phone: (858) 309-7702
Fax: (858) 966-8901
🕒 After Hours Phone: (858) 309-7702
Accepting New Patients: Yes
🗉 Site English Spoken: Y
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
🕒 Hours: M-F
7:00AM-5:00PM

BERGMARK, JAMIE, OD
Provider Gender: Female
License Number: 33657
NPI: 1669920757
Provider English Spoken: Y
Cultural Competency: Y
RADY CHILDRENS
SPECIALISTS

📍 7910 FROST ST STE 200
SAN DIEGO, CA 92123
☎ Phone: (858) 309-7702
Fax: (858) 966-8901

🕒 After Hours Phone: (858) 309-7702
Accepting New Patients: Yes
🗉 Site English Spoken: Y
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
🕒 Hours: M-F
7:00AM-5:00PM

BHATIA, SHAGUN, MD
Provider Gender: Female
License Number: A154902
NPI: 1104237353
Provider English Spoken: Y
Cultural Competency: Y
RADY CHILDRENS
SPECIALISTS
📍 7910 FROST ST STE 200
SAN DIEGO, CA 92123
☎ Phone: (858) 309-7702
Fax: (858) 966-8901
🕒 After Hours Phone: (858) 309-7702
Accepting New Patients: Yes
🗉 Site English Spoken: Y
American Sign Language (ASL): N
♿ Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
🕒 Hours: M-F
7:00AM-5:00PM

BINDER, NICHOLAS, MD
Provider Gender: Male
License Number: A124698
NPI: 1306076716

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

Phone: (858) 565-8822

Fax: (858) 565-2449

After Hours Phone: (858)
565-8822

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

BINDER, NICHOLAS, MD

Provider Gender: Male

License Number: A124698

NPI: 1306076716

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

6945 EL CAJON BLVD
SAN DIEGO, CA 92115

Phone: (619) 697-4600

Fax: (619) 697-2410

After Hours Phone: (619)
697-4600

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM

BOECK, CARL, OD

Provider Gender: Male

License Number: 6620

NPI: 1588656151

Provider English Spoken: Y

Provider Language(s) Spoken:

German, Spanish

Cultural Competency: Y

VAN HOOSE OPTOMETRIC
CORPORATION

7246 CLAIREMONT MESA
BLVD

SAN DIEGO, CA 92111

Phone: (858) 292-7193

Fax: (858) 292-8247

After Hours Phone: (858)
292-7193

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M 8:00AM-5:00PM
TU-TH 9:00AM-6:00PM
F 8:00AM-5:00PM

CAO, STEPHANIE, OD

Provider Gender: Female

License Number: 35158

NPI: 1215660436

Provider English Spoken: Y

Cultural Competency: Y

FASHION VALLEY EYE CARE
OPTOMETR

7007 FRIARS RD STE 351
SAN DIEGO, CA 92108

Phone: (619) 291-2020

Fax: (888) 210-5799

After Hours Phone: (619)
291-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
10:00AM-7:00PM
SA 10:00AM-7:00PM

CAO, STEPHANIE, OD

Provider Gender: Female

License Number: 35158

NPI: 1215660436

Provider English Spoken: Y

Cultural Competency: Y

OPTOM-EYES VISION CARE
OPTOMETRY

5638 MISSION CENTER RD
STE 103

SAN DIEGO, CA 92108

Phone: (619) 295-2900




















Fax: (888) 210-5799

After Hours Phone: (619)
295-2900

Accepting New Patients: Yes

Site English Spoken: Y

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

- Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F
9:00AM-5:30PM
SA 9:00AM-3:00PM
- CAO, STEPHANIE, OD**
Provider Gender: Female
License Number: 35158
NPI: 1215660436
Provider English Spoken: Y
Cultural Competency: Y
OPTOM-EYES VISION CARE
OPTOMETRY
 1555 PALM AVE STE A2
SAN DIEGO, CA 92154
 Phone: (619) 297-2020
Fax: (888) 210-5799
 After Hours Phone: (619)
297-2020
Accepting New Patients: Yes
 Site English Spoken: Y
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-F
9:30AM-6:00PM
SA 9:00AM-3:00PM
- CHAIN, PEI CHI, OD**
Provider Gender: Female
License Number: 34439
NPI: 1730676727
- Site English Spoken: Y
521-2020
Provider Language(s) Spoken: Spanish, Chinese
Cultural Competency: Y
SPOTLIGHT OPTOMETRY
 7835 HIGHLANDS VLG PL D
106
SAN DIEGO, CA 92129
 Phone: (858) 250-0052
Fax: (858) 788-0287
 After Hours Phone: (858)
250-0052
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-TU
9:00AM-5:00PM
W 10:00AM-6:00PM
F 9:00AM-5:00PM
SA 9:00AM-1:00PM
- CHEN, LESLIE, OD**
Provider Gender: Female
License Number: 12792
NPI: 1508953332
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese
Cultural Competency: Y
EYE STUDIO OPTOMETRY
 4475 UNIVERSITY AVE
SAN DIEGO, CA 92105
 Phone: (619) 521-2020
Fax: (619) 521-2025
 After Hours Phone: (619)
- 521-2020
Accepting New Patients: Yes
 Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-W
9:00AM-5:00PM
TH 9:00AM-1:30PM
F 9:00AM-5:00PM
SA 9:00AM-1:00PM
- COLEMAN, BROOKE, OD**
Provider Gender: Female
License Number: 13551
NPI: 1700040748
Provider English Spoken: Y
Cultural Competency: Y
EYELUX OPTOMETRY
 16615 DOVE CANYON RD
STE 105
SAN DIEGO, CA 92127
 Phone: (858) 487-7900
Fax: (858) 487-1896
 After Hours Phone: (858)
487-7900
Accepting New Patients: Yes
 Site English Spoken: Y
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
 Hours: M-F
8:00AM-5:00PM
SA 8:30AM-2:00PM

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

COOPER, MICHAEL, OD

Provider Gender: Male

License Number: 10476

NPI: 1164586244

Provider English Spoken: Y

Cultural Competency: Y

EYELUX OPTOMETRY

16615 DOVE CANYON RD
STE 105

SAN DIEGO, CA 92127

Phone: (858) 487-7900

Fax: (858) 487-1896

After Hours Phone: (858)
487-7900

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
8:00AM-5:00PM

SA 8:30AM-2:00PM

DAVIS, JADE, OD

Provider Gender: Female

License Number: 11765

NPI: 1457303398

Provider English Spoken: Y

Cultural Competency: Y

OPTOM-EYES VISION CARE

OPTOMETRY

5638 MISSION CENTER RD
STE 103

SAN DIEGO, CA 92108

Phone: (619) 295-2900

Fax: (888) 210-5799

After Hours Phone: (619)
295-2900

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
9:00AM-5:30PM
SA 9:00AM-3:00PM

DAVIS, JADE, OD

Provider Gender: Female

License Number: 11765

NPI: 1457303398

Provider English Spoken: Y

Cultural Competency: Y

FASHION VALLEY EYE CARE

OPTOMETR

7007 FRIARS RD STE 351
SAN DIEGO, CA 92108

Phone: (619) 291-2020

Fax: (888) 210-5799

After Hours Phone: (619)
291-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
10:00AM-7:00PM
SA 10:00AM-7:00PM

DEAN, MOENA, OD

Provider Gender: Female

License Number: 33955

NPI: 1265927578

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

Phone: (858) 565-8822

Fax: (858) 565-2449

After Hours Phone: (858)
565-8822

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

DUONG, KIM, OD

Provider Gender: Female

License Number: 34222

NPI: 1114448651

Provider English Spoken: Y

Provider Language(s) Spoken:

Vietnamese

Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

7910 FROST ST STE 200
SAN DIEGO, CA 92123

Phone: (858) 309-7702

Fax: (858) 966-8901

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

☎ After Hours Phone: (858) 309-7702

Accepting New Patients: Yes

☐ Site English Spoken: Y

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
7:00AM-5:00PM

DUONG, CHERYL, OD

Provider Gender: Female

License Number: 34070

NPI: 1366935678

Provider English Spoken: Y

Cultural Competency: Y

EYELUX OPTOMETRY

📍 16615 DOVE CANYON RD
STE 105

SAN DIEGO, CA 92127

☎ Phone: (858) 487-7900

Fax: (858) 487-1896

☎ After Hours Phone: (858)
487-7900

Accepting New Patients: Yes

☐ Site English Spoken: Y

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-5:00PM
SA 8:30AM-2:00PM

DYER, SHARON, OD

Provider Gender: Female

License Number: 33450

NPI: 1063866887

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

📍 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

☎ Phone: (858) 565-8822

Fax: (858) 565-2449

☎ After Hours Phone: (858)
565-8822

Accepting New Patients: Yes

☐ Site English Spoken: Y

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

DYER, SHARON, OD

Provider Gender: Female

License Number: 33450

NPI: 1063866887

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

📍 6945 EL CAJON BLVD
SAN DIEGO, CA 92115

☎ Phone: (619) 697-4600

Fax: (619) 697-2410

☎ After Hours Phone: (619)
697-4600

Accepting New Patients: Yes

☐ Site English Spoken: Y

American Sign Language (ASL):
N

♿ Accessibility: CONTACT

PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM

GIANG, STEVEN, OD

Provider Gender: Male

License Number: 34489

NPI: 1730710104

Provider English Spoken: Y

Cultural Competency: Y

JASMINE P NGUYEN OD INC

📍 4029 43RD ST STE 300
SAN DIEGO, CA 92105

☎ Phone: (619) 284-3937

Fax: (619) 284-3938

☎ After Hours Phone: (619)
284-3937

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:
Spanish, Vietnamese

American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

🕒 Hours: M-F
9:00AM-5:00PM
SA 9:00AM-1:00PM

HO, AMIEE, OD

Provider Gender: Female

License Number: 14527

NPI: 1396009478

Provider English Spoken: Y

Cultural Competency: Y

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

HILLCREST EYE

CENTER-UCSD

4060 4TH AVE STE 610
SAN DIEGO, CA 92103

Phone: (619) 543-6244

Fax: (619) 295-5034

After Hours Phone: (619)
543-6244

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-4:00PM

HO, HOANG, OD

Provider Gender: Male

License Number: 12582

NPI: 1275684847

Provider English Spoken: Y

Cultural Competency: Y

HEALTHY I CARE OPTOMETRY

10737 CAMINO RUIZ STE
220

SAN DIEGO, CA 92126

Phone: (619) 590-1994

After Hours Phone: (619)
590-1994

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: TH-F
9:00AM-5:00PM

HO, AMIEE, OD

Provider Gender: Female

License Number: 14527

NPI: 1396009478

Provider English Spoken: Y

Cultural Competency: Y

UC SAN DIEGO HEALTH

16950 VIA TAZON
SAN DIEGO, CA 92127

Phone: (858) 534-6290

Fax: (858) 732-0921

After Hours Phone: (858)
534-6290

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

HOANG, KEVIN, OD

Provider Gender: Male

License Number: 34401

NPI: 1790339216

Provider English Spoken: Y

Provider Language(s) Spoken:

Spanish

Cultural Competency: Y

JASMINE P NGUYEN OD INC

4029 43RD ST STE 300
SAN DIEGO, CA 92105

Phone: (619) 284-3937

Fax: (619) 284-3938

After Hours Phone: (619)
284-3937

Accepting New Patients: Yes

Site English Spoken: Y

Site Language(s) Spoken:
Spanish, Vietnamese

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
9:00AM-5:00PM
SA 9:00AM-1:00PM

HOFFMAN, STEVEN, OD

Provider Gender: Male

License Number: 34561

NPI: 1033736079

Provider English Spoken: Y

Cultural Competency: Y

JASMINE P NGUYEN OD INC

4029 43RD ST STE 300
SAN DIEGO, CA 92105

Phone: (619) 284-3937

Fax: (619) 284-3938

After Hours Phone: (619)
284-3937

Accepting New Patients: Yes

Site English Spoken: Y
Site Language(s) Spoken:

Spanish, Vietnamese

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
9:00AM-5:00PM
SA 9:00AM-1:00PM

HOM, GREGORY, OD

Provider Gender: Male

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

License Number: 9694
NPI: 1154473916
Provider English Spoken: Y
Cultural Competency: Y
GREGORY G HOM OD
📍 11230 SORRENTO VLY RD
STE 145
SAN DIEGO, CA 92121
☎ Phone: (858) 535-9835
Fax: (858) 535-1266
🕒 After Hours Phone: (858)
535-9835
Accepting New Patients: Yes
📄 Site English Spoken: Y
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
🕒 Hours: M-TH
9:00AM-5:00PM
F 9:00AM-4:00PM

HOO, PAMELA, OD

Provider Gender: Female
License Number: 11033
NPI: 1275566010
Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish
Cultural Competency: Y
HILLCREST EYE
CENTER-UCSD
📍 4060 4TH AVE STE 610
SAN DIEGO, CA 92103
☎ Phone: (619) 543-6244
Fax: (619) 295-5034
🕒 After Hours Phone: (619)
543-6244
Accepting New Patients: Yes
📄 Site English Spoken: Y

American Sign Language (ASL): French
N
♿ Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T
🕒 Hours: M-F
8:00AM-4:00PM

HUDSON, HENRY, MD

Provider Gender: Male
License Number: G76091
NPI: 1851349195
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE
📍 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
☎ Phone: (619) 697-4600
Fax: (619) 697-2410

🕒 After Hours Phone: (619)
697-4600
Accepting New Patients: Yes
📄 Site English Spoken: Y
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
🕒 Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM

HUSTANA, LARA, OD

Provider Gender: Female
License Number: 11472
NPI: 1235161597
Provider English Spoken: Y
Provider Language(s) Spoken:



Cultural Competency: Y
HILLCREST EYE
CENTER-UCSD
📍 4060 4TH AVE STE 610
SAN DIEGO, CA 92103
☎ Phone: (619) 543-6244
Fax: (619) 295-5034
🕒 After Hours Phone: (619)
543-6244
Accepting New Patients: Yes
📄 Site English Spoken: Y
American Sign Language (ASL):
N
♿ Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T
🕒 Hours: M-F
8:00AM-4:00PM

HUYNH, PAUL, MD

Provider Gender: Male
License Number: A79141
NPI: 1871577056
Provider English Spoken: Y
Provider Language(s) Spoken:
Vietnamese
Cultural Competency: Y
ADVANCED EYE AND LASER
CTR OF CA INC
📍 4844 UNIVERSITY AVE STE
A
SAN DIEGO, CA 92105
☎ Phone: (619) 283-1303
Fax: (619) 283-1666
🕒 After Hours Phone: (619)
283-1303

Accepting New Patients: Yes
📄 Site English Spoken: Y
American Sign Language (ASL):
N






D7. Directorio de proveedores de la vista: servicios oculares y de la vista

 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1T
 *Hours: M-F 8:00AM-5:00PM*



HUYNH, LOAN, OD

Provider Gender: Female
License Number: 34472
NPI: 1003454604
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: Y

NORTH COUNTY OPTOMETRY

 11835 CARMEL MTN RD STE 1313
SAN DIEGO, CA 92128
 *Phone: (858) 674-1276*
Fax: (858) 674-5863
 *After Hours Phone: (858) 674-1276*
Accepting New Patients: Yes
 *Site English Spoken: Y*
 *Site Languages(s) Spoken: Tagalog*



American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1T
 *Hours: M 9:00AM-4:00PM*
TU 7:00AM-1:00PM
W-TH 10:00AM-6:00PM
F 10:00AM-3:00PM
SA 9:00AM-2:00PM

HUYNH, CHI, OD


Provider Gender: Female
License Number: 12901

NPI: 1922187426
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: Y
CRYSTAL EYESITE OPTOMETRY

 9225 MIRA MESA BLVD STE 108
SAN DIEGO, CA 92126
 *Phone: (858) 547-3988*
Fax: (844) 367-5161



 *After Hours Phone: (858) 547-3988*
Accepting New Patients: Yes

 *Site English Spoken: Y*
American Sign Language (ASL): N



 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1U
 *Hours: M 9:30AM-6:00PM*
W 9:30AM-6:00PM
TH-F 10:00AM-6:00PM
SA 9:00AM-3:00PM

HUYNH, PAUL, MD

Provider Gender: Male
License Number: A79141
NPI: 1871577056
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: Y
ADVANCED EYE AND LASER CTR OF CA INC



 10737 CAMINO RUIZ STE 100
SAN DIEGO, CA 92126
 *Phone: (858) 549-3200*
Fax: (858) 549-3207



 *After Hours Phone: (858) 549-3200*
Accepting New Patients: Yes
 *Site English Spoken: Y*
 *Site Languages(s) Spoken: Spanish, Tagalog, Vietnamese*
American Sign Language (ASL):

N
 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1T
 *Hours: M-F 8:00AM-5:00PM*

JOMOC, CAITLIN, OD

Provider Gender: Female
License Number: 35009
NPI: 1861164642
Provider English Spoken: Y
Cultural Competency: Y
UC SAN DIEGO HEALTH
 16950 VIA TAZON
SAN DIEGO, CA 92127
 *Phone: (858) 534-6290*
Fax: (858) 732-0921

 *After Hours Phone: (858) 534-6290*
Accepting New Patients: Yes
 *Site English Spoken: Y*
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1T
 *Hours: M-F 8:00AM-5:00PM*

JOMOC, CAITLIN, OD

Provider Gender: Female

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

License Number: 35009

NPI: 1861164642

Provider English Spoken: Y

Cultural Competency: Y

HILLCREST EYE

CENTER-UCSD

4060 4TH AVE STE 610

SAN DIEGO, CA 92103

Phone: (619) 543-6244

Fax: (619) 295-5034

After Hours Phone: (619)
543-6244

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-4:00PM

KALBAKJI, NATALY, OD

Provider Gender: Female

License Number: 34943

NPI: 1700556438

Provider English Spoken: Y

Provider Language(s) Spoken:

Arabic

Cultural Competency: Y

WEST COAST EYE CARE

4344 CONVOY ST STE C2

SAN DIEGO, CA 92111

Phone: (858) 565-8822

Fax: (858) 565-2449

After Hours Phone: (858)
565-8822

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

KALBAKJI, NATALY, OD

Provider Gender: Female

License Number: 34943

NPI: 1700556438

Provider English Spoken: Y

Provider Language(s) Spoken:

Arabic

Cultural Competency: Y

WEST COAST EYE CARE

6945 EL CAJON BLVD

SAN DIEGO, CA 92115

Phone: (619) 697-4600

Fax: (619) 697-2410

After Hours Phone: (619)
697-4600

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM

KATZMAN, BARRY, MD

Provider Gender: Male

License Number: A34834

NPI: 1760473797

Provider English Spoken: Y

Provider Language(s) Spoken:

Spanish

Cultural Competency: Y

WEST COAST EYE CARE

6945 EL CAJON BLVD

SAN DIEGO, CA 92115

Phone: (619) 697-4600

Fax: (619) 697-2410

After Hours Phone: (619)
697-4600

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM

KATZMAN, BARRY, MD

Provider Gender: Male

License Number: A34834

NPI: 1760473797

Provider English Spoken: Y

Provider Language(s) Spoken:

Spanish

Cultural Competency: Y

WEST COAST EYE CARE

4344 CONVOY ST STE C2

SAN DIEGO, CA 92111

Phone: (858) 565-8822

Fax: (858) 565-2449

After Hours Phone: (858)
565-8822

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

KHALIGHI, PAYMAN, OD

Provider Gender: Male

License Number: 13014

NPI: 1396897880

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

JASMINE P NGUYEN OD INC

4029 43RD ST STE 300
SAN DIEGO, CA 92105

Phone: (619) 284-3937

Fax: (619) 284-3938

After Hours Phone: (619)
284-3937

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Vietnamese

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
9:00AM-5:00PM
SA 9:00AM-1:00PM

KHALIL, VADY, OD

Provider Gender: Male

License Number: 35137

NPI: 1275263584

Provider English Spoken: Y

Provider Language(s) Spoken:
Arabic

Cultural Competency: Y

WEST COAST EYE CARE

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

Phone: (858) 565-8822

Fax: (858) 565-2449

After Hours Phone: (858)
565-8822

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

KHALIL, VADY, OD

Provider Gender: Male

License Number: 35137

NPI: 1275263584

Provider English Spoken: Y

Provider Language(s) Spoken:
Arabic

Cultural Competency: Y

WEST COAST EYE CARE

6945 EL CAJON BLVD
SAN DIEGO, CA 92115

Phone: (619) 697-4600

Fax: (619) 697-2410

After Hours Phone: (619)
697-4600

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM

KHAN, FAHAD, MD

Provider Gender: Male

License Number: A163142

NPI: 1548605843

Provider English Spoken: Y

Provider Language(s) Spoken:
Hindi

Cultural Competency: Y
VISION SPECIALISTS OF
CALIFORNIA

233 LEWIS ST
SAN DIEGO, CA 92103

Phone: (619) 501-9050

Fax: (619) 501-9054

After Hours Phone: (619)
501-9050

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken:
Bengali, Hindi, Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-TH
8:00AM-5:00PM
F 8:00AM-4:00PM

KHIEU, TINA, OD

Provider Gender: Female
License Number: 34777
NPI: 1962031617

Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE

📍 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
📞 Phone: (858) 565-8822
Fax: (858) 565-2449

🕒 After Hours Phone: (858)
565-8822
Accepting New Patients: Yes

🗒 Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

KHIEU, TINA, OD

Provider Gender: Female
License Number: 34777
NPI: 1962031617

Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE

📍 6945 EL CAJON BLVD
SAN DIEGO, CA 92115

📞 Phone: (619) 697-4600
Fax: (619) 697-2410

🕒 After Hours Phone: (619)
697-4600

Accepting New Patients: Yes

🗒 Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM

KHINDA, SUNEHA, OD

Provider Gender: Female
License Number: 35494
NPI: 1750066726

Provider English Spoken: Y
Cultural Competency: Y
EYELUX OPTOMETRY

📍 16615 DOVE CANYON RD
STE 105
SAN DIEGO, CA 92127

📞 Phone: (858) 487-7900
Fax: (858) 487-1896

🕒 After Hours Phone: (858)
487-7900

Accepting New Patients: Yes

🗒 Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F
8:00AM-5:00PM

SA 8:30AM-2:00PM

KIM, PHILIP, OD

Provider Gender: Male
License Number: 33893
NPI: 1376929034

Provider English Spoken: Y
Cultural Competency: Y
HILLCREST EYE

CENTER-UCSD
📍 4060 4TH AVE STE 610
SAN DIEGO, CA 92103

📞 Phone: (619) 543-6244
Fax: (619) 295-5034

🕒 After Hours Phone: (619)
543-6244

Accepting New Patients: Yes

🗒 Site English Spoken: Y
American Sign Language (ASL):
N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F
8:00AM-4:00PM

KLAREN, AMANDA, OD

Provider Gender: Female
License Number: 12617
NPI: 1396876611

Provider English Spoken: Y
Cultural Competency: Y

RADY CHILDRENS
SPECIALISTS

📍 7910 FROST ST STE 200
SAN DIEGO, CA 92123

📞 Phone: (858) 309-7702
Fax: (858) 966-8901

🕒 After Hours Phone: (858)
309-7702

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

Accepting New Patients: Yes


Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M-F
7:00AM-5:00PM

KULISCHAK, JOHN, OD

Provider Gender: Male

License Number: 9279

NPI: 1740205236


Provider English Spoken: Y

Cultural Competency: Y

HILLCREST EYE

CENTER-UCSD

 4060 4TH AVE STE 610
SAN DIEGO, CA 92103

 Phone: (619) 543-6244

Fax: (619) 295-5034

 After Hours Phone: (619)
543-6244

Accepting New Patients: Yes


Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F
8:00AM-4:00PM

LAM, ANNE, OD

Provider Gender: Female

License Number: 12810

NPI: 1174550768


Provider English Spoken: Y

Cultural Competency: Y


HILLCREST EYE

CENTER-UCSD

 4060 4TH AVE STE 610
SAN DIEGO, CA 92103

 Phone: (619) 543-6244

Fax: (619) 295-5034

 After Hours Phone: (619)
543-6244

Accepting New Patients: Yes


Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F
8:00AM-4:00PM

LARSEN, STEVEN, OD

Provider Gender: Male

License Number: 7687

NPI: 1629194782


Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish


Cultural Competency: Y

UPTOWN OPTOMETRY

 4096 PARK BLVD
SAN DIEGO, CA 92103

 Phone: (619) 291-5505

Fax: (619) 291-4404

 After Hours Phone: (619)
291-5505

Accepting New Patients: Yes

Site English Spoken: Y

Site Language(s) Spoken:
Spanish


American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: TU-F
9:00AM-3:00PM
SA 10:00AM-2:00PM

LAU, KUEN CHINE, OD

Provider Gender: Male

License Number: 11166


NPI: 1821001645

Provider English Spoken: Y

Cultural Competency: Y

FASHION VALLEY EYE CARE
OPTOMETR

 7007 FRIARS RD STE 351
SAN DIEGO, CA 92108

 Phone: (619) 291-2020

Fax: (888) 210-5799

 After Hours Phone: (619)
291-2020

Accepting New Patients: Yes


Site English Spoken: Y

Site Language(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F
10:00AM-7:00PM
SA 10:00AM-7:00PM

LAU, KUEN CHINE, OD

Provider Gender: Male

License Number: 11166

NPI: 1821001645

Provider English Spoken: Y

Cultural Competency: Y

OPTOM-EYES VISION CARE

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

OPTOMETRY

5638 MISSION CENTER RD
STE 103

SAN DIEGO, CA 92108

Phone: (619) 295-2900

Fax: (888) 210-5799

After Hours Phone: (619)
295-2900

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
9:00AM-5:30PM
SA 9:00AM-3:00PM

LAU, JANICE, OD

Provider Gender: Female

License Number: 13037

NPI: 1952453300

Provider English Spoken: Y

Cultural Competency: Y

SABRE SPRINGS OPTOMETRY

12650 SABRE SPGS PKWY
STE 203

SAN DIEGO, CA 92128

Phone: (858) 748-1265

Fax: (844) 269-9527

After Hours Phone: (858)
748-1265

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Vietnamese

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-TU
9:00AM-5:00PM
W 10:00AM-6:00PM
TH 9:00AM-5:00PM
F 10:00AM-6:00PM

LAU, KUEN CHINE, OD

Provider Gender: Male

License Number: 11166

NPI: 1821001645

Provider English Spoken: Y

Cultural Competency: Y

OPTOM-EYES VISION CARE OPTOMETRY

1555 PALM AVE STE A2
SAN DIEGO, CA 92154

Phone: (619) 297-2020

Fax: (888) 210-5799

After Hours Phone: (619)
297-2020

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
9:30AM-6:00PM
SA 9:00AM-3:00PM

LEE, JASON, OD

Provider Gender: Male

License Number: 14881

NPI: 1679985584

Provider English Spoken: Y

Provider Language(s) Spoken:

Spanish

Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

7910 FROST ST STE 200
SAN DIEGO, CA 92123

Phone: (858) 309-7702

Fax: (858) 966-8901

After Hours Phone: (858)
309-7702

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
7:00AM-5:00PM

LIN, HENRY, OD

Provider Gender: Male

License Number: 11368

NPI: 1861405664

Provider English Spoken: Y

Provider Language(s) Spoken:

Spanish, Chinese

Cultural Competency: Y

OPTOM-EYES VISION CARE OPTOMETRY

5638 MISSION CENTER RD
STE 103

SAN DIEGO, CA 92108

Phone: (619) 295-2900

Fax: (888) 210-5799

After Hours Phone: (619)
295-2900

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish


D7. Directorio de proveedores de la vista: servicios oculares y de la vista

American Sign Language (ASL): License Number: 11368

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M-F
9:00AM-5:30PM
SA 9:00AM-3:00PM

LIN, HENRY, OD

Provider Gender: Male

License Number: 11368


NPI: 1861405664


Provider English Spoken: Y

Provider Language(s) Spoken: Spanish, Chinese

Cultural Competency: Y

FASHION VALLEY EYE CARE OPTOMETR

 7007 FRIARS RD STE 351
SAN DIEGO, CA 92108

 Phone: (619) 291-2020

Fax: (888) 210-5799

 After Hours Phone: (619) 291-2020

Accepting New Patients: Yes

Site English Spoken: Y


Site Languages(s) Spoken: Spanish

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F
10:00AM-7:00PM
SA 10:00AM-7:00PM

LIN, HENRY, OD

Provider Gender: Male

NPI: 1861405664


Provider English Spoken: Y

Provider Language(s) Spoken: Spanish, Chinese

Cultural Competency: Y

OPTOM-EYES VISION CARE OPTOMETRY

 1555 PALM AVE STE A2
SAN DIEGO, CA 92154

 Phone: (619) 297-2020

Fax: (888) 210-5799

 After Hours Phone: (619) 297-2020


Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F
9:30AM-6:00PM
SA 9:00AM-3:00PM

LLANES, BENJAMIN, OD

Provider Gender: Male

License Number: 8782

NPI: 1053309005

Provider English Spoken: Y


Provider Language(s) Spoken: Spanish, Tagalog

Cultural Competency: Y

SEE KLEER EYECARE CENTER

 9580 BLACK MOUNTAIN
RD STE J

SAN DIEGO, CA 92126

 Phone: (858) 536-8952

Fax: (858) 536-8951

 After Hours Phone: (858)

536-8952


Accepting New Patients: Yes

Site English Spoken: Y


Site Languages(s) Spoken: Spanish, Tagalog

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-TH
11:00AM-6:00PM
F 1:00PM-5:00PM
SA 9:00AM-1:00PM

MARR, RYAN, OD

Provider Gender: Male

License Number: 35302


NPI: 1235857525

Provider English Spoken: Y


Cultural Competency: Y

WEST COAST EYE CARE

 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

 Phone: (858) 565-8822

Fax: (858) 565-2449


 After Hours Phone: (858) 565-8822

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

MARR, RYAN, OD

Provider Gender: Male
 License Number: 35302
 NPI: 1235857525
 Provider English Spoken: Y
 Cultural Competency: Y
 WEST COAST EYE CARE

6945 EL CAJON BLVD
 SAN DIEGO, CA 92115
 Phone: (619) 697-4600
 Fax: (619) 697-2410
 After Hours Phone: (619) 697-4600

Accepting New Patients: Yes

Site English Spoken: Y
 American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M 7:30AM-4:30PM
 TU 8:00AM-5:00PM
 W 8:30AM-5:00PM
 TH 8:00AM-6:00PM
 F 8:00AM-4:00PM

MCCLEAN, ESMERALDA, OD

Provider Gender: Female
 License Number: 15001
 NPI: 1962817981
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: Y

HILLCREST EYE
 CENTER-UCSD

4060 4TH AVE STE 610
 SAN DIEGO, CA 92103
 Phone: (619) 543-6244

Fax: (619) 295-5034

After Hours Phone: (619) 543-6244

Accepting New Patients: Yes

Site English Spoken: Y
 American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F
 8:00AM-4:00PM

MCCLEAN, ESMERALDA, OD

Provider Gender: Female
 License Number: 15001
 NPI: 1962817981
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: Y

UC SAN DIEGO HEALTH

16950 VIA TAZON
 SAN DIEGO, CA 92127
 Phone: (858) 534-6290
 Fax: (858) 732-0921

After Hours Phone: (858) 534-6290

Accepting New Patients: Yes

Site English Spoken: Y
 American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F
 8:00AM-5:00PM

MCGRAW, JOSEPH, MD

Provider Gender: Male

License Number: A155228

NPI: 1588624852

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

4344 CONVOY ST STE C2
 SAN DIEGO, CA 92111

Phone: (858) 565-8822
 Fax: (858) 565-2449

After Hours Phone: (858) 565-8822

Accepting New Patients: Yes

Site English Spoken: Y
 American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M 10:00AM-6:00PM
 TU 8:30AM-5:00PM
 W 7:30AM-4:00PM
 TH 9:30AM-5:00PM
 F 8:00AM-4:00PM

MCGRAW, JOSEPH, MD

Provider Gender: Male

License Number: A155228

NPI: 1588624852

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

6945 EL CAJON BLVD
 SAN DIEGO, CA 92115


Phone: (619) 697-4600
 Fax: (619) 697-2410

After Hours Phone: (619) 697-4600

Accepting New Patients: Yes

Site English Spoken: Y
 American Sign Language (ASL): N



D7. Directorio de proveedores de la vista: servicios oculares y de la vista

 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1U
 *Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM*

MIZOGUCHI, LIANNE, OD

Provider Gender: Female
License Number: 10104
NPI: 1619900313
Provider English Spoken: Y
Cultural Competency: Y
HILLCREST EYE
CENTER-UCSD

 4060 4TH AVE STE 610
SAN DIEGO, CA 92103
 *Phone: (619) 543-6244*
Fax: (619) 295-5034
 *After Hours Phone: (619) 543-6244*
Accepting New Patients: Yes
 *Site English Spoken: Y*
American Sign Language (ASL): N



 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1T
 *Hours: M-F
8:00AM-4:00PM*

MOLL, ANGELA, MD

Provider Gender: Female
License Number: A105472
NPI: 1861648602
Provider English Spoken: Y
Cultural Competency: Y
RADY CHILDRENS

SPECIALISTS



 7910 FROST ST STE 200
SAN DIEGO, CA 92123
 *Phone: (858) 309-7702*
Fax: (858) 966-8901
 *After Hours Phone: (858) 309-7702*
Accepting New Patients: Yes
 *Site English Spoken: Y*
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1U
 *Hours: M-F
7:00AM-5:00PM*

MOOR, TRACY, OD



Provider Gender: Female
License Number: 35085
NPI: 1184283277
Provider English Spoken: Y
Cultural Competency: Y
HILLCREST EYE
CENTER-UCSD

 4060 4TH AVE STE 610
SAN DIEGO, CA 92103
 *Phone: (619) 543-6244*
Fax: (619) 295-5034
 *After Hours Phone: (619) 543-6244*
Accepting New Patients: Yes
 *Site English Spoken: Y*
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1T
 *Hours: M-F
8:00AM-4:00PM*

MOOR, TRACY, OD

Provider Gender: Female
License Number: 35085
NPI: 1184283277
Provider English Spoken: Y
Cultural Competency: Y
UC SAN DIEGO HEALTH
 16950 VIA TAZON
SAN DIEGO, CA 92127
 *Phone: (858) 534-6290*
Fax: (858) 732-0921
 *After Hours Phone: (858) 534-6290*
Accepting New Patients: Yes
 *Site English Spoken: Y*
American Sign Language (ASL): N

 *Accessibility: CONTACT PROVIDER*
Public transportation (within 1/2 mile from Site): 1T
 *Hours: M-F
8:00AM-5:00PM*

MORRISON REYES, JOSHUA, MD

Provider Gender: Male
License Number: A125435
NPI: 1235366782
Provider English Spoken: Y
Provider Language(s) Spoken: Indonesian, Spanish
Cultural Competency: Y
WEST COAST EYE CARE
 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
 *Phone: (858) 565-8822*
Fax: (858) 565-2449
 *After Hours Phone: (858) 565-8822*

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL): **NGUYEN, KELVIN, OD**

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

MORRISON REYES, JOSHUA, MD

Provider Gender: Male

License Number: A125435

NPI: 1235366782

Provider English Spoken: Y

Provider Language(s) Spoken: Indonesian, Spanish

Cultural Competency: Y

WEST COAST EYE CARE

6945 EL CAJON BLVD
SAN DIEGO, CA 92115

Phone: (619) 697-4600

Fax: (619) 697-2410

After Hours Phone: (619) 697-4600

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM

F 8:00AM-4:00PM

Provider Gender: Male

License Number: 11085

NPI: 1518923572

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: Y

SD VISION CARE OPTOMETRY

3807 FAIRMOUNT AVE STE 200

SAN DIEGO, CA 92105

Phone: (619) 508-5678

Fax: (619) 501-0686

After Hours Phone: (619) 508-5678

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

NGUYEN, BRUCE, OD

Provider Gender: Male

License Number: 14156

NPI: 1376839019

Provider English Spoken: Y

Provider Language(s) Spoken: Vietnamese

Cultural Competency: Y

SD VISION CARE OPTOMETRY

3807 FAIRMOUNT AVE STE 200

SAN DIEGO, CA 92105

Phone: (619) 508-5678

Fax: (619) 501-0686

After Hours Phone: (619) 508-5678

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

NGUYEN, JASMINE, OD

Provider Gender: Female

License Number: 11189

NPI: 1497896922

Provider English Spoken: Y

Provider Language(s) Spoken: Vietnamese

Cultural Competency: Y

JASMINE P NGUYEN OD INC

4029 43RD ST STE 300
SAN DIEGO, CA 92105

Phone: (619) 284-3937

Fax: (619) 284-3938

After Hours Phone: (619) 284-3937

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish, Vietnamese

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F
9:00AM-5:00PM
SA 9:00AM-1:00PM

NGUYEN, THANH, OD

Provider Gender: Female

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

License Number: 13126
NPI: 1992813323
Provider English Spoken: Y
Provider Language(s) Spoken:
Vietnamese
Cultural Competency: Y
JASMINE P NGUYEN OD INC
4029 43RD ST STE 300
SAN DIEGO, CA 92105
Phone: (619) 284-3937
Fax: (619) 284-3938
After Hours Phone: (619)
284-3937

Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken:
Spanish, Vietnamese
American Sign Language (ASL):

N
Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T
Hours: M-F
9:00AM-5:00PM
SA 9:00AM-1:00PM

NGUYEN, BRUCE, OD

Provider Gender: Male
License Number: 14156
NPI: 1376839019
Provider English Spoken: Y
Provider Language(s) Spoken:
Vietnamese
Cultural Competency: Y

CLAIREMONT OPTOMETRY
10715 TIERRASANTA BLVD
STE F
SAN DIEGO, CA 92124
Phone: (858) 279-6500
Fax: (858) 225-7174
After Hours Phone: (858)

279-6500
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken:
Spanish, Vietnamese
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1T
Hours: M-W
9:00AM-6:00PM
TH-F 9:00AM-5:00PM
SA 8:00AM-3:00PM

NGUYEN, THANH, OD

Provider Gender: Female
License Number: 13126
NPI: 1992813323
Provider English Spoken: Y
Provider Language(s) Spoken:
Vietnamese
Cultural Competency: Y
SABRE SPRINGS OPTOMETRY

12650 SABRE SPGS PKWY
STE 203
SAN DIEGO, CA 92128
Phone: (858) 748-1265
Fax: (844) 269-9527
After Hours Phone: (858)
748-1265
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken:
Spanish, Vietnamese
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U

Hours: M-TU
9:00AM-5:00PM
W 10:00AM-6:00PM
TH 9:00AM-5:00PM
F 10:00AM-6:00PM

O HALLORAN, HENRY, MD

Provider Gender: Male
License Number: A73282
NPI: 1235287947
Provider English Spoken: Y
Provider Language(s) Spoken:
German, Spanish
Cultural Competency: Y
RADY CHILDRENS
SPECIALISTS

7910 FROST ST STE 200
SAN DIEGO, CA 92123
Phone: (858) 309-7702
Fax: (858) 966-8901
After Hours Phone: (858)
309-7702
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL):
N
Accessibility: CONTACT
PROVIDER
Public transportation (within
1/2 mile from Site): 1U
Hours: M-F
7:00AM-5:00PM

PATEL, SARJAN, MD

Provider Gender: Male
License Number: A114976
NPI: 1316199326
Provider English Spoken: Y
Provider Language(s) Spoken:
Gujarati, Hindi, Spanish
Cultural Competency: Y

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

WEST COAST EYE CARE

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

Phone: (858) 565-8822

Fax: (858) 565-2449

After Hours Phone: (858)
565-8822

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

PATEL, GITANE, MD

Provider Gender: Male

License Number: A108603

NPI: 1710171434

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

Phone: (858) 565-8822

Fax: (858) 565-2449

After Hours Phone: (858)
565-8822

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

PATEL, SARJAN, MD

Provider Gender: Male

License Number: A114976

NPI: 1316199326

Provider English Spoken: Y

Provider Language(s) Spoken:

Gujarati, Hindi, Spanish

Cultural Competency: Y

WEST COAST EYE CARE

6945 EL CAJON BLVD
SAN DIEGO, CA 92115

Phone: (619) 697-4600

Fax: (619) 697-2410

After Hours Phone: (619)
697-4600

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM

PATEL, GITANE, MD

Provider Gender: Male

License Number: A108603

NPI: 1710171434

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

6945 EL CAJON BLVD
SAN DIEGO, CA 92115

Phone: (619) 697-4600

Fax: (619) 697-2410

After Hours Phone: (619)
697-4600

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM

PHAM, TONY, OD

Provider Gender: Male

License Number: 12348

NPI: 1841271434

Provider English Spoken: Y

Provider Language(s) Spoken:

Spanish, Vietnamese

Cultural Competency: Y

MIRA MESA EYECARE

6755 MIRA MESA BLVD STE
141

SAN DIEGO, CA 92121

Phone: (858) 535-8282

Fax: (858) 535-0537

After Hours Phone: (858)
535-8282

Accepting New Patients: Yes

Site English Spoken: Y



Site Language(s) Spoken:

Spanish, Vietnamese

American Sign Language (ASL):

N



D7. Directorio de proveedores de la vista: servicios oculares y de la vista

 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: M-TU
9:30AM-6:00PM
TH-F 9:30AM-6:00PM

PHUNG, RICHARD N V, OD

Provider Gender: Male
License Number: 9547
NPI: 1689661571
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese, Chinese
Cultural Competency: Y
SCRIPPS RANCH OPTOMETRI
CTR




 9880 HIBERT ST STE E1
SAN DIEGO, CA 92131
 Phone: (858) 693-9044
Fax: (858) 693-0704
 After Hours Phone: (858)
693-9044
Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken: Vietnamese
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
 Hours: M 10:00AM-6:00PM
TU 10:00AM-2:00PM
W-TH 10:00AM-6:00PM
F 9:00AM-2:00PM
SA 9:00AM-2:00PM

POUSTI, SHEIVA, OD



Provider Gender: Female

License Number: 10403
NPI: 1730240052
Provider English Spoken: Y
Cultural Competency: Y
SAN DIEGO EYE CLINIC
OPTOMETRY

 3560 FAIRMOUNT AVE STE
A
SAN DIEGO, CA 92105
 Phone: (619) 431-2020
Fax: (619) 376-2100
 After Hours Phone: (619)
431-2020

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
 Hours: SU-SA
9:00AM-6:00PM



PRABHU, SUJATA, MD

Provider Gender: Female
License Number: A115965
NPI: 1982872552
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y
WEST COAST EYE CARE

 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
 Phone: (619) 697-4600
Fax: (619) 697-2410
 After Hours Phone: (619)
697-4600

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
 Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM

PRABHU, SUJATA, MD



Provider Gender: Female
License Number: A115965
NPI: 1982872552
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: Y
WEST COAST EYE CARE

 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
 Phone: (858) 565-8822
Fax: (858) 565-2449

 After Hours Phone: (858)
565-8822

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
 Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

SANDOC, EMILY, OD

Provider Gender: Female

License Number: 13535

NPI: 1992969794

Provider English Spoken: Y

Cultural Competency: Y

OPTOM-EYES VISION CARE
OPTOMETRY

5638 MISSION CENTER RD
STE 103

SAN DIEGO, CA 92108

Phone: (619) 295-2900

Fax: (888) 210-5799

After Hours Phone: (619)
295-2900

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
9:00AM-5:30PM
SA 9:00AM-3:00PM

SHULKIN, MITCHELL, OD

Provider Gender: Male

License Number: 8153

NPI: 1770531865

Provider English Spoken: Y

Cultural Competency: Y

NORTH COUNTY OPTOMETRY

11835 CARMEL MTN RD STE
1313

SAN DIEGO, CA 92128

Phone: (858) 674-1276

Fax: (858) 674-5863

After Hours Phone: (858)

674-1276

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Tagalog

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M 9:00AM-4:00PM
TU 7:00AM-1:00PM
W-TH 10:00AM-6:00PM
F 10:00AM-3:00PM
SA 9:00AM-2:00PM

TA, TRANG, OD

Provider Gender: Female

License Number: 12100

NPI: 1518381045

Provider English Spoken: Y

Provider Language(s) Spoken:

Vietnamese

Cultural Competency: Y

JASMINE P NGUYEN OD INC

4029 43RD ST STE 300

SAN DIEGO, CA 92105

Phone: (619) 284-3937

Fax: (619) 284-3938

After Hours Phone: (619)
284-3937

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Vietnamese

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F

9:00AM-5:00PM

SA 9:00AM-1:00PM

TAM, MAY, OD

Provider Gender: Female

License Number: 11960

NPI: 1548255896

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

OPTOM-EYES VISION CARE
OPTOMETRY

5638 MISSION CENTER RD
STE 103

SAN DIEGO, CA 92108

Phone: (619) 295-2900

Fax: (888) 210-5799

After Hours Phone: (619)
295-2900

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
9:00AM-5:30PM
SA 9:00AM-3:00PM

TAM, MAY, OD

Provider Gender: Female

License Number: 11960

NPI: 1548255896

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

Cultural Competency: Y
FASHION VALLEY EYE CARE
OPTOMETR

7007 FRIARS RD STE 351
SAN DIEGO, CA 92108

Phone: (619) 291-2020

Fax: (888) 210-5799

After Hours Phone: (619)
291-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
10:00AM-7:00PM
SA 10:00AM-7:00PM

TAM, MAY, OD

Provider Gender: Female

License Number: 11960

NPI: 1548255896

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

OPTOM-EYES VISION CARE
OPTOMETRY

1555 PALM AVE STE A2
SAN DIEGO, CA 92154

Phone: (619) 297-2020

Fax: (888) 210-5799

After Hours Phone: (619)
297-2020

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
9:30AM-6:00PM
SA 9:00AM-3:00PM

TILLMAN, SYLVIA, OD

Provider Gender: Female

License Number: 9726

NPI: 1174730824

Provider English Spoken: Y

Cultural Competency: Y

JASMINE P NGUYEN OD INC

4029 43RD ST STE 300
SAN DIEGO, CA 92105

Phone: (619) 284-3937

Fax: (619) 284-3938

After Hours Phone: (619)
284-3937

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish, Vietnamese

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
9:00AM-5:00PM
SA 9:00AM-1:00PM

TON-NU, MY LINH, OD

Provider Gender: Female

License Number: 34990

NPI: 1245733476

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

6945 EL CAJON BLVD
SAN DIEGO, CA 92115

Phone: (619) 697-4600

Fax: (619) 697-2410

After Hours Phone: (619)
697-4600

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM

TON-NU, MY LINH, OD

Provider Gender: Female

License Number: 34990

NPI: 1245733476

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

Phone: (858) 565-8822

Fax: (858) 565-2449

After Hours Phone: (858)
565-8822

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

🕒 *Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM*

TONNU, ANH, OD

*Provider Gender: Female
License Number: 11318
NPI: 1679521280
Provider English Spoken: Y
Provider Language(s) Spoken:
Vietnamese
Cultural Competency: Y*

WEST COAST EYE CARE

📍 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

📞 *Phone: (858) 565-8822*

Fax: (858) 565-2449

🕒 *After Hours Phone: (858)
565-8822*

Accepting New Patients: Yes

🗨️ *Site English Spoken: Y
American Sign Language (ASL):*

N

♿ *Accessibility: CONTACT
PROVIDER*

*Public transportation (within
1/2 mile from Site): 1U*

🕒 *Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM*

TONNU, ANH, OD

*Provider Gender: Female
License Number: 11318
NPI: 1679521280
Provider English Spoken: Y
Provider Language(s) Spoken:
Vietnamese*

Cultural Competency: Y
WEST COAST EYE CARE

📍 6945 EL CAJON BLVD
SAN DIEGO, CA 92115

📞 *Phone: (619) 697-4600*

Fax: (619) 697-2410

🕒 *After Hours Phone: (619)
697-4600*

Accepting New Patients: Yes

🗨️ *Site English Spoken: Y
American Sign Language (ASL):*

N

♿ *Accessibility: CONTACT
PROVIDER*

*Public transportation (within
1/2 mile from Site): 1U*

🕒 *Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM*

TRAN, ALEXANDER, OD

Provider Gender: Male

License Number: 14136

NPI: 1902414790

Provider English Spoken: Y

Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

📍 7910 FROST ST STE 200
SAN DIEGO, CA 92123

📞 *Phone: (858) 309-7702*

Fax: (858) 966-8901

🕒 *After Hours Phone: (858)
309-7702*

Accepting New Patients: Yes

🗨️ *Site English Spoken: Y
American Sign Language (ASL):*

N

♿ *Accessibility: CONTACT
PROVIDER*

*Public transportation (within
1/2 mile from Site): 1U*

🕒 *Hours: M-F
7:00AM-5:00PM*

TRANG, CHAU, OD

Provider Gender: Female

License Number: 9556

NPI: 1073671087

Provider English Spoken: Y

Provider Language(s) Spoken:

*French, Spanish, Vietnamese,
Chinese*

Cultural Competency: Y

CHAU H TRANG OD

📍 6947 LINDA VISTA RD STE
A

SAN DIEGO, CA 92111

📞 *Phone: (858) 495-0592*

Fax: (858) 495-0560

🕒 *After Hours Phone: (858)
495-0592*

Accepting New Patients: Yes

🗨️ *Site English Spoken: Y*

🗨️ *Site Languages(s) Spoken:*

*French, Spanish,
Vietnamese*

American Sign Language (ASL):

N

♿ *Accessibility: CONTACT
PROVIDER*

*Public transportation (within
1/2 mile from Site): 1T*

🕒 *Hours: M 10:00AM-3:00PM
W 10:00AM-3:00PM
F 10:00AM-5:00PM
SA 9:00AM-1:00PM*

VAN HOOSE, MARC, OD

Provider Gender: Male

License Number: 12667

NPI: 1932280054

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

Provider English Spoken: Y
Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

VAN HOOSE OPTOMETRIC
CORPORATION

7246 CLAIREMONT MESA
BLVD

SAN DIEGO, CA 92111

Phone: (858) 292-7193

Fax: (858) 292-8247

After Hours Phone: (858)
292-7193

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M 8:00AM-5:00PM
TU-TH 9:00AM-6:00PM
F 8:00AM-5:00PM

VIVIRITO, MARY, OD

Provider Gender: Female

License Number: 33798

NPI: 1477968667

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

WEST COAST EYE CARE

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

Phone: (858) 565-8822

Fax: (858) 565-2449

After Hours Phone: (858)
565-8822

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

VO, ANDREW MINH, OD

Provider Gender: Male

License Number: 33869

NPI: 1790291565

Provider English Spoken: Y

Provider Language(s) Spoken:
Vietnamese

Cultural Competency: Y

HILLCREST EYE

CENTER-UCSD

4060 4TH AVE STE 610
SAN DIEGO, CA 92103

Phone: (619) 543-6244

Fax: (619) 295-5034

After Hours Phone: (619)
543-6244

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-4:00PM

WONG, GORDON, OD

Provider Gender: Male

License Number: 9832

NPI: 1447338447

Provider English Spoken: Y

Cultural Competency: Y
UPTOWN OPTOMETRY

4096 PARK BLVD
SAN DIEGO, CA 92103

Phone: (619) 291-5505

Fax: (619) 291-4404

After Hours Phone: (619)
291-5505

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: TU-F
9:00AM-3:00PM
SA 10:00AM-2:00PM

YU, CAROL, OD

Provider Gender: Female

License Number: 34047

NPI: 1639697451

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish, Chinese

Cultural Competency: Y

HILLCREST EYE

CENTER-UCSD

4060 4TH AVE STE 610
SAN DIEGO, CA 92103

Phone: (619) 543-6244

Fax: (619) 295-5034

After Hours Phone: (619)
543-6244

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-4:00PM

ZAIDI, NOORINA, OD

Provider Gender: Female

License Number: 35615

NPI: 1023477262

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

Phone: (858) 565-8822

Fax: (858) 565-2449

After Hours Phone: (858)
565-8822

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

ZAIDI, NOORINA, OD

Provider Gender: Female

License Number: 35615

NPI: 1023477262

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

6945 EL CAJON BLVD
SAN DIEGO, CA 92115

Phone: (619) 697-4600

Fax: (619) 697-2410

After Hours Phone: (619)
697-4600

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM

ZHAO, TAILUN, MD

Provider Gender: Male

License Number: C186414

NPI: 1952659203

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

4344 CONVOY ST STE C2
SAN DIEGO, CA 92111

Phone: (858) 565-8822

Fax: (858) 565-2449

After Hours Phone: (858)
565-8822

Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

SAN MARCOS

GARFF, KEVIN, MD

Provider Gender: Male

License Number: A160988

NPI: 1609258920

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

RSF OPHTHALMOLOGY

100 N RANCHO SNTA FE
RD STE 12

SAN MARCOS, CA 92069

Phone: (760) 598-0400

Fax: (760) 249-7394

After Hours Phone: (760)
598-0400

Accepting New Patients: Yes

Site English Spoken: Y
 Site Languages(s) Spoken:
Spanish, Thai

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

GUAN, HOWARD, MD

Provider Gender: Male

License Number: A119766

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

NPI: 1134427636

Provider English Spoken: Y

Provider Language(s) Spoken:

Spanish, Chinese

Cultural Competency: Y

RSF OPHTHALMOLOGY

100 N RANCHO SANTA FE RD STE 12

SAN MARCOS, CA 92069

Phone: (760) 598-0400

Fax: (760) 249-7394

After Hours Phone: (760) 598-0400

Accepting New Patients: Yes

Site English Spoken: Y

Site Language(s) Spoken: Spanish, Thai

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): IT

Hours: M-F 8:00AM-5:00PM

PRESTERA, TORY, MD

Provider Gender: Male

License Number: A62321

NPI: 1346224557

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: Y

RSF OPHTHALMOLOGY

100 N RANCHO SANTA FE RD STE 12

SAN MARCOS, CA 92069

Phone: (760) 598-0400

Fax: (760) 249-7394

After Hours Phone: (760) 598-0400

Accepting New Patients: Yes

Site English Spoken: Y

Site Language(s) Spoken: Spanish, Thai

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): IT

Hours: M-F 8:00AM-5:00PM

SKAY, RICHARD, OD

Provider Gender: Male

License Number: 7649

NPI: 1639251945

Provider English Spoken: Y

Cultural Competency: Y

RICHARD M SKAY OD

1903 W SAN MARCOS BLVD STE 130

SAN MARCOS, CA 92078

Phone: (760) 727-2211

Fax: (760) 727-2533

After Hours Phone: (760) 727-2211

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F 9:00AM-3:00PM

TA, MINI, OD

Provider Gender: Female

License Number: 15170

NPI: 1578955605

Provider English Spoken: Y

Cultural Competency: Y

NEW OPTIX OPTOMETRY

640 GRAND AVE STE 101

SAN MARCOS, CA 92078

Phone: (760) 736-0020

Fax: (760) 736-0019

After Hours Phone: (760)

736-0020

Accepting New Patients: Yes

Site English Spoken: Y

Site Language(s) Spoken: Spanish, Vietnamese

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): IT

Hours: M 9:00AM-5:00PM

TU 9:00AM-6:00PM

W 9:00AM-5:00PM

TH 9:00AM-6:00PM

F 9:00AM-5:00PM

THAI, AMANDA, OD

Provider Gender: Female

License Number: 34861

NPI: 1457928558

Provider English Spoken: Y

Cultural Competency: Y

NEW OPTIX OPTOMETRY

640 GRAND AVE STE 101

SAN MARCOS, CA 92078

Phone: (760) 736-0020

Fax: (760) 736-0019

After Hours Phone: (760) 736-0020

Accepting New Patients: Yes


Site English Spoken: Y

Site Language(s) Spoken: Spanish, Vietnamese


D7. Directorio de proveedores de la vista: servicios oculares y de la vista

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M 9:00AM-5:00PM
TU 9:00AM-6:00PM
W 9:00AM-5:00PM
TH 9:00AM-6:00PM
F 9:00AM-5:00PM

TRAN, MICHAEL, OD

Provider Gender: Male

License Number: 14530

NPI: 1649524216


Provider English Spoken: Y

Provider Language(s) Spoken: Vietnamese

Cultural Competency: Y

NEW OPTIX OPTOMETRY

 640 GRAND AVE STE 101
SAN MARCOS, CA 92078

 Phone: (760) 736-0020

Fax: (760) 736-0019

 After Hours Phone: (760) 736-0020


Accepting New Patients: Yes

Site English Spoken: Y


Site Languages(s) Spoken: Spanish, Vietnamese

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M 9:00AM-5:00PM
TU 9:00AM-6:00PM
W 9:00AM-5:00PM
TH 9:00AM-6:00PM
F 9:00AM-5:00PM

SPRING VALLEY

FLEMING, JOHN, OD

Provider Gender: Male

License Number: 8461


NPI: 1033192133

Provider English Spoken: Y

Cultural Competency: Y

JOHN C FLEMING OD

 9628 CAMPO RD STE C
SPRING VALLEY, CA 91977

 Phone: (619) 463-9318

Fax: (619) 463-9640

 After Hours Phone: (619) 463-9318


Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M 9:00AM-5:00PM
TU 9:00AM-5:30PM
W-TH 9:00AM-5:00PM
F 9:00AM-4:00PM

HOANG, KENNY, OD

Provider Gender: Male

License Number: 35207


NPI: 1740868603

Provider English Spoken: Y

Cultural Competency: Y

JOHN C FLEMING OD

 9628 CAMPO RD STE C
SPRING VALLEY, CA 91977

 Phone: (619) 463-9318

Fax: (619) 463-9640

 After Hours Phone: (619) 463-9318


Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M 9:00AM-5:00PM
TU 9:00AM-5:30PM
W-TH 9:00AM-5:00PM
F 9:00AM-4:00PM

JOHNSON, CHRISTOPHER, OD

Provider Gender: Male

License Number: 15100


NPI: 1568861425

Provider English Spoken: Y

Cultural Competency: Y

JOHN C FLEMING OD

 9628 CAMPO RD STE C
SPRING VALLEY, CA 91977

 Phone: (619) 463-9318


Fax: (619) 463-9640

 After Hours Phone: (619) 463-9318


Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M 9:00AM-5:00PM
TU 9:00AM-5:30PM
W-TH 9:00AM-5:00PM
F 9:00AM-4:00PM

KALRA, ANKUR, OD

Provider Gender: Male

License Number: 11898

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

NPI: 1124195789

Provider English Spoken: Y

Provider Language(s) Spoken:
Hindi

Cultural Competency: Y

EYE CARE OPTOMETRY
ASSOCIATES

687 SWEETWATER RD
SPRING VALLEY, CA 91977

Phone: (619) 466-9444

Fax: (619) 466-9314

After Hours Phone: (619)
466-9444

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
9:00AM-6:00PM
SA 9:00AM-5:00PM

KEDDINGTON, JOAN, OD

Provider Gender: Female

License Number: 6263

NPI: 1992872691

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

EYE CARE OPTOMETRY
ASSOCIATES

687 SWEETWATER RD
SPRING VALLEY, CA 91977

Phone: (619) 466-9444

Fax: (619) 466-9314

After Hours Phone: (619)
466-9444

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
9:00AM-6:00PM
SA 9:00AM-5:00PM

KING, MARY, OD

Provider Gender: Female

License Number: 13711

NPI: 1578792107

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

EYE CARE OPTOMETRY
ASSOCIATES

687 SWEETWATER RD
SPRING VALLEY, CA 91977

Phone: (619) 466-9444

Fax: (619) 466-9314

After Hours Phone: (619)
466-9444

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
9:00AM-6:00PM
SA 9:00AM-5:00PM

NGUYEN, THERESA, OD

Provider Gender: Female

License Number: 35530TLG

NPI: 1609555713

Provider English Spoken: Y

Cultural Competency: Y

EYE CARE OPTOMETRY
ASSOCIATES

687 SWEETWATER RD
SPRING VALLEY, CA 91977

Phone: (619) 466-9444

Fax: (619) 466-9314

After Hours Phone: (619)
466-9444

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):
N

Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

Hours: M-F
9:00AM-6:00PM
SA 9:00AM-5:00PM

SOLIS, KEVIN, OD

Provider Gender: Male

License Number: 10420

NPI: 1538362116

Provider English Spoken: Y

Cultural Competency: Y

EYE CARE OPTOMETRY
ASSOCIATES

687 SWEETWATER RD
SPRING VALLEY, CA 91977

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

☎ Phone: (619) 466-9444
Fax: (619) 466-9314

🕒 After Hours Phone: (619)
466-9444

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
9:00AM-6:00PM
SA 9:00AM-5:00PM

TOUBIA, ELIAS, OD

Provider Gender: Male

License Number: 33758

NPI: 1740701481

Provider English Spoken: Y

Provider Language(s) Spoken:

Arabic

Cultural Competency: Y

EYE CARE OPTOMETRY

ASSOCIATES

📍 687 SWEETWATER RD
SPRING VALLEY, CA 91977

☎ Phone: (619) 466-9444
Fax: (619) 466-9314

🕒 After Hours Phone: (619)
466-9444

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M-F
9:00AM-6:00PM
SA 9:00AM-5:00PM

VALLEY CENTER

JOYCE, ROBERT, OD

Provider Gender: Male

License Number: 11833

NPI: 1275585127

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

VALLEY CENTER OPTOMETRY

📍 29115 VALLEY CENTER RD
STE E
VALLEY CENTER, CA 92082

☎ Phone: (760) 751-8771
Fax: (760) 751-8772

🕒 After Hours Phone: (760)
751-8771

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M 9:00AM-6:00PM
TU-F 9:00AM-5:00PM

LE, TAM, OD

Provider Gender: Female

License Number: 12951

NPI: 1235268707

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish, Vietnamese

Cultural Competency: Y

VALLEY CENTER OPTOMETRY

📍 29115 VALLEY CENTER RD
STE E
VALLEY CENTER, CA 92082

☎ Phone: (760) 751-8771
Fax: (760) 751-8772

🕒 After Hours Phone: (760)
751-8771

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:
Spanish

American Sign Language (ASL):

N

♿ Accessibility: CONTACT
PROVIDER

Public transportation (within
1/2 mile from Site): 1U

🕒 Hours: M 9:00AM-6:00PM
TU-F 9:00AM-5:00PM

VISTA

DEMLINGER, GLENN, OD

Provider Gender: Male

License Number: 8954

NPI: 1508932518

Provider English Spoken: Y

Provider Language(s) Spoken:
Spanish

Cultural Competency: Y

SHADOWRIDGE FAMILY
VISION

📍 741 SHADOWRIDGE DR
VISTA, CA 92083

☎ Phone: (760) 727-1844
Fax: (760) 727-3044

🕒 After Hours Phone: (760)
727-1844

D7. Directorio de proveedores de la vista: servicios oculares y de la vista

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-TU
9:00AM-6:00PM
W 7:00AM-5:00PM
TH 9:00AM-6:00PM

GEORGE, BRUCE, OD

Provider Gender: Male

License Number: 7696

NPI: 1356414551

Provider English Spoken: Y

Provider Language(s) Spoken: Korean, Spanish

Cultural Competency: Y

BRUCE D GEORGE OD

931 ANZA AVE STE B
VISTA, CA 92084

Phone: (760) 758-2340

Fax: (760) 867-2222

After Hours Phone: (760)
758-2340

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M 9:00AM-5:00PM
TU-W 9:00AM-6:00PM

TH-F 9:00AM-5:00PM

GEORGE, KENDALL, OD

Provider Gender: Male

License Number: 34270

NPI: 1619529948

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: Y

BRUCE D GEORGE OD

931 ANZA AVE STE B
VISTA, CA 92084

Phone: (760) 758-2340

Fax: (760) 867-2222

After Hours Phone: (760)
758-2340

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M 9:00AM-5:00PM
TU-W 9:00AM-6:00PM
TH-F 9:00AM-5:00PM

TRAN, THAO, OD

Provider Gender: Female

License Number: 12867

NPI: 1962581421

Provider English Spoken: Y

Provider Language(s) Spoken: Vietnamese

Cultural Competency: Y

KINDERSPECS-GOOD EYES
OPTOMETRY

110 CIVIC CENTER DR STE
204

VISTA, CA 92084

Phone: (760) 753-3665

Fax: (408) 969-1653

After Hours Phone: (760)
753-3665

Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-TH
10:00AM-5:00PM

D8. Otros proveedores de servicios


SAN MARCOS


AMERICARE ADULT DAY HEALTH CARE CENTER†

License Number: 060000832


 340 RANCHEROS DR STE
196

SAN MARCOS, CA 92069


 *Phone: (760) 682-2424*

 *After Hours Phone: (760)
682-2424*

 *Site English Spoken: Y*

 *Hours: 24 Hours / 7
days/week*

 *Accessibility: CONTACT
PROVIDER*

 *Website: [www.americaread
hc.com](http://www.americaread
hc.com)*

Cultural Competency: N

Accepting New Patients: No

D9. Centros de atención de urgencia de Blue Shield Promise

CHULA VISTA

AFC URGENT CARE OF BONITA*

NPI: 1316225147

760 OTAY LAKES RD
CHULA VISTA, CA 91910

(619) 821-2300

(619) 821-2300

Site Languages(s) Spoken:
Spanish

SU 8:00AM-5:00PM
M-F 8:00AM-8:00PM
SA 8:00AM-8:00PM

Accessibility: CONTACT PROVIDER

www.afcurgentcare.com/chula-vista/

Accepting New Patients: No

(858) 800-2880

(858) 800-2880

SU 8:00AM-6:00PM
M-F 8:00AM-8:00PM
SA 8:00AM-6:00PM

Accessibility: CONTACT PROVIDER

<https://www.afcurgentcare.com/san-diego/>

Accepting New Patients: No

AFC URGENT CARE OF SAN DIEGO*

NPI: 1396058137

8590 RIO SAN DIEGO DR
STE 111
SAN DIEGO, CA 92108

(619) 736-4600

(619) 736-4600

SU 8:00AM-6:00PM
M-F 8:00AM-8:00PM
SA 8:00AM-6:00PM

Accessibility: CONTACT PROVIDER

<https://www.afcurgentcare.com/san-diego/>

Accepting New Patients: No

AFC URGENT CARE OF SAN DIEGO*

NPI: 1396058137

1740 ROSECRANS ST
SAN DIEGO, CA 92106

(619) 790-7800

(619) 790-7800

SU 8:00AM-6:00PM
M-F 8:00AM-8:00PM
SA 8:00AM-6:00PM

Accessibility: CONTACT PROVIDER

<https://www.afcurgentcare.com/san-diego/>

Accepting New Patients: No

AFC URGENT CARE OF SAN DIEGO*

NPI: 1558788620

8260 MIRA MESA BLVD
STE A
SAN DIEGO, CA 92126

(858) 900-3550

(858) 900-3550

SU-SA 8:00AM-8:00PM

Accessibility: CONTACT PROVIDER

<https://www.afcurgentcare.com/san-diego/>

Accepting New Patients: No

AFC URGENT CARE OF SAN DIEGO*

NPI: 1952995466

8260 MIRA MESA BLVD
STE A
SAN DIEGO, CA 92126

(858) 900-3550

(858) 900-3550

SU-SA 8:00AM-8:00PM

Accessibility: CONTACT PROVIDER

<https://www.afcurgentcare.com/san-diego/>

Accepting New Patients: No

AFC URGENT CARE OF SAN DIEGO*

NPI: 1558788620

5671 BALBOA AVE
SAN DIEGO, CA 92111

(858) 800-2880

(858) 800-2880

SU-SA 8:00AM-8:00PM

Accessibility: CONTACT PROVIDER

<https://www.afcurgentcare.com/san-diego/>

Accepting New Patients: No

SAN DIEGO

AFC URGENT CARE OF SAN DIEGO*

NPI: 1396058137

8260 MIRA MESA BLVD
STE A
SAN DIEGO, CA 92126

(858) 900-3550

(858) 900-3550

SU 8:00AM-6:00PM
M-F 8:00AM-8:00PM
SA 8:00AM-6:00PM

Accessibility: CONTACT PROVIDER

<https://www.afcurgentcare.com/san-diego/>

Accepting New Patients: No

AFC URGENT CARE OF SAN DIEGO*

NPI: 1396058137

5671 BALBOA AVE
SAN DIEGO, CA 92111

D9. Centros de atención de urgencia de Blue Shield Promise

AFC URGENT CARE OF SAN DIEGO*

NPI: 1952995466

5671 BALBOA AVE
SAN DIEGO, CA 92111

(858) 800-2880

(858) 800-2880

SU-SA 8:00AM-8:00PM

Accessibility: CONTACT PROVIDER

<https://www.afcurgentcare.com/san-diego/>

Accepting New Patients: No

AFC URGENT CARE OF SAN DIEGO*

NPI: 1558788620

8590 RIO SAN DIEGO DR
STE 111
SAN DIEGO, CA 92108

(619) 736-4600

(619) 736-4600

SU-SA 8:00AM-8:00PM

Accessibility: CONTACT PROVIDER

<https://www.afcurgentcare.com/san-diego/>

Accepting New Patients: No

AFC URGENT CARE OF SAN DIEGO*

NPI: 1558788620

1740 ROSECRANS ST
SAN DIEGO, CA 92106

(619) 790-7800

(619) 790-7800

SU-SA 8:00AM-8:00PM

Accessibility: CONTACT PROVIDER

<https://www.afcurgentcare.com/san-diego/>

Accepting New Patients: No

AFC URGENT CARE OF SAN DIEGO*

NPI: 1952995466

8590 RIO SAN DIEGO DR
STE 111

SAN DIEGO, CA 92108

(619) 736-4600

(619) 736-4600

SU-SA 8:00AM-8:00PM

Accessibility: CONTACT PROVIDER

<https://www.afcurgentcare.com/san-diego/>

Accepting New Patients: No

AFC URGENT CARE OF SAN DIEGO*

NPI: 1952995466

1740 ROSECRANS ST
SAN DIEGO, CA 92106

(619) 790-7800

(619) 790-7800

SU-SA 8:00AM-8:00PM

Accessibility: CONTACT PROVIDER

<https://www.afcurgentcare.com/san-diego/>

Accepting New Patients: No

SANTEE

AFC URGENT CARE OF SAN DIEGO*

NPI: 1396058137

10538 MISSION GORGE RD
STE 100

SANTEE, CA 92071

(619) 456-0033

(619) 456-0033

Site Languages(s) Spoken:
Arabic, Spanish

SU 8:00AM-6:00PM

M-F 8:00AM-8:00PM

SA 8:00AM-6:00PM
Accessibility: CONTACT PROVIDER

<https://www.afcurgentcare.com/san-diego/>

Accepting New Patients: No

CHULA VISTA

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197

386 E H ST STE 202
CHULA VISTA, CA 91910

(858) 966-1720

(858) 966-1720

SU 1:00PM-10:00PM

M-F 4:00PM-10:00PM

SA 1:00PM-10:00PM

Accessibility: CONTACT PROVIDER

N/A

Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197

386 E H ST STE 202
CHULA VISTA, CA 91910

(858) 966-1720

(858) 966-1720

SU 1:00PM-10:00PM

M-F 4:00PM-10:00PM

SA 1:00PM-10:00PM

Accessibility: CONTACT PROVIDER

N/A




Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED

D9. Centros de atención de urgencia de Blue Shield Promise

FNDTN*

NPI: 1669617197






 386 E H ST STE 202
CHULA VISTA, CA 91910
 (858) 966-1720
 (858) 966-1720
 SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
 *Accessibility:* CONTACT PROVIDER

 N/A

Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197



 386 E H ST STE 202
CHULA VISTA, CA 91910
 (858) 966-1720
 (858) 966-1720
 SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
 *Accessibility:* CONTACT PROVIDER

 N/A

Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197



 386 E H ST STE 202
CHULA VISTA, CA 91910
 (858) 966-1720
 (858) 966-1720
 SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
 *Accessibility:* CONTACT PROVIDER

 N/A

Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197




 386 E H ST STE 202
CHULA VISTA, CA 91910
 (858) 966-1720
 (858) 966-1720
 SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
 *Accessibility:* CONTACT PROVIDER

 N/A

Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197




 386 E H ST STE 202
CHULA VISTA, CA 91910
 (858) 966-1720
 (858) 966-1720
 SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
 *Accessibility:* CONTACT PROVIDER


 N/A

Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197

 386 E H ST STE 202
CHULA VISTA, CA 91910
 (858) 966-1720
 (858) 966-1720

 SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM





 *Accessibility:* CONTACT PROVIDER

 N/A

Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197

 386 E H ST STE 202
CHULA VISTA, CA 91910
 (858) 966-1720
 (858) 966-1720
 SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
 *Accessibility:* CONTACT PROVIDER

 N/A

Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197

 386 E H ST STE 202
CHULA VISTA, CA 91910
 (858) 966-1720
 (858) 966-1720
 SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
 *Accessibility:* CONTACT PROVIDER

 N/A


Accepting New Patients: No


RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*


D9. Centros de atención de urgencia de Blue Shield Promise

NPI: 1669617197

 386 E H ST STE 202
CHULA VISTA, CA 91910

 (858) 966-1720

 (858) 966-1720

 SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

 *Accessibility:* CONTACT PROVIDER


 N/A


Accepting New Patients: No


**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN***

NPI: 1669617197

 386 E H ST STE 202
CHULA VISTA, CA 91910

 (858) 966-1720

 (858) 966-1720

 SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

 *Accessibility:* CONTACT PROVIDER


 N/A


Accepting New Patients: No


**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN***

NPI: 1669617197

 386 E H ST STE 202
CHULA VISTA, CA 91910

 (858) 966-1720

 (858) 966-1720

 SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

 *Accessibility:* CONTACT PROVIDER


 N/A


Accepting New Patients: No


**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN***

NPI: 1669617197

 386 E H ST STE 202
CHULA VISTA, CA 91910

 (858) 966-1720

 (858) 966-1720

 SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

 *Accessibility:* CONTACT PROVIDER


 N/A


Accepting New Patients: No


**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN***

NPI: 1669617197

 386 E H ST STE 202
CHULA VISTA, CA 91910

 (858) 966-1720

 (858) 966-1720

 SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

 *Accessibility:* CONTACT PROVIDER


 N/A


Accepting New Patients: No


**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN***


NPI: 1669617197

 386 E H ST STE 202
CHULA VISTA, CA 91910

 (858) 966-1720

 (858) 966-1720

 SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM

SA 1:00PM-10:00PM
 *Accessibility:* CONTACT PROVIDER


 N/A


Accepting New Patients: No


**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN***

NPI: 1669617197

 386 E H ST STE 202
CHULA VISTA, CA 91910

 (858) 966-1720

 (858) 966-1720

 SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

 *Accessibility:* CONTACT PROVIDER


 N/A


Accepting New Patients: No


**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN***

NPI: 1669617197

 386 E H ST STE 202
CHULA VISTA, CA 91910

 (858) 966-1720

 (858) 966-1720

 SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

 *Accessibility:* CONTACT PROVIDER

 N/A

Accepting New Patients: No

**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN***







NPI: 1669617197

 386 E H ST STE 202







D9. Centros de atención de urgencia de Blue Shield Promise

CHULA VISTA, CA 91910
 (858) 966-1720
 (858) 966-1720
 SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No







RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197
 386 E H ST STE 202
CHULA VISTA, CA 91910
 (858) 966-1720
 (858) 966-1720
 SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No







RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197
 386 E H ST STE 202
CHULA VISTA, CA 91910
 (858) 966-1720
 (858) 966-1720
 SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No





RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*



NPI: 1669617197
 386 E H ST STE 202
CHULA VISTA, CA 91910
 (858) 966-1720
 (858) 966-1720
 SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*






NPI: 1669617197
 386 E H ST STE 202
CHULA VISTA, CA 91910
 (858) 966-1720
 (858) 966-1720
 SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*


NPI: 1669617197
 386 E H ST STE 202
CHULA VISTA, CA 91910
 (858) 966-1720
 (858) 966-1720
 SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No


RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197
 386 E H ST STE 202
CHULA VISTA, CA 91910
 (858) 966-1720
 (858) 966-1720
 SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No






RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197
 386 E H ST STE 202
CHULA VISTA, CA 91910
 (858) 966-1720
 (858) 966-1720
 SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197
 386 E H ST STE 202
CHULA VISTA, CA 91910






D9. Centros de atención de urgencia de Blue Shield Promise

 (858) 966-1720
 (858) 966-1720
 SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No

**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN***
NPI: 1669617197







 386 E H ST STE 202
CHULA VISTA, CA 91910
 (858) 966-1720
 (858) 966-1720
 SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No

**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN***
NPI: 1669617197







 386 E H ST STE 202
CHULA VISTA, CA 91910
 (858) 966-1720
 (858) 966-1720
 SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No

ESCONDIDO







**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN***
NPI: 1669617197

 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
 (760) 755-7600
 (760) 755-7600
 M-F 8:00AM-5:00PM
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No

**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN***
NPI: 1669617197






 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
 (760) 755-7600
 (760) 755-7600
 M-F 8:00AM-5:00PM
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No

**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN***
NPI: 1669617197







 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
 (760) 755-7600
 (760) 755-7600
 M-F 8:00AM-5:00PM
 *Accessibility:* CONTACT PROVIDER
 N/A

Accepting New Patients: No






**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN***
NPI: 1669617197

 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
 (760) 755-7600
 (760) 755-7600
 M-F 8:00AM-5:00PM
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No

**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN***
NPI: 1669617197

 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
 (760) 755-7600
 (760) 755-7600
 M-F 8:00AM-5:00PM
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No







**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN***
NPI: 1669617197

 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
 (760) 755-7600
 (760) 755-7600
 M-F 8:00AM-5:00PM
 *Accessibility:* CONTACT PROVIDER







D9. Centros de atención de urgencia de Blue Shield Promise

 PROVIDER
 N/A
Accepting New Patients: No




RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*




NPI: 1669617197
 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
 (760) 755-7600
 (760) 755-7600
 M-F 8:00AM-5:00PM
 *Accessibility:* CONTACT
PROVIDER
 N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*







NPI: 1669617197
 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
 (760) 755-7600
 (760) 755-7600
 M-F 8:00AM-5:00PM
 *Accessibility:* CONTACT
PROVIDER
 N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*







NPI: 1669617197
 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
 (760) 755-7600
 (760) 755-7600

 M-F 8:00AM-5:00PM
 *Accessibility:* CONTACT
PROVIDER
 N/A
Accepting New Patients: No


RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*






NPI: 1669617197
 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
 (760) 755-7600
 (760) 755-7600
 M-F 8:00AM-5:00PM
 *Accessibility:* CONTACT
PROVIDER
 N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*







NPI: 1669617197
 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
 (760) 755-7600
 (760) 755-7600
 M-F 8:00AM-5:00PM
 *Accessibility:* CONTACT
PROVIDER
 N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*







NPI: 1669617197
 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029

 (760) 755-7600
 (760) 755-7600
 M-F 8:00AM-5:00PM
 *Accessibility:* CONTACT
PROVIDER
 N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197
 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
 (760) 755-7600
 (760) 755-7600
 M-F 8:00AM-5:00PM
 *Accessibility:* CONTACT
PROVIDER
 N/A
Accepting New Patients: No






RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197
 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
 (760) 755-7600
 (760) 755-7600
 M-F 8:00AM-5:00PM
 *Accessibility:* CONTACT
PROVIDER
 N/A
Accepting New Patients: No







RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197
 2125 CITRACADO PKWY







D9. Centros de atención de urgencia de Blue Shield Promise

STE 100
ESCONDIDO, CA 92029
 (760) 755-7600
 (760) 755-7600
 M-F 8:00AM-5:00PM
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No







RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197
 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
 (760) 755-7600
 (760) 755-7600
 M-F 8:00AM-5:00PM
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No







RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197
 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
 (760) 755-7600
 (760) 755-7600
 M-F 8:00AM-5:00PM
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No







RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197
 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
 (760) 755-7600
 (760) 755-7600
 M-F 8:00AM-5:00PM
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*







NPI: 1669617197
 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
 (760) 755-7600
 (760) 755-7600
 M-F 8:00AM-5:00PM
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*







NPI: 1669617197
 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
 (760) 755-7600
 (760) 755-7600
 M-F 8:00AM-5:00PM
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No

RADY CHILDRENS







SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197
 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
 (760) 755-7600
 (760) 755-7600
 M-F 8:00AM-5:00PM
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197
 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
 (760) 755-7600
 (760) 755-7600
 M-F 8:00AM-5:00PM
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197
 2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
 (760) 755-7600
 (760) 755-7600
 M-F 8:00AM-5:00PM
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No


D9. Centros de atención de urgencia de Blue Shield Promise


RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197

 2125 CITRACADO PKWY
STE 100

ESCONDIDO, CA 92029

 (760) 755-7600

 (760) 755-7600

 M-F 8:00AM-5:00PM

 *Accessibility:* CONTACT
PROVIDER

 N/A


Accepting New Patients: No


RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197

 2125 CITRACADO PKWY
STE 100

ESCONDIDO, CA 92029

 (760) 755-7600

 (760) 755-7600

 M-F 8:00AM-5:00PM

 *Accessibility:* CONTACT
PROVIDER

 N/A


Accepting New Patients: No


RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197

 2125 CITRACADO PKWY
STE 100

ESCONDIDO, CA 92029

 (760) 755-7600

 (760) 755-7600

 M-F 8:00AM-5:00PM

 *Accessibility:* CONTACT
PROVIDER

 N/A


Accepting New Patients: No


RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197

 2125 CITRACADO PKWY
STE 100

ESCONDIDO, CA 92029

 (760) 755-7600

 (760) 755-7600

 M-F 8:00AM-5:00PM

 *Accessibility:* CONTACT
PROVIDER

 N/A


Accepting New Patients: No


RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197

 2125 CITRACADO PKWY
STE 100

ESCONDIDO, CA 92029

 (760) 755-7600

 (760) 755-7600

 M-F 8:00AM-5:00PM

 *Accessibility:* CONTACT
PROVIDER

 N/A


Accepting New Patients: No


RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197

 2125 CITRACADO PKWY
STE 100

ESCONDIDO, CA 92029

 (760) 755-7600

 (760) 755-7600

 M-F 8:00AM-5:00PM

 *Accessibility:* CONTACT
PROVIDER

 N/A


Accepting New Patients: No


RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197

 2125 CITRACADO PKWY
STE 200

ESCONDIDO, CA 92029

 (760) 294-9270

 (760) 294-9270

 M-F 8:00AM-5:00PM

 *Accessibility:* CONTACT
PROVIDER

 N/A

Accepting New Patients: No


LA MESA


RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197

 5565 GROSSMONT
CENTER DR STE 2

LA MESA, CA 91942

 (619) 713-5375

 (619) 713-5375

 *Accessibility:* CONTACT
PROVIDER

 N/A

Accepting New Patients: No





RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197

 5565 GROSSMONT
CENTER DR STE 2

LA MESA, CA 91942




D9. Centros de atención de urgencia de Blue Shield Promise

 (619) 713-5375
 (619) 713-5375
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No



RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*




NPI: 1669617197
 5565 GROSSMONT
CENTER DR STE 2
LA MESA, CA 91942
 (619) 713-5375
 (619) 713-5375
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197
 5565 GROSSMONT
CENTER DR STE 2
LA MESA, CA 91942
 (619) 713-5375
 (619) 713-5375
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*





NPI: 1669617197
 5565 GROSSMONT
CENTER DR STE 2
LA MESA, CA 91942
 (619) 713-5375

 (619) 713-5375
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No




RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*



NPI: 1669617197
 5565 GROSSMONT
CENTER DR STE 2
LA MESA, CA 91942
 (619) 713-5375
 (619) 713-5375
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197
 5565 GROSSMONT
CENTER DR STE 2
LA MESA, CA 91942
 (619) 713-5375
 (619) 713-5375
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*


NPI: 1669617197
 5565 GROSSMONT
CENTER DR STE 2
LA MESA, CA 91942
 (619) 713-5375
 (619) 713-5375

 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197
 5565 GROSSMONT
CENTER DR STE 2
LA MESA, CA 91942
 (619) 713-5375
 (619) 713-5375
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197
 5565 GROSSMONT
CENTER DR STE 2
LA MESA, CA 91942
 (619) 713-5375
 (619) 713-5375
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197
 5565 GROSSMONT
CENTER DR STE 2
LA MESA, CA 91942
 (619) 713-5375
 (619) 713-5375
 *Accessibility:* CONTACT




D9. Centros de atención de urgencia de Blue Shield Promise

 PROVIDER
 N/A
Accepting New Patients: No




RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197
 5565 GROSSMONT
CENTER DR STE 2
LA MESA, CA 91942
 (619) 713-5375
 (619) 713-5375
 *Accessibility:* CONTACT
PROVIDER
 N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*






NPI: 1669617197
 5565 GROSSMONT
CENTER DR STE 2
LA MESA, CA 91942
 (619) 713-5375
 (619) 713-5375
 *Accessibility:* CONTACT
PROVIDER
 N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*


NPI: 1669617197
 5565 GROSSMONT
CENTER DR STE 2
LA MESA, CA 91942
 (619) 713-5375
 (619) 713-5375
 *Accessibility:* CONTACT
PROVIDER

 N/A
Accepting New Patients: No





RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197
 5565 GROSSMONT
CENTER DR STE 2
LA MESA, CA 91942
 (619) 713-5375
 (619) 713-5375
 *Accessibility:* CONTACT
PROVIDER
 N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197
 5565 GROSSMONT
CENTER DR STE 2
LA MESA, CA 91942
 (619) 713-5375
 (619) 713-5375
 *Accessibility:* CONTACT
PROVIDER
 N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*


NPI: 1669617197
 5565 GROSSMONT
CENTER DR STE 2
LA MESA, CA 91942
 (619) 713-5375
 (619) 713-5375
 *Accessibility:* CONTACT
PROVIDER
 N/A

Accepting New Patients: No



RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197
 5565 GROSSMONT
CENTER DR STE 2
LA MESA, CA 91942
 (619) 713-5375
 (619) 713-5375
 *Accessibility:* CONTACT
PROVIDER
 N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197
 5565 GROSSMONT
CENTER DR STE 2
LA MESA, CA 91942
 (619) 713-5375
 (619) 713-5375
 *Accessibility:* CONTACT
PROVIDER
 N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*


NPI: 1669617197
 5565 GROSSMONT
CENTER DR STE 2
LA MESA, CA 91942
 (619) 713-5375
 (619) 713-5375
 *Accessibility:* CONTACT
PROVIDER
 N/A
Accepting New Patients: No


D9. Centros de atención de urgencia de Blue Shield Promise

**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN***

NPI: 1669617197

 5565 GROSSMONT
CENTER DR STE 2
LA MESA, CA 91942

 (619) 713-5375

 (619) 713-5375

 *Accessibility:* CONTACT
PROVIDER


 N/A


Accepting New Patients: No

**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN***

NPI: 1669617197

 5565 GROSSMONT
CENTER DR STE 2
LA MESA, CA 91942

 (619) 713-5375

 (619) 713-5375

 *Accessibility:* CONTACT
PROVIDER


 N/A


Accepting New Patients: No

**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN***

NPI: 1669617197

 5565 GROSSMONT
CENTER DR STE 2
LA MESA, CA 91942

 (619) 713-5375

 (619) 713-5375

 *Accessibility:* CONTACT
PROVIDER


 N/A


Accepting New Patients: No

**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN***

NPI: 1669617197

 5565 GROSSMONT
CENTER DR STE 2
LA MESA, CA 91942

 (619) 713-5375

 (619) 713-5375

 *Accessibility:* CONTACT
PROVIDER


 N/A


Accepting New Patients: No

**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN***

NPI: 1669617197

 5565 GROSSMONT
CENTER DR STE 2
LA MESA, CA 91942

 (619) 713-5375

 (619) 713-5375

 *Accessibility:* CONTACT
PROVIDER


 N/A


Accepting New Patients: No

**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN***

NPI: 1669617197

 5565 GROSSMONT
CENTER DR STE 2
LA MESA, CA 91942

 (619) 713-5375

 (619) 713-5375

 *Accessibility:* CONTACT
PROVIDER

 N/A


Accepting New Patients: No


RADY CHILDRENS

**SPECIALISTS SAN DIEGO MED
FNDTN***

NPI: 1669617197

 5565 GROSSMONT
CENTER DR STE 2
LA MESA, CA 91942

 (619) 713-5375

 (619) 713-5375

 *Accessibility:* CONTACT
PROVIDER


 N/A


Accepting New Patients: No

**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN***

NPI: 1669617197

 5565 GROSSMONT
CENTER DR STE 2
LA MESA, CA 91942

 (619) 713-5375

 (619) 713-5375

 *Accessibility:* CONTACT
PROVIDER


 N/A


Accepting New Patients: No

**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN***

NPI: 1669617197

 5565 GROSSMONT
CENTER DR STE 2
LA MESA, CA 91942

 (619) 713-5375

 (619) 713-5375

 *Accessibility:* CONTACT
PROVIDER

 N/A






Accepting New Patients: No

**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED**

D9. Centros de atención de urgencia de Blue Shield Promise

FNDTN*

NPI: 1669617197

 5565 GROSSMONT CENTER DR STE 2 LA MESA, CA 91942
 (619) 713-5375
 (619) 713-5375
 *Accessibility:* CONTACT PROVIDER
 N/A






Accepting New Patients: No

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED

FNDTN*

NPI: 1669617197

 5565 GROSSMONT CENTER DR STE 2 LA MESA, CA 91942
 (619) 713-5375
 (619) 713-5375
 *Accessibility:* CONTACT PROVIDER
 N/A






Accepting New Patients: No

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED

FNDTN*

NPI: 1669617197

 5565 GROSSMONT CENTER DR STE 2 LA MESA, CA 91942
 (619) 713-5375
 (619) 713-5375
 *Accessibility:* CONTACT PROVIDER
 N/A






Accepting New Patients: No

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED

FNDTN*

NPI: 1669617197

 5565 GROSSMONT CENTER DR STE 2 LA MESA, CA 91942
 (619) 713-5375
 (619) 713-5375
 *Accessibility:* CONTACT PROVIDER
 N/A


Accepting New Patients: No

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED

FNDTN*

NPI: 1669617197

 5565 GROSSMONT CENTER DR STE 2 LA MESA, CA 91942
 (619) 713-5375
 (619) 713-5375
 *Accessibility:* CONTACT PROVIDER
 N/A

Accepting New Patients: No

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED

FNDTN*

NPI: 1669617197

 5565 GROSSMONT CENTER DR STE 2 LA MESA, CA 91942
 (619) 713-5375
 (619) 713-5375
 *Accessibility:* CONTACT PROVIDER
 N/A



Accepting New Patients: No

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED

FNDTN*

NPI: 1669617197





 5565 GROSSMONT CENTER DR STE 2 LA MESA, CA 91942
 (619) 713-5375
 (619) 713-5375
 *Accessibility:* CONTACT PROVIDER
 N/A
 Accepting New Patients: No

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED

FNDTN*

NPI: 1669617197

 5565 GROSSMONT CENTER DR STE 2 LA MESA, CA 91942
 (619) 713-5375
 (619) 713-5375
 *Accessibility:* CONTACT PROVIDER
 N/A


Accepting New Patients: No

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED

FNDTN*

NPI: 1669617197

 5565 GROSSMONT CENTER DR STE 2 LA MESA, CA 91942
 (619) 713-5375
 (619) 713-5375
 *Accessibility:* CONTACT PROVIDER
 N/A

Accepting New Patients: No

RADY CHILDRENS





SPECIALISTS SAN DIEGO MED

FNDTN*

NPI: 1669617197


 5565 GROSSMONT





D9. Centros de atención de urgencia de Blue Shield Promise

CENTER DR STE 2
LA MESA, CA 91942
 (619) 713-5375
 (619) 713-5375
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No

**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN***
NPI: 1669617197
 5565 GROSSMONT
CENTER DR STE 2
LA MESA, CA 91942
 (619) 713-5375
 (619) 713-5375
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No


**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN***
NPI: 1669617197
 5565 GROSSMONT
CENTER DR STE 2
LA MESA, CA 91942
 (619) 713-5375
 (619) 713-5375
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No

**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN***
NPI: 1669617197
 5565 GROSSMONT
CENTER DR STE 2


LA MESA, CA 91942
 (619) 713-5375
 (619) 713-5375
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No




**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN***
NPI: 1669617197
 5565 GROSSMONT
CENTER DR STE 2
LA MESA, CA 91942
 (619) 713-5375
 (619) 713-5375
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No



**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN***
NPI: 1669617197
 5565 GROSSMONT
CENTER DR STE 2
LA MESA, CA 91942
 (619) 713-5375
 (619) 713-5375
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No

**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN***
NPI: 1669617197
 5565 GROSSMONT
CENTER DR STE 2
LA MESA, CA 91942




 (619) 713-5375
 (619) 713-5375
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No

**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN***
NPI: 1669617197
 5565 GROSSMONT
CENTER DR STE 2
LA MESA, CA 91942
 (619) 713-5375
 (619) 713-5375
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No

**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN***
NPI: 1669617197
 5565 GROSSMONT
CENTER DR STE 2
LA MESA, CA 91942
 (619) 713-5375
 (619) 713-5375
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No

**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN***
NPI: 1669617197
 5565 GROSSMONT
CENTER DR STE 2
LA MESA, CA 91942
 (619) 713-5375





D9. Centros de atención de urgencia de Blue Shield Promise

 (619) 713-5375
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No




RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*



NPI: 1669617197
 5565 GROSSMONT
CENTER DR STE 2
LA MESA, CA 91942
 (619) 713-5375
 (619) 713-5375
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197
 5565 GROSSMONT
CENTER DR STE 2
LA MESA, CA 91942
 (619) 713-5375
 (619) 713-5375
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*


NPI: 1669617197
 5565 GROSSMONT
CENTER DR STE 2
LA MESA, CA 91942
 (619) 713-5375
 (619) 713-5375

 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No


RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197
 5565 GROSSMONT
CENTER DR STE 2
LA MESA, CA 91942
 (619) 713-5375
 (619) 713-5375
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197
 5565 GROSSMONT
CENTER DR STE 2
LA MESA, CA 91942
 (619) 713-5375
 (619) 713-5375
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*





NPI: 1669617197
 5565 GROSSMONT
CENTER DR STE 2
LA MESA, CA 91942
 (619) 713-5375
 (619) 713-5375
 *Accessibility:* CONTACT

PROVIDER
 N/A
Accepting New Patients: No





RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197
 5565 GROSSMONT
CENTER DR STE 2
LA MESA, CA 91942
 (619) 713-5375
 (619) 713-5375
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197
 5565 GROSSMONT
CENTER DR STE 2
LA MESA, CA 91942
 (619) 713-5375
 (619) 713-5375
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No



RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197
 5565 GROSSMONT
CENTER DR STE 2
LA MESA, CA 91942
 (619) 713-5375
 (619) 713-5375
 *Accessibility:* CONTACT PROVIDER

D9. Centros de atención de urgencia de Blue Shield Promise






 N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*






NPI: 1669617197
 5565 GROSSMONT
CENTER DR STE 2
LA MESA, CA 91942
 (619) 713-5375
 (619) 713-5375
 *Accessibility:* CONTACT
PROVIDER
 N/A
Accepting New Patients: No

OCEANSIDE

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*






NPI: 1669617197
 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
 (760) 547-1020
 (760) 547-1020
 *Accessibility:* CONTACT
PROVIDER
 N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*






NPI: 1669617197
 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
 (760) 547-1020
 (760) 547-1020
 *Accessibility:* CONTACT
PROVIDER
 N/A

Accepting New Patients: No






RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197
 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
 (760) 547-1020
 (760) 547-1020
 *Accessibility:* CONTACT
PROVIDER
 N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*






NPI: 1669617197
 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
 (760) 547-1020
 (760) 547-1020
 *Accessibility:* CONTACT
PROVIDER
 N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*






NPI: 1669617197
 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
 (760) 547-1020
 (760) 547-1020
 *Accessibility:* CONTACT
PROVIDER
 N/A
Accepting New Patients: No

RADY CHILDRENS






SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197
 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
 (760) 547-1020
 (760) 547-1020
 *Accessibility:* CONTACT
PROVIDER
 N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197
 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
 (760) 547-1020
 (760) 547-1020
 *Accessibility:* CONTACT
PROVIDER
 N/A
Accepting New Patients: No






RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197
 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
 (760) 547-1020
 (760) 547-1020
 *Accessibility:* CONTACT
PROVIDER
 N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*






NPI: 1669617197

D9. Centros de atención de urgencia de Blue Shield Promise

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
 (760) 547-1020
 (760) 547-1020
 *Accessibility:* CONTACT
PROVIDER
 N/A
Accepting New Patients: No






RADY CHILDRENS SPECIALISTS SAN DIEGO MED FN D TN*

NPI: 1669617197

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
 (760) 547-1020
 (760) 547-1020
 *Accessibility:* CONTACT
PROVIDER
 N/A
Accepting New Patients: No




RADY CHILDRENS SPECIALISTS SAN DIEGO MED FN D TN*



NPI: 1669617197

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
 (760) 547-1020
 (760) 547-1020
 *Accessibility:* CONTACT
PROVIDER
 N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FN D TN*






NPI: 1669617197

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
 (760) 547-1020
 (760) 547-1020

 *Accessibility:* CONTACT
PROVIDER
 N/A
Accepting New Patients: No






RADY CHILDRENS SPECIALISTS SAN DIEGO MED FN D TN*

NPI: 1669617197

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
 (760) 547-1020
 (760) 547-1020
 *Accessibility:* CONTACT
PROVIDER
 N/A
Accepting New Patients: No






RADY CHILDRENS SPECIALISTS SAN DIEGO MED FN D TN*

NPI: 1669617197

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
 (760) 547-1020
 (760) 547-1020
 *Accessibility:* CONTACT
PROVIDER
 N/A
Accepting New Patients: No






RADY CHILDRENS SPECIALISTS SAN DIEGO MED FN D TN*

NPI: 1669617197

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
 (760) 547-1020
 (760) 547-1020
 *Accessibility:* CONTACT
PROVIDER
 N/A
Accepting New Patients: No






RADY CHILDRENS SPECIALISTS SAN DIEGO MED FN D TN*

NPI: 1669617197

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
 (760) 547-1020
 (760) 547-1020
 *Accessibility:* CONTACT
PROVIDER
 N/A
Accepting New Patients: No






RADY CHILDRENS SPECIALISTS SAN DIEGO MED FN D TN*

NPI: 1669617197

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
 (760) 547-1020
 (760) 547-1020
 *Accessibility:* CONTACT
PROVIDER
 N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FN D TN*

NPI: 1669617197

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
 (760) 547-1020
 (760) 547-1020
 *Accessibility:* CONTACT
PROVIDER
 N/A
Accepting New Patients: No


RADY CHILDRENS SPECIALISTS SAN DIEGO MED


D9. Centros de atención de urgencia de Blue Shield Promise

FNDTN*

NPI: 1669617197

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

 (760) 547-1020

 (760) 547-1020

 *Accessibility:* CONTACT
PROVIDER

 N/A

Accepting New Patients: No


RADY CHILDRENS


SPECIALISTS SAN DIEGO MED


FNDTN*

NPI: 1669617197

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

 (760) 547-1020

 (760) 547-1020

 *Accessibility:* CONTACT
PROVIDER

 N/A

Accepting New Patients: No


RADY CHILDRENS


SPECIALISTS SAN DIEGO MED


FNDTN*

NPI: 1669617197

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

 (760) 547-1020

 (760) 547-1020

 *Accessibility:* CONTACT
PROVIDER

 N/A

Accepting New Patients: No

RADY CHILDRENS


SPECIALISTS SAN DIEGO MED


FNDTN*

NPI: 1669617197

 3605 VISTA WAY STE 172

OCEANSIDE, CA 92056

 (760) 547-1020

 (760) 547-1020

 *Accessibility:* CONTACT
PROVIDER

 N/A

Accepting New Patients: No


RADY CHILDRENS


SPECIALISTS SAN DIEGO MED

FNDTN*

NPI: 1669617197

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

 (760) 547-1020

 (760) 547-1020

 *Accessibility:* CONTACT
PROVIDER

 N/A

Accepting New Patients: No


RADY CHILDRENS


SPECIALISTS SAN DIEGO MED

FNDTN*

NPI: 1669617197

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

 (760) 547-1020

 (760) 547-1020

 *Accessibility:* CONTACT
PROVIDER

 N/A

Accepting New Patients: No


RADY CHILDRENS


SPECIALISTS SAN DIEGO MED

FNDTN*

NPI: 1669617197

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

 (760) 547-1020

 (760) 547-1020

 *Accessibility:* CONTACT

PROVIDER

 N/A

Accepting New Patients: No


RADY CHILDRENS


SPECIALISTS SAN DIEGO MED

FNDTN*

NPI: 1669617197

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

 (760) 547-1020

 (760) 547-1020

 *Accessibility:* CONTACT
PROVIDER

 N/A

Accepting New Patients: No


RADY CHILDRENS


SPECIALISTS SAN DIEGO MED

FNDTN*

NPI: 1669617197

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

 (760) 547-1020

 (760) 547-1020

 *Accessibility:* CONTACT
PROVIDER

 N/A

Accepting New Patients: No


RADY CHILDRENS


SPECIALISTS SAN DIEGO MED


FNDTN*

NPI: 1669617197

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

 (760) 547-1020

 (760) 547-1020

 *Accessibility:* CONTACT
PROVIDER

 N/A


Accepting New Patients: No


D9. Centros de atención de urgencia de Blue Shield Promise

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197

 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

 (760) 547-1020

 (760) 547-1020

 *Accessibility:* CONTACT
PROVIDER


 N/A


Accepting New Patients: No


SAN DIEGO

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197

 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105

 (619) 280-2905

 (619) 280-2905


 *Accessibility:* CONTACT
PROVIDER


 N/A


Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197

 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105

 (619) 280-2905

 (619) 280-2905

 *Accessibility:* CONTACT
PROVIDER

 N/A


Accepting New Patients: No


RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197

 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

 (619) 280-2905

 (619) 280-2905


 *Accessibility:* CONTACT
PROVIDER


 N/A


Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197

 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105

 (619) 280-2905

 (619) 280-2905


 *Accessibility:* CONTACT
PROVIDER


 N/A


Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197

 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105

 (619) 280-2905

 (619) 280-2905

 *Accessibility:* CONTACT
PROVIDER


 N/A


Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197

 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105

 (619) 280-2905

 (619) 280-2905


 *Accessibility:* CONTACT
PROVIDER


 N/A


Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197

 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105

 (619) 280-2905

 (619) 280-2905


 *Accessibility:* CONTACT
PROVIDER


 N/A


Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197

 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105

 (619) 280-2905

 (619) 280-2905

 *Accessibility:* CONTACT
PROVIDER

 N/A

Accepting New Patients: No

RADY CHILDRENS

D9. Centros de atención de urgencia de Blue Shield Promise


SPECIALISTS SAN DIEGO MED


FNDTN*

NPI: 1669617197

 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

 (619) 280-2905

 (619) 280-2905

 *Accessibility:* CONTACT
PROVIDER

 N/A

Accepting New Patients: No

RADY CHILDRENS


SPECIALISTS SAN DIEGO MED


FNDTN*

NPI: 1669617197

 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

 (619) 280-2905

 (619) 280-2905

 *Accessibility:* CONTACT
PROVIDER

 N/A

Accepting New Patients: No

RADY CHILDRENS


SPECIALISTS SAN DIEGO MED


FNDTN*

NPI: 1669617197

 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

 (619) 280-2905

 (619) 280-2905

 *Accessibility:* CONTACT
PROVIDER

 N/A

Accepting New Patients: No

RADY CHILDRENS


SPECIALISTS SAN DIEGO MED


FNDTN*

NPI: 1669617197

 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

 (619) 280-2905

 (619) 280-2905

 *Accessibility:* CONTACT
PROVIDER

 N/A

Accepting New Patients: No


RADY CHILDRENS


SPECIALISTS SAN DIEGO MED

FNDTN*

NPI: 1669617197

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 (858) 966-8800

 (858) 966-8800

 *Accessibility:* CONTACT
PROVIDER

 N/A

Accepting New Patients: No


RADY CHILDRENS


SPECIALISTS SAN DIEGO MED

FNDTN*

NPI: 1669617197

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 (858) 966-8800

 (858) 966-8800

 *Accessibility:* CONTACT
PROVIDER

 N/A

Accepting New Patients: No


RADY CHILDRENS


SPECIALISTS SAN DIEGO MED

FNDTN*

NPI: 1669617197

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 (858) 966-8800

 (858) 966-8800

 *Accessibility:* CONTACT
PROVIDER

 N/A

Accepting New Patients: No


RADY CHILDRENS


SPECIALISTS SAN DIEGO MED


FNDTN*

NPI: 1669617197

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 (858) 966-8800

 (858) 966-8800

 *Accessibility:* CONTACT
PROVIDER

 N/A

Accepting New Patients: No


RADY CHILDRENS


SPECIALISTS SAN DIEGO MED


FNDTN*

NPI: 1669617197

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 (858) 966-8800

 (858) 966-8800

 *Accessibility:* CONTACT
PROVIDER

 N/A

Accepting New Patients: No


RADY CHILDRENS


SPECIALISTS SAN DIEGO MED

FNDTN*



NPI: 1669617197

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123






 (858) 966-8800

 (858) 966-8800






D9. Centros de atención de urgencia de Blue Shield Promise

 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No






RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 (858) 966-8800
 (858) 966-8800
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No






RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 (858) 966-8800
 (858) 966-8800
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No




RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 (858) 966-8800
 (858) 966-8800
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No





RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 (858) 966-8800
 (858) 966-8800
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197
 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
 (619) 280-2905
 (619) 280-2905
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197
 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
 (619) 280-2905
 (619) 280-2905
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197
 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
 (619) 280-2905
 (619) 280-2905
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197
 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
 (619) 280-2905
 (619) 280-2905
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*

NPI: 1669617197
 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
 (619) 280-2905
 (619) 280-2905
 *Accessibility:* CONTACT PROVIDER
 N/A
Accepting New Patients: No

RADY CHILDRENS

D9. Centros de atención de urgencia de Blue Shield Promise


SPECIALISTS SAN DIEGO MED


FNDTN*

NPI: 1669617197

 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

 (619) 280-2905

 (619) 280-2905

 *Accessibility:* CONTACT
PROVIDER

 N/A

Accepting New Patients: No

RADY CHILDRENS


SPECIALISTS SAN DIEGO MED


FNDTN*

NPI: 1669617197

 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

 (619) 280-2905

 (619) 280-2905

 *Accessibility:* CONTACT
PROVIDER

 N/A

Accepting New Patients: No

RADY CHILDRENS


SPECIALISTS SAN DIEGO MED


FNDTN*

NPI: 1669617197

 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

 (619) 280-2905

 (619) 280-2905

 *Accessibility:* CONTACT
PROVIDER

 N/A


Accepting New Patients: No

RADY CHILDRENS


SPECIALISTS SAN DIEGO MED


FNDTN*

NPI: 1669617197

 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

 (619) 280-2905

 (619) 280-2905

 *Accessibility:* CONTACT
PROVIDER

 N/A

Accepting New Patients: No

RADY CHILDRENS


SPECIALISTS SAN DIEGO MED


FNDTN*

NPI: 1669617197

 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

 (619) 280-2905

 (619) 280-2905

 *Accessibility:* CONTACT
PROVIDER

 N/A

Accepting New Patients: No

RADY CHILDRENS


SPECIALISTS SAN DIEGO MED


FNDTN*

NPI: 1669617197

 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

 (619) 280-2905

 (619) 280-2905

 *Accessibility:* CONTACT
PROVIDER

 N/A

Accepting New Patients: No

RADY CHILDRENS


SPECIALISTS SAN DIEGO MED


FNDTN*

NPI: 1669617197

 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

 (619) 280-2905

 (619) 280-2905

 *Accessibility:* CONTACT
PROVIDER

 N/A

Accepting New Patients: No

RADY CHILDRENS


SPECIALISTS SAN DIEGO MED


FNDTN*

NPI: 1669617197

 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

 (619) 280-2905

 (619) 280-2905

 *Accessibility:* CONTACT
PROVIDER

 N/A

Accepting New Patients: No

RADY CHILDRENS


SPECIALISTS SAN DIEGO MED


FNDTN*

NPI: 1669617197

 4305 UNIVERSITY AVE STE
150

SAN DIEGO, CA 92105

 (619) 280-2905

 (619) 280-2905

 *Accessibility:* CONTACT
PROVIDER

 N/A

Accepting New Patients: No

RADY CHILDRENS

SPECIALISTS SAN DIEGO MED

FNDTN*

NPI: 1669617197

D9. Centros de atención de urgencia de Blue Shield Promise

 4305 UNIVERSITY AVE STE
 150
 SAN DIEGO, CA 92105
 (619) 280-2905
 (619) 280-2905
 *Accessibility:* CONTACT
 PROVIDER
 N/A
 Accepting New Patients: No

**RADY CHILDRENS
 SPECIALISTS SAN DIEGO MED
 FNDTN***
NPI: 1669617197





 4305 UNIVERSITY AVE STE
 150
 SAN DIEGO, CA 92105
 (619) 280-2905
 (619) 280-2905
 *Accessibility:* CONTACT
 PROVIDER
 N/A
 Accepting New Patients: No

**RADY CHILDRENS
 SPECIALISTS SAN DIEGO MED
 FNDTN***
NPI: 1669617197






 4305 UNIVERSITY AVE STE
 150
 SAN DIEGO, CA 92105
 (619) 280-2905
 (619) 280-2905
 *Accessibility:* CONTACT
 PROVIDER
 N/A
 Accepting New Patients: No

**RADY CHILDRENS
 SPECIALISTS SAN DIEGO MED
 FNDTN***
NPI: 1669617197






 3020 CHILDRENS WAY

SAN DIEGO, CA 92123
 (858) 966-8800
 (858) 966-8800
 *Accessibility:* CONTACT
 PROVIDER
 N/A
 Accepting New Patients: No





**RADY CHILDRENS
 SPECIALISTS SAN DIEGO MED
 FNDTN***
NPI: 1669617197

 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123
 (858) 966-8800
 (858) 966-8800
 *Accessibility:* CONTACT
 PROVIDER
 N/A
 Accepting New Patients: No

**RADY CHILDRENS
 SPECIALISTS SAN DIEGO MED
 FNDTN***
NPI: 1669617197






 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123
 (858) 966-8800
 (858) 966-8800
 *Accessibility:* CONTACT
 PROVIDER
 N/A
 Accepting New Patients: No

**RADY CHILDRENS
 SPECIALISTS SAN DIEGO MED
 FNDTN***
NPI: 1669617197






 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123
 (858) 966-8800
 (858) 966-8800
 *Accessibility:* CONTACT

PROVIDER
 N/A
 Accepting New Patients: No






**RADY CHILDRENS
 SPECIALISTS SAN DIEGO MED
 FNDTN***
NPI: 1669617197

 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123
 (858) 966-8800
 (858) 966-8800
 *Accessibility:* CONTACT
 PROVIDER
 N/A
 Accepting New Patients: No

**RADY CHILDRENS
 SPECIALISTS SAN DIEGO MED
 FNDTN***
NPI: 1669617197

 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123
 (858) 966-8800
 (858) 966-8800
 *Accessibility:* CONTACT
 PROVIDER
 N/A
 Accepting New Patients: No

**RADY CHILDRENS
 SPECIALISTS SAN DIEGO MED
 FNDTN***
NPI: 1669617197


 3020 CHILDRENS WAY
 SAN DIEGO, CA 92123
 (858) 966-8800
 (858) 966-8800
 *Accessibility:* CONTACT
 PROVIDER
 N/A
 Accepting New Patients: No


D9. Centros de atención de urgencia de Blue Shield Promise

**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN***

NPI: 1669617197

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 (858) 966-8800

 (858) 966-8800

 *Accessibility:* CONTACT
PROVIDER


 N/A


Accepting New Patients: No

**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN***

NPI: 1669617197

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 (858) 966-8800

 (858) 966-8800

 *Accessibility:* CONTACT
PROVIDER


 N/A


Accepting New Patients: No


**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN***

NPI: 1669617197

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 (858) 966-8800

 (858) 966-8800

 *Accessibility:* CONTACT
PROVIDER

 N/A


Accepting New Patients: No


**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED**

FNDTN*

NPI: 1669617197

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 (858) 966-8800

 (858) 966-8800

 *Accessibility:* CONTACT
PROVIDER


 N/A


Accepting New Patients: No

**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN***

NPI: 1669617197

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 (858) 966-8800

 (858) 966-8800

 *Accessibility:* CONTACT
PROVIDER


 N/A


Accepting New Patients: No


**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN***

NPI: 1669617197

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 (858) 966-8800

 (858) 966-8800

 *Accessibility:* CONTACT
PROVIDER

 N/A


Accepting New Patients: No


**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN***

NPI: 1669617197

 3020 CHILDRENS WAY

SAN DIEGO, CA 92123

 (858) 966-8800

 (858) 966-8800

 *Accessibility:* CONTACT
PROVIDER


 N/A


Accepting New Patients: No

**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN***

NPI: 1669617197

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 (858) 966-8800

 (858) 966-8800

 *Accessibility:* CONTACT
PROVIDER


 N/A


Accepting New Patients: No

**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN***

NPI: 1669617197

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123

 (858) 966-8800

 (858) 966-8800

 *Accessibility:* CONTACT
PROVIDER


 N/A


Accepting New Patients: No

**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDTN***

NPI: 1669617197

 3020 CHILDRENS WAY
SAN DIEGO, CA 92123





 (858) 966-8800




 (858) 966-8800

 *Accessibility:* CONTACT







D9. Centros de atención de urgencia de Blue Shield Promise








PROVIDER
 N/A
Accepting New Patients: No

**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDDTN***
NPI: 1669617197
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 (858) 966-8800
 (858) 966-8800
 *Accessibility: CONTACT
PROVIDER*
 N/A
Accepting New Patients: No

**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDDTN***
NPI: 1669617197
 3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 (858) 966-8800
 (858) 966-8800
 *Accessibility: CONTACT
PROVIDER*
 N/A
Accepting New Patients: No

**RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDDTN***
NPI: 1669617197
 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
 (619) 280-2905
 (619) 280-2905
 *Accessibility: CONTACT
PROVIDER*
 N/A
Accepting New Patients: No

RCH MID CITY URGENT CARE*
NPI: 1710065933
 4305 UNIVERSITY AVE STE
150
SAN DIEGO, CA 92105
 (619) 280-2905
 (619) 280-2905
 SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
 *Accessibility: CONTACT
PROVIDER*
 N/A
Accepting New Patients: No

**SOUTHBAY URGENT CARE
INC***
NPI: 1558746750
 1628 PALM AVE
SAN DIEGO, CA 92154
 (619) 591-9999
 (619) 591-9999
 Site Languages(s) Spoken:
Spanish, Vietnamese
 SU 10:00AM-6:00PM
M-F 9:00AM-8:00PM
SA 10:00AM-6:00PM
 *Accessibility: CONTACT
PROVIDER*
 [https://www.southbayurgen
tcare.com/](https://www.southbayurgentcare.com/)
Accepting New Patients: No

Proveedores de servicios de acupuntura de Blue Shield Promise

Hills, Mary

Female

License #: AC17253

NPI#: 1427596998

2271 Alpine Blvd Ste E

Alpine, CA 91901

(619)517 7478

SU -

M -

TU -

W 9:00-6:00

TH 9:00-6:00

F 9:00-5:00

SA 9:00-3:00

Accessibility: CONTACT PROVIDER

Accepting New Patients: Yes

Laffen, Julie

Female

License #: AC12657

NPI#: 1629255021

4392 Bonita Rd

Bonita, CA 91902

(619)663 9417

SU 10:00-5:00

M -

TU -

W -

TH -

F -

SA 10:00-5:00

Accessibility: CONTACT PROVIDER

Accepting New Patients: Yes

Piao, Zhouyong

Male

License #: AC17774

NPI#: 1528562923

5030 Bonita Rd Ste B

Bonita, CA 91902

(619)479 7473

SU -

M 8:00-1:00

TU 8:00-1:00

W 8:00-3:00

TH 8:00-1:00

F 8:00-1:00

SA 8:00-1:00

Accessibility: CONTACT PROVIDER

Accepting New Patients: Yes

Kim, Min Joong

Male

License #: AC19242

NPI#: 1972273555

4514 Bonita Rd

Bonita, CA 91902

(619)470 4714

SU -

M 9:00-6:00

TU 9:00-6:00

W 9:00-6:00

TH 9:00-6:00

F 9:00-6:00

SA 9:00-4:00

Accessibility: CONTACT PROVIDER

Accepting New Patients: Yes

Lopez, Arianna

Female

License #: AC19453

NPI#: 1588385264

4514 Bonita Rd

Bonita, CA 91902

(619)470 4714

SU -

M 8:00-8:00

TU 8:00-8:00

W 8:00-8:00

TH 8:00-8:00

F 8:00-8:00

SA 9:00-2:00

Accessibility: CONTACT PROVIDER

Accepting New Patients: Yes

Vallarta, Barbara

Female

License #: AC16535

NPI#: 1942689278

4514 Bonita Rd

Bonita, CA 91902

(619)470 4714

SU -

M 9:00-6:00

TU 9:00-6:00

W 9:00-6:00

TH 9:00-6:00

F 9:00-6:00

SA 10:00-4:00

Accessibility: CONTACT PROVIDER

Accepting New Patients: Yes

Zhao, Chutima

Female

License #: 18190*NPI#:* 1730853193

4514 Bonita Rd
Bonita, CA 91902
(619)470 4714
SU -
M 8:00-5:00
TU 8:00-5:00
W 8:00-5:00
TH 8:00-5:00
F 8:00-5:00
SA 8:00-5:00

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Han, Sang-Kyou**

Male

License #: AC17562*NPI#:* 1043749401

756 Grand Ave Ste B
Carlsbad, CA 92008
(760)421 1321
SU -
M -
TU 8:30-6:00
W -
TH 8:30-6:00
F -
SA 10:00-5:00

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Kawano, Toshiya**

Male

License #: AC18363*NPI#:* 1972096717

5650 El Camino Real Ste 285
Carlsbad, CA 92008
(760)683 5858
SU -
M -
TU 9:00-3:30
W 9:00-3:30
TH 9:00-3:30
F 9:00-3:30
SA 9:00-11:30

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Cobb, Ayanna**

Female

License #: AC16958*NPI#:* 1922304674

2890 Pio Pico Dr Ste 104
Carlsbad, CA 92008
(760)331 4271
SU -
M 10:00-5:30
TU -
W 10:00-5:30
TH 10:00-5:30
F 1:00-5:30
SA 12:00-3:00

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Han, Claire**

Female

License #: AC9105*NPI#:* 1801967518

1902 Wright Pl Ste 200
Carlsbad, CA 92008
(760)855 6504
SU -
M 9:00-4:00
TU 9:00-4:00
W 9:00-4:00
TH 9:00-4:00
F 9:00-4:00
SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Lyons, Jennifer**

Female

License #: AC13159*NPI#:* 1114252962

1207 Carlsbad Village Dr Ste T
Carlsbad, CA 92008
(760)415 7590
SU -
M 2:00-5:00
TU 10:00-1:00
W -
TH 2:00-5:00
F 10:00-1:00
SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients: No*

Scarlett, Yvonne

Female

License #: AC16118*NPI#:* 1083026223

2890 Pio Pico Dr Ste 104

Carlsbad, CA 92008

(760)637 5069

SU -

M -

TU -

W -

TH 11:30-4:30

F -

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Anton, Cecilia**

Female

License #: AC19907*NPI#:* 1831964105

821 Kuhn Dr Ste 101

Chula Vista, CA 91914

(619)432 2477

SU -

M -

TU 9:00-7:00

W -

TH 9:00-7:00

F 12:00-7:00

SA 9:00-5:00

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Hwang, Soo Chun**

Male

License #: AC17544*NPI#:* 1588192439

910 Hale Pl Ste 214

Chula Vista, CA 91914

(619)922 2902

SU -

M -

TU 9:00-4:00

W 5:00-9:00

TH 9:00-4:00

F 5:00-9:00

SA 5:00-9:00

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Tom, Jennifer**

Female

License #: AC16199*NPI#:* 1639576754

1207 Carlsbad Village Dr Ste T

Carlsbad, CA 92008

(760)487 8857

SU -

M 8:00-1:00

TU 2:00-7:00

W -

TH 8:00-1:00

F 2:00-7:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Dinsmore, Richard**

Male

License #: AC2704*NPI#:* 1780754911

1214 3rd Ave

Chula Vista, CA 91911

(619)946 7035

SU -

M 9:00-4:00

TU -

W 9:00-4:00

TH -

F 9:00-4:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Hwang, Ing-Jun**

Female

License #: AC19719*NPI#:* 1942983556

821 Kuhn Dr Ste 101

Chula Vista, CA 91914

(619)432 2477

SU 10:00-5:00

M -

TU 2:00-7:00

W -

TH -

F 10:00-7:00

SA 10:00-5:00

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes

Kanomata, Atsushi

Male

*License #: AC9802**NPI#: 1285947457*

821 Kuhn Dr Ste 101
Chula Vista, CA 91914
(619)432 2477
SU -
M -
TU 2:00-7:00
W -
TH 2:00-7:00
F -
SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: No***Mendez, Michael**

Male

*License #: AC18795**NPI#: 1194357327*

265 E St Ste A
Chula Vista, CA 91910
(858)294 3865
SU -
M 9:00-5:00
TU 9:00-5:00
W 9:00-5:00
TH 9:00-5:00
F 9:00-5:00
SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Tran, Carol**

Female

*License #: AC18018**NPI#: 1598259491*

1229 3rd Ave Ste C
Chula Vista, CA 91911
(619)271 2772
SU -
M -
TU 11:00-6:00
W 11:00-6:00
TH 11:00-6:00
F -
SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Lee, Il Ju**

Male

*License #: AC16829**NPI#: 1952898298*

296 H St Ste 203
Chula Vista, CA 91910
(800)385 1130
SU -
M -
TU -
W -
TH -
F 9:00-6:00
SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Son, Jae Jin**

Female

*License #: AC8587**NPI#: 1649619412*

296 H St Ste 203
Chula Vista, CA 91910
(760)650 6660
SU -
M -
TU -
W -
TH -
F -
SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Wells, Emily**

Female

*License #: AC19023**NPI#: 1861075046*

955 Lane Ave Ste 101
Chula Vista, CA 91914
(619)500 4615
SU -
M 8:00-5:00
TU -
W 8:00-5:00
TH -
F 7:00-4:00
SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes*

Beck, Andrea

Female

License #: AC16443*NPI#:* 1487032975

1011 Camino del Mar Ste 212

Del Mar, CA 92014

(619)813 9575

SU -

M -

TU -

W -

TH -

F -

SA 11:00-5:00

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Bonito, Amber**

Female

License #: AC14115*NPI#:* 1962796581

564 Broadway

El Cajon, CA 92021

(619)467 0634

SU -

M 9:00-2:00

TU 9:00-7:00

W 9:00-7:00

TH 9:00-7:00

F -

SA 9:00-2:00

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Culp, Casey**

Female

License #: AC18905*NPI#:* 1528321510

1149 N 2nd St

El Cajon, CA 92021

(619)440 2440

SU -

M 9:00-7:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-7:00

F 9:00-7:00

SA 9:00-5:00

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Anton, Cecilia**

Female

License #: AC19907*NPI#:* 1831964105

1149 N 2nd St

El Cajon, CA 92021

(619)440 2440

SU 8:00-6:00

M 8:00-6:00

TU 8:00-6:00

W 8:00-6:00

TH 8:00-6:00

F 8:00-6:00

SA 8:00-6:00

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Candelaria, Ida**

Female

License #: AC5540*NPI#:* 1568539179

983 E Washington Ave

El Cajon, CA 92020

(619)602 3366

SU -

M 9:00-4:00

TU -

W 9:00-4:00

TH -

F 1:00-4:00

SA 9:00-1:00

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Custodio, Lesley**

Female

License #: AC13581*NPI#:* 1710297817

314 S Magnolia Ave

El Cajon, CA 92020

(619)438 0228

SU -

M 9:00-2:00

TU -

W -

TH 1:00-6:00

F 9:00-2:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes*

Flores, Yesenia

Female

*License #: AC19135**NPI#: 1972276236*

1149 N 2nd St
 El Cajon, CA 92021
 (619)444 2440
 SU -
 M 8:00-3:00
 TU 7:00-1:00
 W -
 TH -
 F -
 SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Kim, Min Joo**

Male

*License #: AC13813**NPI#: 1689941791*

855 E Madison Ave
 El Cajon, CA 92020
 (833)867 4642
 SU -
 M -
 TU -
 W -
 TH -
 F -
 SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Knapp, Rhiannon**

Female

*License #: AC19667**NPI#: 1063127728*

1149 N 2nd St
 El Cajon, CA 92021
 (619)440 2440
 SU 9:00-5:00
 M 8:00-8:00
 TU 8:00-8:00
 W 8:00-8:00
 TH 8:00-8:00
 F 8:00-8:00
 SA 8:00-6:00

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Goldman, Roni**

Female

*License #: AC19718**NPI#: 1285328690*

1149 N 2nd St
 El Cajon, CA 92021
 (619)440 2440
 SU -
 M -
 TU -
 W -
 TH -
 F -
 SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Kim, Min Joo**

Male

*License #: AC13813**NPI#: 1689941791*

470 N Mollison Ave
 El Cajon, CA 92021
 (833)867 4642
 SU -
 M -
 TU -
 W -
 TH -
 F -
 SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Larowe, Alexiss**

Female

*License #: AC18576**NPI#: 1255991683*

2295 Fletcher Pkwy Ste 101
 El Cajon, CA 92020
 (760)803 5995
 SU 9:00-5:00
 M -
 TU 9:00-5:00
 W 9:00-5:00
 TH -
 F 9:00-5:00
 SA 9:00-5:00

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes*

Lee, Yoon

Female

*License #: AC18937**NPI#: 1497360820*

1149 N 2nd St
 El Cajon, CA 92021
 (619)440 2440
 SU 9:00-5:00
 M -
 TU -
 W -
 TH 9:00-5:00
 F 9:00-5:00
 SA 9:00-5:00

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Potyk, Lisa Jeanne**

Female

*License #: AC7703**NPI#: 1235299611*

251 E Main St
 El Cajon, CA 92020
 (619)440 4333
 SU -
 M -
 TU 9:30-5:00
 W 9:00-1:30
 TH 9:30-5:00
 F 9:30-4:30
 SA 9:00-1:30

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Arellano, Jacqueline**

Female

*License #: AC18532**NPI#: 1104129485*

1200 Garden View Rd Ste 200
 Encinitas, CA 92024
 (800)926 8273
 SU -
 M 9:00-5:00
 TU 9:00-5:00
 W 9:00-5:00
 TH 9:00-5:00
 F 9:00-5:00
 SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: No***Onan, Teresa**

Female

*License #: AC15303**NPI#: 1144598988*

1149 N 2nd St
 El Cajon, CA 92021
 (619)440 2440
 SU -
 M 8:00-6:00
 TU -
 W -
 TH 7:00-7:00
 F -
 SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Zinner, Travis**

Male

*License #: 19038**NPI#: 1073180394*

1149 N 2nd St
 El Cajon, CA 92021
 (619)440 2440
 SU -
 M 8:00-6:00
 TU 8:00-6:00
 W -
 TH -
 F -
 SA 8:00-6:00

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Blair, Sherine**

Female

*License #: AC13201**NPI#: 1902130396*

543 Encinitas Blvd Ste 107
 Encinitas, CA 92024
 (858)480 6890
 SU -
 M 8:30-5:00
 TU 8:30-5:00
 W 8:30-5:00
 TH 8:30-5:00
 F 8:30-12:00
 SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes*

Burr, Douglas

Male

License #: AC9381*NPI#:* 1821257825

1200 Garden View Rd Ste 200

Encinitas, CA 92024

(800)926 8273

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Gonzalez, Andres**

Male

License #: AC15708*NPI#:* 1841857729

1130 2nd St

Encinitas, CA 92024

(760)736 6767

SU -

M -

TU 8:00-5:00

W -

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Julian, Fides**

Female

License #: AC18652*NPI#:* 1407401128

1200 Garden View Rd Ste 200

Encinitas, CA 92024

(800)926 8273

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Goforth, Greta**

Female

License #: AC11921*NPI#:* 1679750095

187 Calle Magdalena Ste 214

Encinitas, CA 92024

(760)815 6265

SU -

M 10:00-6:30

TU 10:00-6:30

W 10:00-6:30

TH 10:00-6:30

F 10:00-6:30

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Ji, Dong**

Male

License #: AC13205*NPI#:* 1912293671

1200 Garden View Rd Ste 200

Encinitas, CA 92024

(800)926 8273

SU -

M 8:00-5:00

TU 8:00-5:00

W 8:00-5:00

TH 8:00-5:00

F 8:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Murray, Steven**

Male

License #: 18288*NPI#:* 1104456078

1200 Garden View Rd Ste 200

Encinitas, CA 92024

(800)926 8273

SU -

M 8:00-5:00

TU 8:00-5:00

W 8:00-5:00

TH 8:00-5:00

F 8:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No

Reyes, Estela

Female

License #: AC18494*NPI#:* 1376106377

1200 Garden View Rd Ste 200

Encinitas, CA 92024

(844)747 0474

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Tang-Ritchie, Leng**

Female

License #: AC14241*NPI#:* 1497044580

1200 Garden View Rd Ste 200

Encinitas, CA 92024

(800)926 8273

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Akhavan, Farahnaz**

Female

License #: AC9396*NPI#:* 1881795250

1733 S Escondido Blvd

Escondido, CA 92025

(760)233 5886

SU 9:00-12:00

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 10:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Robles, Ma Regina Blanca**

Female

License #: 19279*NPI#:* 1184386419

317 N El Camino Real Ste 306

Encinitas, CA 92024

(858)673 4400

SU -

M 9:00-6:00

TU 9:00-6:00

W 9:00-6:00

TH 9:00-6:00

F 9:00-6:00

SA 8:00-12:00

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Tsoucalas, Katerina**

Female

License #: 17974*NPI#:* 1811487226

191 Calle Magdalena Ste 295

Encinitas, CA 92024

(858)461 8826

SU -

M 9:00-6:00

TU 9:00-8:00

W 9:00-8:00

TH 9:00-8:00

F 9:00-6:00

SA 9:00-5:00

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Chang, Xuan**

Female

License #: AC6357*NPI#:* 1942226626

100 Holland Gln

Escondido, CA 92026

(619)871 6068

SU -

M -

TU 1:00-6:00

W -

TH -

F -

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes

Kim, Min Joo

Male

License #: AC13813*NPI#:* 1689941791460 N Elm St
Escondido, CA 92025

(760)520 8100

SU -

M -

TU -

W -

TH -

F -

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Kwak, Hyoshin**

Male

License #: AC16939*NPI#:* 1477033272106 S Grape St Ste 10
Escondido, CA 92025

(213)568 5470

SU -

M 10:00-6:00

TU 10:00-6:00

W 10:00-6:00

TH 10:00-6:00

F 10:00-6:00

SA 9:00-2:00

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**McIntyre, Michele**

Female

License #: AC17772*NPI#:* 11548312468975 Lawrence Welk Dr Spc 323
Escondido, CA 92026

(619)307 2631

SU -

M 8:30-4:30

TU 8:30-6:00

W 8:30-6:00

TH 8:30-5:30

F 8:30-4:30

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Kim, Min Joo**

Male

License #: AC13813*NPI#:* 1689941791425 N Date St
Escondido, CA 92025

(760)520 8300

SU -

M 8:00-5:00

TU -

W 8:00-5:00

TH -

F 8:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**McAdams, Donna**

Female

License #: AC8311*NPI#:* 1669421905325 W 3rd Ave Ste 102
Escondido, CA 92025

(760)796 4519

SU -

M -

TU 8:00-5:00

W 8:00-5:00

TH -

F 8:00-5:00

SA 8:00-2:00

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Pole, Carolyn**

Female

License #: AC4587*NPI#:* 1831143379337 S Kalmia St
Escondido, CA 92025

(760)445 7595

SU -

M -

TU 10:00-6:00

W 10:00-6:00

TH -

F 10:00-6:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes

Stubblefield, Michael

Male

License #: AC13558

NPI#: 1194009951

333 S Juniper St Ste111

Escondido, CA 92025

(760)815 3881

SU -

M 9:00-5:30

TU 9:00-5:30

W 9:00-5:30

TH 9:00-5:30

F 9:00-5:30

SA -

Accessibility: CONTACT PROVIDER

Accepting New Patients: Yes

Kim, Min Joo

Male

License #: AC13813

NPI#: 1689941791

1309 S Mission Rd

Fallbrook, CA 92028

(833)864 4642

SU -

M -

TU 8:00-5:00

W -

TH -

F -

SA -

Accessibility: CONTACT PROVIDER

Accepting New Patients: Yes

Arellano, Jacqueline

Female

License #: AC18532

NPI#: 1104129485

9400 Campus Point Dr

La Jolla, CA 92093

(844)747 0474

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER

Accepting New Patients: No

Tran, Kiet

Male

License #: AC15464

NPI#: 1336432426

260 W Crest St Ste B

Escondido, CA 92025

(760)650 2247

SU 9:00-5:00

M 6:00-9:00

TU 8:00-9:00

W 6:00-9:00

TH 6:00-9:00

F 6:00-9:00

SA 9:00-5:00

Accessibility: CONTACT PROVIDER

Accepting New Patients: Yes

Stephens, Lori

Female

License #: AC15042

NPI#: 1477904027

587 E Elder St Ste B

Fallbrook, CA 92028

(714)330 9244

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F -

SA -

Accessibility: CONTACT PROVIDER

Accepting New Patients: Yes

Arellano, Jacqueline

Female

License #: AC18532

NPI#: 1104129485

9300 Campus Point Dr

La Jolla, CA 92037

(800)926 8273

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER

Accepting New Patients: No

Arellano, Jacqueline

Female

License #: AC18532

NPI#: 1104129485

8910 Villa La Jolla Dr Ste 200

La Jolla, CA 92037

(844)747 0474

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-8:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER

Accepting New Patients: No

Bousquin, Diane

Female

License #: AC10132

NPI#: 1861610891

7634 Girard Ave Ste T

La Jolla, CA 92037

(619)808 1099

SU -

M 9:00-7:00

TU -

W 9:00-6:00

TH -

F 9:00-4:00

SA -

Accessibility: CONTACT PROVIDER

Accepting New Patients: Yes

Burr, Douglas

Male

License #: AC9381

NPI#: 1821257825

8910 Villa La Jolla Dr Ste 200

La Jolla, CA 92037

(844)747 0474

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER

Accepting New Patients: No

Booth, Beata

Female

License #: AC7235

NPI#: 1396844825

6529 La Jolla Blvd

La Jolla, CA 92037

(858)454 2025

SU -

M 10:00-6:00

TU -

W -

TH 10:00-7:00

F -

SA -

Accessibility: CONTACT PROVIDER

Accepting New Patients: No

Burr, Douglas

Male

License #: AC9381

NPI#: 1821257825

9300 Campus Point Dr

La Jolla, CA 92037

(800)926 8273

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER

Accepting New Patients: No

Burr, Douglas

Male

License #: AC9381

NPI#: 1821257825

9400 Campus Point Dr

La Jolla, CA 92093

(844)747 0474

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER

Accepting New Patients: No

Gallet, Mariel

Female

*License #: AC17357**NPI#: 1801347547*

8950 Villa La Jolla Dr Ste B212

La Jolla, CA 92037

(858)263 6088

SU -

M -

TU 9:00-7:00

W -

TH 9:00-7:00

F -

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Ji, Dong**

Male

*License #: AC13205**NPI#: 1912293671*

9400 Campus Point Dr

La Jolla, CA 92093

(844)747 0474

SU -

M 8:00-5:00

TU 8:00-5:00

W 8:00-5:00

TH 8:00-5:00

F 8:00-5:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: No***Julian, Fides**

Female

*License #: AC18652**NPI#: 1407401128*

8910 Villa La Jolla Dr Ste 200

La Jolla, CA 92037

(844)747 0474

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: No***Ji, Dong**

Male

*License #: AC13205**NPI#: 1912293671*

8910 Villa La Jolla Dr Ste 200

La Jolla, CA 92037

(844)747 0474

SU -

M 8:00-5:00

TU 8:00-5:00

W 8:00-5:00

TH 8:00-5:00

F 8:00-5:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: No***Ji, Dong**

Male

*License #: AC13205**NPI#: 1912293671*

9300 Campus Point Dr

La Jolla, CA 92037

(800)926 8273

SU -

M 8:00-5:00

TU 8:00-5:00

W 8:00-5:00

TH 8:00-5:00

F 8:00-5:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: No***Julian, Fides**

Female

*License #: AC18652**NPI#: 1407401128*

9300 Campus Point Dr

La Jolla, CA 92037

(800)926 8273

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: No*

Julian, Fides

Female

License #: AC18652*NPI#:* 1407401128

9400 Campus Point Dr

La Jolla, CA 92093

(844)747 0474

SU -

M 5:00-8:00

TU 5:00-8:00

W 5:00-8:00

TH 5:00-8:00

F 5:00-8:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Murray, Steven**

Male

License #: 18288*NPI#:* 1104456078

9400 Campus Point Dr

La Jolla, CA 92093

(844)747 0474

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Reyes, Estela**

Female

License #: AC18494*NPI#:* 1376106377

9300 Campus Point Dr

La Jolla, CA 92037

(844)747 0474

SU -

M 8:00-5:00

TU 8:00-5:00

W 8:00-5:00

TH 8:00-5:00

F 8:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Murray, Steven**

Male

License #: 18288*NPI#:* 1104456078

9300 Campus Point Dr

La Jolla, CA 92037

(800)926 8273

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Murray, Steven**

Male

License #: 18288*NPI#:* 1104456078

8910 Villa La Jolla Dr Ste 200

La Jolla, CA 92037

(844)747 0474

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Reyes, Estela**

Female

License #: AC18494*NPI#:* 1376106377

8910 Villa La Jolla Dr Ste 200

La Jolla, CA 92037

(844)747 0474

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No

Reyes, Estela

Female

*License #: AC18494**NPI#: 1376106377*

9400 Campus Point Dr

La Jolla, CA 92093

(844)747 0474

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: No***Tang-Ritchie, Leng**

Female

*License #: AC14241**NPI#: 1497044580*

8910 Villa La Jolla Dr Ste 200

La Jolla, CA 92037

(844)747 0474

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: No***El Khoury, Ghassan**

Male

*License #: AC10036**NPI#: 1265985824*

5360 Jackson Dr Ste 110

La Mesa, CA 91942

(619)465 8800

SU -

M 10:00-5:00

TU 10:00-5:00

W 10:00-5:00

TH 10:00-5:00

F 10:00-5:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: No***Tang-Ritchie, Leng**

Female

*License #: AC14241**NPI#: 1497044580*

9400 Campus Point Dr

La Jolla, CA 92093

(844)747 0474

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: No***Tang-Ritchie, Leng**

Female

*License #: AC14241**NPI#: 1497044580*

9300 Campus Point Dr

La Jolla, CA 92037

(800)926 8273

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: No***Goldman, Roni**

Female

*License #: AC19718**NPI#: 1285328690*

8875 La Mesa Blvd Ste E

La Mesa, CA 91942

(619)278 9020

SU -

M 9:00-5:00

TU 9:00-7:00

W 9:00-5:00

TH 9:00-7:00

F 9:00-3:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes*

Jackson, Patricia

Female

License #: AC7976*NPI#:* 1760656904

4754 Palm Ave
La Mesa, CA 91942
(619)990 2878
SU -
M -
TU 9:00-5:00
W -
TH 9:00-5:00
F 9:00-5:00
SA 9:00-5:00

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Mergens, Jane**

Female

License #: AC10129*NPI#:* 1982658993

9019 Park Plaza Dr Ste D
La Mesa, CA 91942
(619)606 6464
SU -
M -
TU 10:30-5:00
W -
TH 10:30-5:00
F -
SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Paulo, Pier**

Female

License #: AC9020*NPI#:* 1063746477

8875 La Mesa Blvd Ste E
La Mesa, CA 91942
(619)278 9020
SU -
M 9:00-5:00
TU 9:00-3:00
W 9:00-5:00
TH 9:00-3:00
F 9:00-3:00
SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Lala, Steven**

Male

License #: AC18021*NPI#:* 1548741911

7373 University Ave Ste 211
La Mesa, CA 91942
(619)881 0428
SU -
M 9:00-6:00
TU 9:00-6:00
W 9:00-6:00
TH 9:00-6:00
F 9:00-6:00
SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Miller, Christine**

Female

License #: AC9627*NPI#:* 1871663948

4754 Palm Ave
La Mesa, CA 91942
(619)302 1129
SU -
M 9:00-3:00
TU 9:00-3:00
W 9:00-3:00
TH 9:00-1:00
F 9:00-1:00
SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Kim, Min Joo**

Male

License #: AC13813*NPI#:* 1689941791

10039 Vine St
Lakeside, CA 92040
(833)867 4642
SU -
M -
TU -
W -
TH -
F -
SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes

Allen, Jennifer

Female

License #: AC17744*NPI#:* 1568889863

2424 Vista Way Ste 125

Oceanside, CA 92054

(442)226 8208

SU -

M 9:00-6:00

TU 9:00-6:00

W 9:00-6:00

TH 9:00-6:00

F 9:00-6:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Choi, Mijoung**

Female

License #: AC17396*NPI#:* 1649721416

3861 Mission Ave Ste B27

Oceanside, CA 92058

(760)970 0244

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Gonzalez, Andres**

Male

License #: AC15708*NPI#:* 1841857729

619 Crouch St Ste 100

Oceanside, CA 92054

(760)736 6767

SU -

M 8:00-5:00

TU -

W 8:00-5:00

TH -

F -

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Anderson, Tisa**

Female

License #: AC16093*NPI#:* 1497986624

804 Pier View Way Ste 200

Oceanside, CA 92054

(760)590 9274

SU -

M 8:00-6:00

TU 8:00-6:00

W 8:00-6:00

TH 8:00-6:00

F 8:00-6:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Choo, Kwangmyung**

Male

License #: AC10231*NPI#:* 1407986268

1906 Oceanside Blvd Ste S

Oceanside, CA 92054

(760)754 2007

SU -

M 9:00-6:00

TU 9:00-6:00

W 9:00-6:00

TH 9:00-6:00

F 9:00-6:00

SA 9:00-12:00

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Gonzalez, Andres**

Male

License #: AC15708*NPI#:* 1841857729

3998 Vista Way Ste G

Oceanside, CA 92056

(760)736 6767

SU -

M 8:00-5:00

TU 8:00-5:00

W 8:00-5:00

TH 8:00-5:00

F 8:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes

Haun, Daniel

Male

*License #: AC6774**NPI#: 1568548618*

701 Seagaze Dr Ste B

Oceanside, CA 92054

(760)803 6725

SU -

M 9:00-5:00

TU -

W 8:00-12:00

TH -

F 9:00-5:30

SA 8:30-2:00

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Stampbach, Alex**

Male

*License #: AC17496**NPI#: 1568998524*

2124 S El Camino Real Ste 202

Oceanside, CA 92054

(760)453 0332

SU 9:00-7:00

M 9:00-7:00

TU 9:00-7:00

W 9:00-7:00

TH 9:00-7:00

F 9:00-7:00

SA 9:00-7:00

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Arnold, Michele**

Female

*License #: AC6958**NPI#: 1326107442*

15644 Pomerado Rd Ste 102

Poway, CA 92064

(858)613 0792

SU -

M 8:30-4:30

TU 8:30-4:30

W 8:30-4:30

TH 8:30-4:30

F -

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: No***Lipton, Gregory**

Male

*License #: AC8207**NPI#: 1841367117*

701 Seagaze Dr Ste B

Oceanside, CA 92054

(760)721 4323

SU -

M 10:00-5:30

TU 11:00-6:00

W 10:00-6:00

TH 11:00-6:00

F 9:00-2:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Stevenson, Nancy**

Female

*License #: AC4332**NPI#: 1306009956*

310 S Coast Hwy

Oceanside, CA 92054

(858)344 0889

SU -

M -

TU 9:00-6:00

W -

TH 9:00-6:00

F -

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Lu, Pin**

Female

*License #: AC17371**NPI#: 1558805283*

12243 Poway Rd

Poway, CA 92064

(858)261 8038

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-12:00

F 9:00-5:00

SA 9:00-12:00

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes*

Robles, Ma Regina Blanca

Female

License #: 19279

NPI#: 1184386419

15725 Pomerado Rd Ste 210

Poway, CA 92064

(858)673 4400

SU -

M 9:00-6:00

TU 9:00-6:00

W 9:00-6:00

TH 9:00-6:00

F 9:00-6:00

SA -

Accessibility: CONTACT PROVIDER

Accepting New Patients: Yes

Wang, Yuan

Female

License #: AC8852

NPI#: 1073736880

15525 Pomerado Rd Ste E4

Poway, CA 92064

(858)829 9485

SU -

M 8:30-12:00

TU -

W 8:30-6:30

TH -

F -

SA 9:00-1:00

Accessibility: CONTACT PROVIDER

Accepting New Patients: Yes

Abdullah, Shaheed

Male

License #: AC8822

NPI#: 1790013514

5222 Balboa Ave Ste 43

San Diego, CA 92117

(858)467 9893

SU -

M 9:00-6:00

TU 9:00-6:00

W 9:00-3:00

TH 9:00-6:00

F 9:00-12:00

SA -

Accessibility: CONTACT PROVIDER

Accepting New Patients: Yes

Shinagawa, Jocelyn

Female

License #: AC14190

NPI#: 1780964478

15525 Pomerado Rd Ste E4

Poway, CA 92064

(858)883 3867

SU -

M -

TU 10:00-6:00

W -

TH 10:00-6:00

F 10:00-6:00

SA -

Accessibility: CONTACT PROVIDER

Accepting New Patients: No

Whitney, Tracey

Female

License #: AC18066

NPI#: 1831424704

13525 Midland Rd Ste I

Poway, CA 92064

(858)692 5221

SU -

M 10:00-6:00

TU 8:00-4:00

W 8:00-6:00

TH 10:00-4:00

F 9:00-1:00

SA -

Accessibility: CONTACT PROVIDER

Accepting New Patients: Yes

Aikebaier, Aierken

Male

License #: AC19000

NPI#: 1457024853

6106 Village Way

San Diego, CA 92130

(858)588 7858

SU -

M -

TU -

W -

TH -

F -

SA -

Accessibility: CONTACT PROVIDER

Accepting New Patients: Yes

Akhavan, Farahnaz

Female

License #: AC9396

NPI#: 1881795250

2883 Meade Ave Ste B

San Diego, CA 92116

(619)298 2342

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER

Accepting New Patients: Yes

Arellano, Jacqueline

Female

License #: AC18532

NPI#: 1104129485

200 W Arbor Dr

San Diego, CA 92103

(800)926 8273

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER

Accepting New Patients: No

Arellano, Jacqueline

Female

License #: AC18532

NPI#: 1104129485

330 Lewis St Ste 400

San Diego, CA 92103

(844)747 0474

SU -

M 8:00-5:00

TU 8:00-5:00

W 8:00-5:00

TH 8:00-5:00

F 8:00-5:00

SA -

Accessibility: CONTACT PROVIDER

Accepting New Patients: No

Altman, Ryan

Male

License #: AC10736

NPI#: 1104191394

3239 Adams Ave

San Diego, CA 92116

(619)546 4806

SU -

M 10:00-6:30

TU 10:00-6:30

W 10:00-6:30

TH 10:00-6:30

F 10:00-6:30

SA 11:00-4:00

Accessibility: CONTACT PROVIDER

Accepting New Patients: Yes

Arellano, Jacqueline

Female

License #: AC18532

NPI#: 1104129485

9333 Genesee Ave Ste 200

San Diego, CA 92121

(844)747 0474

SU -

M 9:00-8:00

TU 9:00-8:00

W 9:00-5:00

TH 9:00-8:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER

Accepting New Patients: No

Arellano, Jacqueline

Female

License #: AC18532

NPI#: 1104129485

9909 Mira Mesa Blvd Ste 200

San Diego, CA 92131

(844)747 0474

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER

Accepting New Patients: No

Arellano, Jacqueline

Female

License #: AC18532*NPI#:* 1104129485

4910 Directors Pl Ste 250

San Diego, CA 92121

(800)926 8273

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Beck, Andrea**

Female

License #: AC16443*NPI#:* 1487032975

5440 Morehouse Dr Ste 1700

San Diego, CA 92121

(858)455 7654

SU -

M 2:00-7:00

TU -

W 2:00-7:00

TH 10:00-2:00

F 2:00-7:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Burr, Douglas**

Male

License #: AC9381*NPI#:* 1821257825

200 W Arbor Dr

San Diego, CA 92103

(800)926 8273

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Bean, Adrian**

Male

License #: AC5546*NPI#:* 1073852455

9150 Chesapeake Dr Ste 120

San Diego, CA 92123

(619)542 0884

SU -

M 8:30-5:30

TU 8:30-5:30

W 8:30-5:30

TH 8:30-5:30

F 8:30-5:30

SA 8:30-5:30

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Burr, Douglas**

Male

License #: AC9381*NPI#:* 1821257825

330 Lewis St Ste 400

San Diego, CA 92103

(844)747 0474

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Burr, Douglas**

Male

License #: AC9381*NPI#:* 1821257825

4910 Directors Pl Ste 250

San Diego, CA 92121

(800)926 8273

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No

Burr, Douglas

Male

License #: AC9381

NPI#: 1821257825

9909 Mira Mesa Blvd Ste 200

San Diego, CA 92131

(844)747 0747

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Caliri, Rebecca**

Female

License #: AC14311

NPI#: 1689051708

1913 Euclid Ave Ste 107

San Diego, CA 92105

(619)719 1777

SU -

M 10:00-5:00

TU -

W 10:00-5:00

TH -

F 10:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Chang, Xuan**

Female

License #: AC6357

NPI#: 1942226626

10455 Sorrento Valley Rd Ste 208

San Diego, CA 92121

(619)871 6068

SU -

M -

TU -

W -

TH -

F -

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Burr, Douglas**

Male

License #: AC9381

NPI#: 1821257825

9333 Genesee Ave Ste 200

San Diego, CA 92121

(844)747 0474

SU -

M 8:00-5:00

TU 8:00-5:00

W 8:00-5:00

TH 8:00-5:00

F 8:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Chang, Xuan**

Female

License #: AC6357

NPI#: 1942226626

10951 Sorrento Valley Rd Ste I-G

San Diego, CA 92121

(619)871 6068

SU 1:00-6:00

M -

TU -

W -

TH -

F -

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Chang, Sophia**

Female

License #: AC17722

NPI#: 1427577576

4638 Park Blvd

San Diego, CA 92116

(619)220 0878

SU -

M 9:00-4:00

TU 1:00-4:00

W -

TH 9:00-4:00

F 9:00-4:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes

Chang, Xuan

Female

*License #: AC6357**NPI#: 1942226626*

16935 W Bernardo Dr Ste 104

San Diego, CA 92127

(619)871 6068

SU -

M -

TU 5:00-7:00

W -

TH -

F -

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Cho, Kyu Ok**

Female

*License #: AC15015**NPI#: 1528302387*

8303 Clairemont Mesa Blvd Ste 104

San Diego, CA 92111

(858)866 6081

SU -

M 9:00-6:00

TU 9:00-6:00

W -

TH 9:00-6:00

F 9:00-6:00

SA 2:00-5:00

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Choi, Yoonhee**

Female

*License #: AC15915**NPI#: 1811259187*

8303 Clairemont Mesa Blvd Ste 104

San Diego, CA 92111

(858)707 5808

SU -

M -

TU -

W -

TH -

F -

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Cheon, Seong**

Male

*License #: AC7216**NPI#: 1043527492*

7825 Engineer Rd Ste 209

San Diego, CA 92111

(858)576 2511

SU -

M 9:00-6:00

TU 9:00-6:00

W 9:00-6:00

TH 9:00-6:00

F 9:00-6:00

SA 9:00-4:00

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Choe, Helena**

Female

*License #: AC11298**NPI#: 1720420029*

1916 30th St

San Diego, CA 92102

(619)808 3198

SU -

M 8:00-8:00

TU -

W 8:00-8:00

TH -

F 8:00-8:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Choi, Yoonhee**

Female

*License #: AC15915**NPI#: 1811259187*

10717 Camino Ruiz Ste 119

San Diego, CA 92126

(858)707 5808

SU -

M -

TU -

W 9:00-2:00

TH -

F 9:00-2:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes*

Coltart, Michelle

Female

License #: AC13330*NPI#:* 1972807774

3239 Adams Ave
 San Diego, CA 92116
 (619)546 4806
 SU -
 M 10:00-7:00
 TU 10:00-7:00
 W 10:00-7:00
 TH 10:00-7:00
 F 10:00-7:00
 SA 11:00-4:00

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Dang, Sheri**

Female

License #: AC17713*NPI#:* 1225567001

2727 Camino del Rio S Ste 104
 San Diego, CA 92108
 (619)738 5374
 SU -
 M -
 TU -
 W -
 TH -
 F -
 SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***DiVanterra, Darcy**

Female

License #: AC8921*NPI#:* 1073666186

3033 5th Ave Ste 230
 San Diego, CA 92103
 (619)887 0610
 SU -
 M 12:00-5:00
 TU -
 W 12:00-5:00
 TH -
 F 10:00-5:00
 SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Culp, Casey**

Female

License #: AC18905*NPI#:* 1528321510

11665 Avena Pl Ste 205
 San Diego, CA 92128
 (858)733 0832
 SU -
 M 8:00-6:00
 TU 8:00-6:00
 W 8:00-6:00
 TH 8:00-6:00
 F 8:00-6:00
 SA 8:00-6:00

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***De Rose, Leda**

Female

License #: AC17646*NPI#:* 1871020560

3239 Adams Ave
 San Diego, CA 92116
 (619)546 4806
 SU -
 M 10:00-7:00
 TU 10:00-7:00
 W 10:00-7:00
 TH 10:00-7:00
 F 10:00-7:00
 SA 11:00-4:00

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Eusebio, Rachel**

Female

License #: AC19932*NPI#:* 1588438089

6051 Business Center Ct Ste A3
 San Diego, CA 92154
 (619)288 3189
 SU -
 M 9:00-6:00
 TU 9:00-6:00
 W 9:00-6:00
 TH 9:00-6:00
 F 9:00-6:00
 SA 10:00-4:00

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes*

Flores, Yesenia

Female

License #: AC19135*NPI#:* 1972276236

3675 Ruffin Rd Ste 315

San Diego, CA 92123

(619)897 5558

SU -

M -

TU -

W -

TH -

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Friend, Yunhee**

Female

License #: AC17436*NPI#:* 1013147040

12264 El Camino Real Ste 108

San Diego, CA 92130

(858)229 1502

SU -

M 9:00-5:00

TU 2:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Godes, Marianna**

Female

License #: AC12945*NPI#:* 1043445844

319 Laurel St

San Diego, CA 92101

(858)337 9559

SU -

M 9:00-0:30

TU 3:00-7:00

W -

TH 9:00-7:00

F 9:00-0:30

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Foley, Susan**

Female

License #: AC2551*NPI#:* 1821205212

3650 Clairemont Dr Ste 12

San Diego, CA 92117

(858)270 4242

SU -

M -

TU 11:00-5:00

W -

TH 11:00-5:00

F 11:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Garcia, Ronald**

Male

License #: AC19848*NPI#:* 1225810419

1011 Camino del Rio S Ste 100

San Diego, CA 92108

(619)915 6007

SU -

M 10:00-7:00

TU 10:00-6:00

W 10:00-5:30

TH 10:00-7:00

F 10:00-6:00

SA 10:00-3:00

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Goldman, Roni**

Female

License #: AC19718*NPI#:* 1285328690

11665 Avena Pl Ste 205

San Diego, CA 92128

(858)733 0832

SU -

M -

TU -

W -

TH -

F -

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes*

Guo, Naijia

Female

License #: AC17317*NPI#:* 1831640606

7297 Ronson Rd Ste C

San Diego, CA 92111

(858)568 5628

SU -

M 10:00-3:00

TU 1:00-4:00

W -

TH 10:00-3:00

F 10:00-3:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Hayes, Jewel**

Female

License #: AC13496*NPI#:* 1003115106

2525 Camino del Rio S Ste 245

San Diego, CA 92108

(914)649 9583

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA 9:00-5:00

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Hong, HeeJoo**

Female

License #: AC12772*NPI#:* 1750666723

1011 Camino del Rio S Ste 100

San Diego, CA 92108

(619)915 6007

SU -

M 10:00-7:00

TU 10:00-6:00

W 10:00-5:30

TH 10:00-7:00

F 10:00-6:00

SA 10:00-3:00

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Halsey, Holly**

Female

License #: AC6531*NPI#:* 1225167034

9150 Chesapeake Dr Ste 120

San Diego, CA 92123

(619)542 0884

SU -

M -

TU -

W -

TH -

F -

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Helgeson, Maile**

Female

License #: AC14651*NPI#:* 1104179266

3239 Adams Ave

San Diego, CA 92116

(619)546 4806

SU -

M -

TU 10:00-6:30

W -

TH 2:30-6:30

F -

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Hou, Yahui**

Female

License #: AC19881*NPI#:* 1245011915

3080 N Park Way

San Diego, CA 92104

(760)449 8293

SU -

M 9:30-4:30

TU 9:00-5:30

W 9:30-5:30

TH 9:30-1:30

F 9:00-3:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes*

Hwang, Soo Chun

Male

License #: AC17544*NPI#:* 1588192439

9474 Kearny Villa Rd Ste 113

San Diego, CA 92126

(858)578 2070

SU -

M -

TU -

W 9:00-4:30

TH -

F -

SA 9:00-5:00

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Hwang, Ing-Jun**

Female

License #: AC19719*NPI#:* 1942983556

4052 Clairemont Dr

San Diego, CA 92117

(619)339 7079

SU 9:00-5:00

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA 9:00-5:00

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Ji, Dong**

Male

License #: AC13205*NPI#:* 1912293671

330 Lewis St Ste 400

San Diego, CA 92103

(844)747 0474

SU -

M 8:00-5:00

TU 8:00-5:00

W 8:00-5:00

TH 8:00-5:00

F 8:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Hwang, Soo Chun**

Male

License #: AC17544*NPI#:* 1588192439

9474 Kearny Villa Rd Ste 111

San Diego, CA 92126

(858)987 6267

SU -

M 12:00-5:00

TU 5:30-9:00

W 9:00-5:00

TH 5:30-9:00

F 9:00-5:00

SA 8:00-6:00

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Hwang, Ha**

Male

License #: AC9404*NPI#:* 1174682256

1370 Rosecrans St Ste C

San Diego, CA 92106

(619)866 1414

SU -

M 10:00-6:00

TU 10:00-6:00

W 10:00-6:00

TH 10:00-6:00

F 10:00-6:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Ji, Dong**

Male

License #: AC13205*NPI#:* 1912293671

200 W Arbor Dr

San Diego, CA 92103

(800)926 8273

SU -

M 8:00-5:00

TU 8:00-5:00

W 8:00-5:00

TH 8:00-5:00

F 8:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No

Ji, Dong

Male

License #: AC13205

NPI#: 1912293671

9333 Genesee Ave Ste 200

San Diego, CA 92121

(844)747 0474

SU -

M 8:00-5:00

TU 8:00-5:00

W 8:00-5:00

TH 8:00-5:00

F 8:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Ji, Dong**

Male

License #: AC13205

NPI#: 1912293671

9909 Mira Mesa Blvd Ste 200

San Diego, CA 92131

(844)747 0474

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Julian, Fides**

Female

License #: AC18652

NPI#: 1407401128

2525 Camino del Rio S Ste 313

San Diego, CA 92108

(619)800 0190

SU -

M -

TU 10:00-6:00

W -

TH -

F 10:00-6:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Ji, Dong**

Male

License #: AC13205

NPI#: 1912293671

4910 Directors Pl Ste 250

San Diego, CA 92121

(800)926 8273

SU -

M 8:00-5:00

TU 8:00-5:00

W 8:00-5:00

TH 8:00-5:00

F 8:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Julian, Fides**

Female

License #: AC18652

NPI#: 1407401128

9333 Genesee Ave Ste 200

San Diego, CA 92121

(844)747 0474

SU -

M 4:00-8:00

TU 4:00-8:00

W 4:00-8:00

TH 4:00-8:00

F 4:00-8:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Julian, Fides**

Female

License #: AC18652

NPI#: 1407401128

330 Lewis St Ste 400

San Diego, CA 92103

(844)747 0474

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No

Julian, Fides

Female

*License #: AC18652**NPI#: 1407401128*

9909 Mira Mesa Blvd Ste 200

San Diego, CA 92131

(844)747 0474

SU -

M -

TU -

W 12:00-5:00

TH -

F -

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: No***Julian, Fides**

Female

*License #: AC18652**NPI#: 1407401128*

4910 Directors Pl Ste 250

San Diego, CA 92121

(800)926 8273

SU -

M -

TU -

W -

TH -

F -

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: No***Kanomata, Atsushi**

Male

*License #: AC9802**NPI#: 1285947457*

2180 Garnet Ave Ste 1-I

San Diego, CA 92109

(619)432 2477

SU -

M -

TU -

W 10:00-6:00

TH -

F -

SA 12:00-6:00

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Julian, Fides**

Female

*License #: AC18652**NPI#: 1407401128*

200 W Arbor Dr

San Diego, CA 92103

(800)926 8273

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: No***Julian, Fides**

Female

*License #: AC18652**NPI#: 1407401128*

7204 Clairemont Mesa Blvd

San Diego, CA 92111

(619)800 0190

SU -

M -

TU -

W -

TH -

F -

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Kanomata, Atsushi**

Male

*License #: AC9802**NPI#: 1285947457*

6051 Business Center Ct Ste A3

San Diego, CA 92154

(619)288 3189

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA 9:00-5:00

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes*

Kim, Stephen

Male

*License #: AC9657**NPI#: 1508152133*

7750 Dagget St Ste 105

San Diego, CA 92111

(858)717 6120

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA 9:00-12:00

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Laffen, Julie**

Female

*License #: AC12657**NPI#: 1629255021*

2852 Adams Ave

San Diego, CA 92116

(619)663 9417

SU -

M -

TU 2:00-8:00

W -

TH 2:00-8:00

F -

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Liu, Yifan**

Male

*License #: AC17537**NPI#: 1013437813*

9636 Tierra Grande St Ste 101

San Diego, CA 92126

(858)729 3580

SU -

M 8:30-5:30

TU 8:30-5:30

W -

TH 8:30-5:30

F 8:30-5:30

SA 8:30-2:00

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Koolen, Danae**

Female

*License #: AC9682**NPI#: 1780754572*

4732 Point Loma Ave Ste D

San Diego, CA 92107

(619)990 9553

SU -

M 10:00-1:00

TU 10:00-4:00

W 10:00-5:00

TH 12:00-5:00

F 10:00-4:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Lee, Yoon**

Female

*License #: AC18937**NPI#: 1497360820*

11665 Avena Pl Ste 205

San Diego, CA 92128

(858)733 0832

SU -

M 8:00-6:00

TU 8:00-6:00

W 8:00-6:00

TH 8:00-6:00

F 8:00-6:00

SA 8:00-6:00

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Lundin, Katarina**

Female

*License #: AC14873**NPI#: 1861750358*

4732 Point Loma Ave Ste D

San Diego, CA 92107

(619)917 9420

SU -

M -

TU 9:00-7:00

W 9:00-7:00

TH 9:00-7:00

F -

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes*

McKinnon, Dave

Male

License #: AC12894*NPI#:* 1730314709

3914 Murphy Canyon Rd Ste A239

San Diego, CA 92123

(858)836 1080

SU -

M 2:00-7:00

TU 2:00-7:00

W 9:00-7:00

TH -

F 9:00-2:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Miyashiro, Wendi**

Female

License #: AC10383*NPI#:* 1508011891

2481 Congress St

San Diego, CA 92110

(858)740 1838

SU -

M -

TU 9:00-5:00

W -

TH 9:00-5:00

F 9:00-1:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Murray, Steven**

Male

License #: 18288*NPI#:* 1104456078

330 Lewis St Ste 400

San Diego, CA 92103

(800)926 8273

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Mendez, Michael**

Male

License #: AC18795*NPI#:* 1194357327

2515 Camino del Rio S Ste A

San Diego, CA 92108

(619)748 6931

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Murra, Fawsi**

Male

License #: AC8834*NPI#:* 1437693603

2852 Adams Ave

San Diego, CA 92116

(619)282 8068

SU -

M 9:00-6:30

TU -

W 9:00-6:30

TH -

F 9:00-6:30

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Murray, Steven**

Male

License #: 18288*NPI#:* 1104456078

200 W Arbor Dr

San Diego, CA 92103

(800)926 8273

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No

Murray, Steven

Male

License #: 18288

NPI#: 1104456078

4910 Directors Pl Ste 250

San Diego, CA 92121

(800)926 8273

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Murray, Steven**

Male

License #: 18288

NPI#: 1104456078

9909 Mira Mesa Blvd Ste 200

San Diego, CA 92131

(844)747 0474

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Negron, Yvonne**

Female

License #: AC4634

NPI#: 1275758435

5830 Oberlin Dr Ste 104

San Diego, CA 92121

(619)675 2468

SU -

M 9:00-6:00

TU 9:00-6:00

W 9:00-6:00

TH 9:00-6:00

F 9:00-6:00

SA 9:00-2:00

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Murray, Steven**

Male

License #: 18288

NPI#: 1104456078

9333 Genesee Ave Ste 200

San Diego, CA 92121

(844)747 0474

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Murray, Steven**

Male

License #: 18288

NPI#: 1104456078

5602 El Cajon Blvd

San Diego, CA 92115

(619)601 4103

SU -

M 9:00-7:00

TU 9:00-7:00

W 9:00-7:00

TH 9:00-7:00

F 9:00-5:00

SA 9:00-1:00

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Noonan, Thomas**

Male

License #: AC17328

NPI#: 1023551421

3505 Camino del Rio S Ste 100

San Diego, CA 92108

(619)550 5200

SU -

M -

TU 9:00-5:00

W 1:00-5:00

TH 9:00-5:00

F -

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes

Oh, Young Shig

Male

License #: AC10624*NPI#:* 1871753582

16766 Bernardo Center Dr Ste 111

San Diego, CA 92128

(858)673 1733

SU -

M -

TU -

W -

TH -

F -

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Oh, Young Shig**

Male

License #: AC10624*NPI#:* 1871753582

12396 World Trade Dr Ste 110

San Diego, CA 92128

(858)705 6024

SU -

M 8:00-6:00

TU 8:00-6:00

W 1:00-6:00

TH 8:00-6:00

F 8:00-6:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Ohashi, Evelyn**

Female

License #: AC18487*NPI#:* 1295390433

1545 Hotel Cir S Ste 120

San Diego, CA 92108

(619)693 8559

SU -

M -

TU -

W -

TH -

F -

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Oh, Young Shig**

Male

License #: AC10624*NPI#:* 1871753582

6540 Lusk Blvd Ste C144

San Diego, CA 92121

(858)658 9980

SU -

M -

TU -

W -

TH -

F -

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Oh, Young Shig**

Male

License #: AC10624*NPI#:* 1871753582

11770 Bernardo Plaza Ct Ste 351

San Diego, CA 92128

(858)705 6024

SU -

M -

TU -

W 8:00-12:00

TH -

F -

SA 8:00-12:00

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Onan, Teresa**

Female

License #: AC15303*NPI#:* 1144598988

11665 Avena Pl Ste 205

San Diego, CA 92128

(858)733 0832

SU -

M 8:00-6:00

TU 8:00-6:00

W 8:00-6:00

TH 8:00-6:00

F 8:00-6:00

SA 8:00-6:00

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes

Pfeiffer, Kirk

Male

*License #: AC8484**NPI#: 1467647313*

842 Washington St Ste B

San Diego, CA 92103

(619)339 9980

SU -

M 10:00-5:00

TU -

W 1:30-5:00

TH -

F 11:00-5:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: No***Plummer, Brittany**

Female

*License #: AC16533**NPI#: 1659758795*

16769 Bernardo Center Dr Ste 21

San Diego, CA 92128

(858)675 0007

SU -

M 8:00-6:00

TU 8:00-6:00

W 8:00-6:00

TH 8:00-6:00

F -

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Rachels, Liman**

Female

*License #: AC9962**NPI#: 1821162744*

9625 Black Mountain Rd Ste 306

San Diego, CA 92126

(858)578 8556

SU -

M -

TU -

W -

TH -

F -

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Pham, James**

Male

*License #: AC17605**NPI#: 1265960066*

7612 Linda Vista Rd Ste 117

San Diego, CA 92111

(858)569 5956

SU -

M 9:00-1:00

TU 9:00-3:00

W 9:00-5:00

TH 9:00-1:00

F 9:00-5:00

SA 9:00-2:00

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Quach, Lan**

Female

*License #: AC17514**NPI#: 1477082667*

2727 Camino del Rio S Ste 104

San Diego, CA 92108

(858)334 9311

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F -

SA 9:00-5:00

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Ramos, Maria-Cristina**

Female

*License #: AC16498**NPI#: 1114376571*

2525 Camino del Rio S Ste 320

San Diego, CA 92108

(619)786 3321

SU -

M -

TU 9:30-5:00

W 9:30-5:00

TH -

F 9:30-3:00

SA 9:30-3:00

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes*

Reyes, Estela

Female

License #: AC18494

NPI#: 1376106377

200 W Arbor Dr
San Diego, CA 92103
(844)747 0474
SU -
M 9:00-5:00
TU 9:00-5:00
W 9:00-5:00
TH 9:00-5:00
F 9:00-5:00
SA -

Accessibility: CONTACT PROVIDER

Accepting New Patients: No

Reyes, Estela

Female

License #: AC18494

NPI#: 1376106377

9909 Mira Mesa Blvd Ste 200
San Diego, CA 92131
(844)747 0474
SU -
M -
TU -
W 12:00-4:30
TH -
F -
SA -

Accessibility: CONTACT PROVIDER

Accepting New Patients: No

Reyes, Estela

Female

License #: AC18494

NPI#: 1376106377

4910 Directors Pl Ste 250
San Diego, CA 92121
(800)926 8273
SU -
M 9:00-5:00
TU 9:00-5:00
W 9:00-5:00
TH 9:00-5:00
F 9:00-5:00
SA -

Accessibility: CONTACT PROVIDER

Accepting New Patients: No

Reyes, Estela

Female

License #: AC18494

NPI#: 1376106377

330 Lewis St Ste 400
San Diego, CA 92103
(844)747 0474
SU -
M 8:30-3:30
TU 8:00-0:30
W -
TH 8:30-3:30
F -
SA -

Accessibility: CONTACT PROVIDER

Accepting New Patients: No

Reyes, Estela

Female

License #: AC18494

NPI#: 1376106377

9333 Genesee Ave Ste 200
San Diego, CA 92121
(800)926 8273
SU -
M 9:00-5:00
TU 9:00-5:00
W 9:00-5:00
TH 9:00-5:00
F 9:00-5:00
SA -

Accessibility: CONTACT PROVIDER

Accepting New Patients: No

Robles, Ma Regina Blanca

Female

License #: 19279

NPI#: 1184386419

6719 Alvarado Rd Ste 304
San Diego, CA 92120
(858)673 4400
SU -
M -
TU 9:00-6:00
W -
TH 9:00-6:00
F -
SA -

Accessibility: CONTACT PROVIDER

Accepting New Patients: Yes

Sakya, Namrata

Female

License #: 19330*NPI#:* 1558021519

3080 N Park Way
San Diego, CA 92104
(619)294 6616
SU -
M 9:30-5:00
TU 9:00-4:00
W 9:30-11:30
TH 9:30-1:30
F 9:30-4:00
SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Schlesinger, William**

Male

License #: 18989*NPI#:* 1841881091

3080 N Park Way
San Diego, CA 92104
(619)294 6616
SU -
M 9:00-5:00
TU 9:00-5:00
W 9:00-5:00
TH 9:00-5:00
F 9:00-5:00
SA 9:00-5:00

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Seitz, Gretchen**

Female

License #: AC8597*NPI#:* 1396876959

3320 2nd Ave
San Diego, CA 92103
(619)302 6846
SU -
M 3:00-7:00
TU 3:00-7:00
W 3:00-7:00
TH 9:30-6:30
F 3:00-7:00
SA 10:00-2:00

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Schlesinger, William**

Male

License #: 18989*NPI#:* 1841881091

9150 Chesapeake Dr Ste 120
San Diego, CA 92123
(619)542 0884
SU -
M 8:00-6:00
TU 8:00-6:00
W 8:00-6:00
TH 8:00-6:00
F 8:00-6:00
SA 8:00-2:00

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Seitz, Gretchen**

Female

License #: AC8597*NPI#:* 1396876959

9995 Carmel Mountain Rd Ste B10-B11
San Diego, CA 92129
(844)200 2426
SU -
M -
TU -
W -
TH -
F -
SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Smyth, Carolyn**

Female

License #: AC17515*NPI#:* 1730614413

3636 5th Ave Ste 104
San Diego, CA 92103
(619)431 0547
SU -
M 1:00-5:00
TU -
W -
TH 1:00-5:00
F 9:00-1:00
SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes*

Sperber, Gregory

Male

*License #: AC9297**NPI#: 1629125745*

5030 Camino de la Siesta Ste 208

San Diego, CA 92108

(619)881 0029

SU -

M 9:00-6:00

TU 9:00-6:00

W 9:00-6:00

TH 9:00-6:00

F 9:00-6:00

SA 9:00-1:00

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Szablak, Sharron**

Female

*License #: AC18757**NPI#: 1669019485*

5602 El Cajon Blvd

San Diego, CA 92115

(619)601 4103

SU -

M 9:00-3:00

TU 5:00-8:00

W 1:30-7:00

TH 9:00-3:00

F 9:00-4:00

SA 10:00-2:00

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Tang-Ritchie, Leng**

Female

*License #: AC14241**NPI#: 1497044580*

200 W Arbor Dr

San Diego, CA 92103

(800)926 8273

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: No***Suess, Jill**

Female

*License #: AC7054**NPI#: 1417027871*

4732 Point Loma Ave Ste D

San Diego, CA 92107

(858)382 3938

SU -

M -

TU 9:00-7:00

W -

TH 9:00-7:00

F 1:00-7:00

SA 10:00-4:00

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Tang-Ritchie, Leng**

Female

*License #: AC14241**NPI#: 1497044580*

9333 Genesee Ave Ste 200

San Diego, CA 92121

(844)747 0474

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: No***Tang-Ritchie, Leng**

Female

*License #: AC14241**NPI#: 1497044580*

4910 Directors Pl Ste 250

San Diego, CA 92121

(800)926 8273

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: No*

Tang-Ritchie, Leng

Female

*License #: AC14241**NPI#: 1497044580*

330 Lewis St Ste 400

San Diego, CA 92103

(844)747 0474

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: No***Teixeira, M David**

Male

*License #: AC8821**NPI#: 1780606095*

6612 Mission Gorge Rd Ste B

San Diego, CA 92120

(619)283 2335

SU -

M 9:00-6:00

TU -

W 9:00-6:00

TH 9:00-6:00

F 9:00-6:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Tom, Celia**

Female

*License #: AC1577**NPI#: 1932208089*

1919 Grand Ave Ste 1E

San Diego, CA 92109

(858)270 5454

SU -

M 10:00-6:00

TU -

W -

TH -

F 10:00-6:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Tang-Ritchie, Leng**

Female

*License #: AC14241**NPI#: 1497044580*

9909 Mira Mesa Blvd Ste 200

San Diego, CA 92131

(844)747 0474

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: No***Thomas, Enid Rose**

Female

*License #: AC8407**NPI#: 1659599223*

3023 Bunker Hill St Ste 201

San Diego, CA 92109

(619)548 6733

SU 10:00-1:00

M 12:00-8:00

TU 11:00-7:00

W 9:00-5:00

TH 12:00-8:00

F 2:00-6:00

SA 9:00-5:00

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Tran, Quang**

Male

*License #: AC11040**NPI#: 1821162199*

9625 Black Mountain Rd Ste 306

San Diego, CA 92126

(858)761 5317

SU -

M 2:00-6:00

TU 9:00-3:00

W -

TH 9:00-6:00

F 2:00-6:00

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes*

Tran, Gary

Male

License #: 19351*NPI#:* 12055954695265 University Ave
San Diego, CA 92105
(619)376 2176

SU -

M -

TU -

W -

TH -

F -

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Wang, Minchen**

Male

License #: AC6456*NPI#:* 14179448933023 Bunker Hill St Ste 206
San Diego, CA 92109
(858)688 7294

SU -

M 9:00-6:00

TU -

W 9:00-6:00

TH -

F 10:00-6:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Williams, Melinda**

Female

License #: AC13221*NPI#:* 13263614034870 Santa Monica Ave Ste 2C
San Diego, CA 92107
(619)337 4333

SU 9:00-4:00

M 9:00-6:00

TU -

W 9:00-6:00

TH -

F -

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Velez, Kara**

Female

License #: AC18131*NPI#:* 135683470916776 Bernardo Center Dr Ste 211
San Diego, CA 92128
(619)995 0966

SU -

M 3:00-6:00

TU -

W 9:00-6:00

TH -

F 9:00-2:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Wells, Emily**

Female

License #: AC19023*NPI#:* 18610750469150 Chesapeake Dr Ste 120
San Diego, CA 92123
(619)542 0884

SU -

M 8:00-6:00

TU 8:00-6:00

W 8:00-6:00

TH 8:00-6:00

F 8:00-6:00

SA 8:30-0:30

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Woodhouse, Louella**

Female

License #: AC7670*NPI#:* 19523326863320 3rd Ave Ste B
San Diego, CA 92103
(619)293 3094

SU -

M -

TU 9:00-6:00

W -

TH 9:00-6:00

F 9:00-6:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No

Wunsch, Lindsay

Female

License #: AC18621*NPI#:* 1174096283

1545 Hotel Cir S Ste 185

San Diego, CA 92108

(631)897 4772

SU -

M 8:00-7:00

TU 12:00-7:00

W 8:00-1:00

TH 1:00-7:00

F -

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Zimmer, Barry**

Male

License #: AC9358*NPI#:* 1720102601

11650 Iberia Pl Ste 215

San Diego, CA 92128

(858)487 8246

SU -

M -

TU 9:00-5:30

W -

TH 9:00-5:30

F 9:00-5:30

SA 8:30-0:30

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Cole, Jessica**

Female

License #: AC11426*NPI#:* 1467678797

815 Grand Ave Ste 105

San Marcos, CA 92078

(760)891 8083

SU -

M -

TU 10:30-6:00

W 9:00-5:00

TH 10:30-6:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Yokomori, Sachiko**

Female

License #: AC19970*NPI#:* 1407625973

1545 Hotel Cir S Ste 120

San Diego, CA 92108

(619)693 8559

SU -

M -

TU -

W -

TH -

F -

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Zinner, Travis**

Male

License #: 19038*NPI#:* 1073180394

11665 Avena Pl Ste 205

San Diego, CA 92128

(858)733 0832

SU -

M -

TU -

W 8:00-6:00

TH 8:00-6:00

F 8:00-6:00

SA 8:00-6:00

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes***Gonzalez, Andres**

Male

License #: AC15708*NPI#:* 1841857729

1595 Grand Ave Ste 100

San Marcos, CA 92078

(760)736 6767

SU -

M 8:00-5:00

TU 8:00-5:00

W 8:00-5:00

TH 8:00-5:00

F 8:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients: Yes*

Son, Jae Jin

Female

License #: AC8587*NPI#:* 1649619412

277 Rancheros Dr Ste 101

San Marcos, CA 92069

(760)650 6660

SU -

M 9:00-6:00

TU -

W -

TH -

F -

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Handy, Heidi**

Female

License #: AC8648*NPI#:* 1518024785

9307 Carlton Hills Blvd Ste A

Santee, CA 92071

(619)280 7784

SU -

M 10:00-5:00

TU 10:00-5:00

W 10:00-5:00

TH 10:00-5:00

F 10:00-3:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Seo, Wanhee**

Female

License #: AC18035*NPI#:* 1366072126

9225 Carlton Hills Blvd Ste 18

Santee, CA 92071

(858)282 8320

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Dang, Sheri**

Female

License #: AC17713*NPI#:* 1225567001

9225 Carlton Hills Blvd Ste 18

Santee, CA 92071

(619)738 5374

SU -

M 9:20-6:00

TU -

W 9:20-1:30

TH 9:20-6:00

F -

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes**Marcy, Melissa**

Female

License #: AC17002*NPI#:* 1730535519

10201 Mission Gorge Rd Ste A

Santee, CA 92071

(619)354 9570

SU -

M -

TU 9:00-3:00

W -

TH 12:00-6:00

F 9:00-3:00

SA 10:00-4:00

Accessibility: CONTACT PROVIDER*Accepting New Patients:* No**Mayberry, Charles**

Male

License #: AC3641*NPI#:* 1487685012

765 Academy Dr

Solana Beach, CA 92075

(858)755 5215

SU -

M 10:00-6:00

TU 10:00-6:00

W 10:00-6:00

TH 10:00-6:00

F 10:00-6:00

SA -

Accessibility: CONTACT PROVIDER*Accepting New Patients:* Yes

Son, Jae Jin

Female

*License #: AC8587**NPI#: 1649619412*

990 Highland Dr Ste 320

Solana Beach, CA 92075

(760)650 6660

SU -

M -

TU 8:00-8:00

W -

TH -

F -

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Wells, Emily**

Female

*License #: AC19023**NPI#: 1861075046*

444 S Cedros Ave Ste 120

Solana Beach, CA 92075

(760)566 7848

SU -

M -

TU -

W -

TH -

F -

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Kim, Min Joo**

Male

*License #: AC13813**NPI#: 1689941791*

115 Main St

Vista, CA 92084

(760)726 9660

SU -

M -

TU -

W -

TH 8:30-6:00

F -

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Stevenson, Nancy**

Female

*License #: AC4332**NPI#: 1306009956*

765 Academy Dr

Solana Beach, CA 92075

(858)344 0889

SU -

M -

TU -

W 9:00-6:00

TH -

F -

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Chen, Yuelan**

Female

*License #: AC9705**NPI#: 1265696785*

1830 Hacienda Dr Ste 3

Vista, CA 92081

(760)806 0064

SU -

M 9:00-5:00

TU 9:00-5:00

W 9:00-5:00

TH 9:00-5:00

F 9:00-5:00

SA 9:00-1:00

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes***Park, Seonghyeon**

Male

*License #: AC18102**NPI#: 1295254324*

410 S Melrose Dr Ste 200

Vista, CA 92081

(760)630 8060

SU -

M 9:00-5:30

TU 9:00-5:30

W -

TH 9:00-5:30

F -

SA -

*Accessibility: CONTACT PROVIDER**Accepting New Patients: Yes*

Song, Carol

Female

License #: AC11388

NPI#: 1518166685

1000 Vale Terrace Dr

Vista, CA 92084

(760)631 5000

SU -

M 8:00-7:00

TU 8:00-7:00

W 8:00-7:00

TH 8:00-7:00

F 8:00-5:00

SA 9:00-4:00

Accessibility: CONTACT PROVIDER

Accepting New Patients: Yes

E. Índice de proveedores

A	
ABAID, LISA.....	248
ABAYA, HONEYLYNN.....	208
ABAZA, SAM.....	740
ABBOUD, JEAN-PAUL.....	515
ABCEDE, GAIL FRANCES LIEZL....	368
ABDALLAH, ALI.....	1449
ABDALLAH, WALID... 122, 156, 188, 542	
ABDELWAHHAB, EANAS.....	312
ABDOLLAHI, KARIM.....	353
ABDOU, MARINA AWADALLA.....	751
ABDOU, RAMI..... 96, 125, 519, 657	
ABDULRAHIM, AHMED.....	1100
ABEDI ASL, ESRAFIL.....	388
ABELHAD, NADIA.102, 148, 179, 604, 2396	
ABELL, GEOFFREY.....	1597
ABERCROMBIE, SHERI.2315, 2477, 2478	
ABITBOL, JEAN-JACQUES.702, 708, 763	
ABOU ABBASS, AHMAD..... 399, 485	
ABRAHAMSEN, KELSEY..... 312, 664	
ABRAMSON, MARIA.....	414
ABRAMSON, RACHEL.....	1597
ABRAVESH, SOODABEH.....	464
ABSHIRE, BRET.....	528, 529
ABSI, CHRISTIAN.....	192
ACCESS TO INDEPENDENCE.....	2431
ACEVEDO, SUSANA.....	1755
ACEVEDO-FREY, SYLVIA.....	735
ACKROYD, ARCHIE.....	2587
ACOSTA, AZUCENA.571, 775, 2466, 2467, 2508, 2509	
ADAMI, REBECCA..... 2023, 2193, 2194	
ADAMS, CONRAD.....	785
ADAMS, LAURA.....	326, 698
ADAMS, MONA.....	2531, 2537, 2588
ADDO, BELINDA.....	580
ADEDAYO, TOLULOPE.....	208
ADEGBITE, ADEKUNLE.....	208
ADEMA, DONALD.....	78
ADEYEMO, OLUWAFEMI.....	228
ADJAN, ROULA.....	1228, 1598
ADLOUNI, LOUBABA.....	1598
AFC URGENT CARE OF BONITA.2620	
AFC URGENT CARE OF SAN DIEGO.	2620, 2621
AFFLALO, SUZANNE.....	78
AFRA, ROBERT.....	176
AFSHAR, MASOUD.....	724
AFSHAR, YAMA.....	39
AGAJANIAN, RICHY.....	215, 509
AGANOVIC, LEJLA.....	321, 683
AGARWAL, ASHOK.....	206, 217
AGARWAL, MADHU.....	557, 558
AGENA, CYAN.....	525, 756
AGEZE, DANIEL.....	178
AGGARWAL, SAURABH..206, 207, 735	
AGHILI, ROXANA.1822, 1876, 2086, 2265, 2266	
AGING & INDEPENDENCE SERVICES.....	2438
AGNIHOTRI, PARAG.....	2191
AGORRILLA, MARIA.....	424, 739
AGUERO, AMETHYST.....	1259, 1260
AGUERO, PETER.....	2343
AGUEY, OMAR.....	1786, 1787
AGUILA, YESENIA.....	609, 2114
AGUILAR, EDITA.....	1262
AGUILAR, MICHELLE.....	208
AGUIRRE, KRISTEN.....	567, 734
AGYEMAN, KOFI.....	529
AGYEMANG, ALBERTA..... 1902, 1903	
AHADIAT, OMEED.....	203
AHDOOT, JACOB.....	249, 255
AHDOOT, MORRIS.....	258
AHL, SCOTT.....	203
AHLUWALIA, JUSLEEN.....	622
AHMAD, AAKIF.....	1443
AHMAD, ASHRAF. ... 378, 379, 594, 595	
AHMADIEH, KIAN.....	708, 2375
AHMED, MOHAMED.....	792
AHMED, SARAH.....	466, 467
AHMED, SYED.....	632
AHN, JENNIFER.....	641
AHN, JORDAN.....	312, 664
AHSAN, NUSRAT.....	43
AILINANI, HARY.....	225, 753
AINSWORTH, DELISSA.....	1982, 2303
AISAGBONHI, OMONIGHO.....	1977
AIZIN, VITALI.102, 114, 284, 298, 635, 728	
AJIR, MAHYAR.....	17
AKASHI, MARC.....	1160
AKLADEOS, NERMEEN.....	79
AKONG, KATHRYN.....	2289
AKPOROTU, AKPOBO.....	425
AL ANI, NAJWAN.....	1194, 1195
AL HARASH, ABDALHAMID.743, 744, 758, 759	
AL KHIAMI, BELAL.298, 512, 1941, 2036	
AL-AZAWI, HIND.....	375, 557
AL-DAHMAN, ZAID.116, 169, 185, 201, 299, 334, 584, 641, 1868	
AL-MSHHDANI, AYSER.155, 156, 541, 646, 1555	
AL-NASER, RAED.....	346
AL-NOURI, OMAR.2009, 2010, 2353, 2360	
AL-SALEH, YADANI.....	37, 69, 635
AL-TAMEEMI, AHMED.....	27
ALAGIRI, MADHU.....	2293
ALAMAR, ALI.....	25, 37
ALANI, ANAS.....	2108
ALANIZ, MATEO.....	18, 1123, 1124
ALASANTRO, LORI.....	91, 92, 291
ALASSIL, SALLY.....	1522
ALAYO, ERICK.....	110, 111
ALB, SIMONA.....	18, 51
ALBINO, NICHOLAS.....	1598, 1599
ALBORZIAN, SHERVIN.....	1225
ALBRIGHT, KELSEY.312, 664, 1982, 2304	
ALDANA, NANCY.....	1263
ALDOUS, JEANNETTE.635, 729, 1523, 1733, 1734, 2180, 2391	
ALEXANDER, AUSTIN.....	445, 525
ALEXANDER, BRENTON. ....1895, 2102	
ALEXANDER, DEBORAH.....	267
ALEXANDER, GERALD.....	272
ALEXANDER, SINDU.....	646
ALFAY, WISAM.....	437, 738
ALFONSO, ALVIN.....	1914, 2144
ALGHAMDI, ASMA..... 1195, 1306, 1706	
ALGHURAIBI, OHOUD.....	1881
ALGRA, JEFFREY.....	2050, 2302
ALHANKAWI, DHUHA.....	164
ALI, ABBAS.....	733

E. Índice de proveedores

ALI, RAED.....272	AMAYA, RICARDO.....1175	ANDREY, JEFFREY.112, 509, 632, 743, 774
ALIKHANI, SHAHRIAR.....354	AMBO, STANLEY.....1791	ANDRY, JAMES.141, 145, 327, 702, 1834, 1835, 2015, 2363
ALIMONOS, LYSISTRATI.1149, 1216, 1217, 1289, 1290, 1556, 1557, 1558, 1559, 1774, 1775	AMBROSE, CHRISTOPHER.100, 578, 783, 1799, 2414	ANEKWE, CHINWE.....208
ALJAWADI, GEORGIA.....18, 51	AMERI, BIJAN.....763, 764	ANGAROLA, JEFF.....590, 716
ALKATIB, RHONDA.....601, 626, 2258	AMERICARE ADULT DAY HEALTH CARE CENTER.....2441	ANGER, JENNIFER.....330, 708
ALLAM, SHAMILI.....369	AMERICARE ADULT DAY HEALTH CARE CENTER†.....2619	ANGRA, KUNAL.....92, 107, 163, 567, 622
ALLAMEHZADEH, REZA.....460, 461	AMIN, JATIN.....207, 217, 501, 512, 738	ANGUIANO, FRANCISCO.....121
ALLEN, ANNE.....181, 767	AMIN, SAJNI.....744	ANOSHIVANI, ARDE.....479
ALLEN, ELIZABETH.....1978, 2255	AMINIAN, AFSHIN.....474, 489	ANSARI, HOSSEIN.....300
ALLEN, JONATHAN.....232	AMINIAN, ARASH.....272, 273, 418	ANSARI, RASHAD.....784
ALLEN, KATHERINE.....1284	AMINLARI, ARDALAN.....778	ANSARI, SHORA.....469
ALLERS, JENNA.....312, 1982	AMIRNOVIN, RAMBOD.....2266	ANTHONY, JULIAN.....200, 588
ALLOS, ALEXANDER.....136, 346, 694	AMJAD WARYAM, ASHEE AMJAD.....208	ANTHONY, SHARON.....609
ALLSUP, VICTORIA.....662, 2293	AMMIRATI, GIUSEPPE.....321	ANTONYAN, HOLLY.....548
ALMANSOUR, MUMTAZ.....25	AMORY, DAVID.....580	ANWAR, YASMIN.....2052, 2395
ALMANZA, MORENNE.....264	AMOS, MARIA.....609, 2114	ANYADIKE, CYRIL.....507
ALMIRANTE, MARIA ELENA.....670	AMRA, NOOR.....467	ANZA HOUSE.....2435
ALNAHLAWI, BASMA.137, 728, 784, 2389, 2414	AMREEN HOME.....2435	AOTO, KIM.90, 157, 190, 340, 544, 655, 1796, 1840, 1854, 1873, 1959, 2027, 2062, 2238, 2239, 2516, 2526, 2532, 2559, 2576, 2588
ALOMARI, IHAB.....450	ANAND, GOBIND.....1929, 2172	APOSTOLIDES, JOHN.....708
ALSHARIF, KAIS.....355, 391	ANASTASIU, DANIELLE.....433	APPEL, RICHARD.....249
ALSHEIKH, HUDA.....1278, 1279	ANAYA, MANUEL.....632	APPLEGET, JOSEPH.....2145
ALSTEEN, STEPHANIE.....609, 2114	ANBAR, RAN.....312	APRIL, MONIQUE.....2067, 2068, 2397
ALTAMIRANO, LEON.....2387, 2503	ANDAYA, MIKHAEL.....1306	AQUINO, FELINO.536, 1298, 1299, 1385, 1386
ALTRIKI, MOHAMAD.424, 425, 744, 746	ANDER, AZIZ.....725, 2384	ARAIZA, ERNESTINA.....159, 1841, 2445
ALTURJUMAN, AHMAD.....501	ANDERSEN, CLAIRE.444, 445, 586, 754, 755	ARANETA, TOMAS.....45
ALVARADO, EDMUND.....1628	ANDERSEN, MICHAEL.....513	ARBOR HILLS NURSING CENTER.....877, 2427
ALVAREZ, ARMANDA.....739	ANDERSON, ALBERT.....32	ARCA, CHRIS.....581
ALVAREZ, DIANA.....540, 639	ANDERSON, CARLEY.....664	ARCEGOMEZ, LAURA.....18, 1124, 1125
ALVAREZ, ILIAN.....733	ANDERSON, ELAINE.112, 154, 183, 332, 632, 1807, 1838, 1864, 2022, 2177	ARCHAMBAULT, CHRISTIAN.....1600
ALVAREZ, IRAIDA.....730	ANDERSON, GREGORY.....683, 684	ARCHIBALD, JOHN.202, 224, 443, 518, 751, 2547, 2588
ALVAREZ, PAMELA.....512	ANDERSON, KENDELL.....1523	ARCOVEDO, RODOLFO.....138
ALVAREZ-ESTRADA, MIGUEL.18, 51, 60, 75, 628, 729, 1450, 1706, 1707, 2166, 2390	ANDERSON, LINDSEY.....164	ARD, SCOTT.....357, 358
ALWAHAB, AREEJ.....1228	ANDERSON, MANDY.....1745	ARDIGO, GREGORY.....507, 743
ALWASH, MUSTAFA.....1207	ANDERSON, MARLA.....485	ARELLANO, JACQUELINE.160, 285, 607, 1843, 1901, 2111, 2112
ALY, DILYANA.....525, 791	ANDERSON, MATTHEW.....225, 664	ARGOUD, GEORGES.....110, 734, 735
ALYAS, ALISIA.....158, 664, 1234, 1235	ANDERSON, TRACEY.....502	ARGUELLO, JUAN.....415
AMANAT, SOROOSH.....1124	ANDOLINA, SARA.....564	ARIAS ALISHAHI, ELIZABETH.....218
AMANN, CHRISTOPHER.....1918, 2155	ANDREE, GREGOR.662, 1599, 1600, 2293, 2294	ARIELLA, LYNDA.....2387, 2504
AMARAL, MARGARET.....1956	ANDREWS, BRAD.....567, 2075	
AMAYA SPRINGS HEALTH CARE CENTER.....2434	ANDREWS, JOHN.....1523, 1524	

E. Índice de proveedores

ARJOMANDI, NEDA.....393	ASLIAN, AZITA.541, 646, 1324, 2060, 2220	BADIE, MEHRNAZ.....47
ARLATA, TAMANTHA.....1770	ASPIRAS, JULIE.....56	BAE, CHAY.....369
ARLINGHAUS, RENE.....2448	ASPREC, JOSEPH.....43	BAE, WANJUN.....455
ARMANI, AVA.175, 326, 699, 784, 1859, 2010, 2353, 2415	ASSADIAN, MEHRAK.....621, 1433, 1434	BAEK, KILHYO.564, 565, 769, 1330, 1331
ARMANIOUS, NANCY.....32	ASSELIN, LYNETTE.....1791	BAEZ, BEATRICE.....1307
ARMEEN, GARY.....312, 1982, 2304	ASTOURIAN, PATRICK.....585	BAEZ, ELIZABETH.....769
ARMENTA, JORGE.664, 1235, 1328, 1629	ATCHISON, MARVIN.....230, 792, 793	BAGBY, JESSICA.....1918, 1919, 2156
ARMSTON, LINDSEY.....106, 1802	ATHALYE, LEELA.....362	BAGHERI, BITA.....242
ARMSTRONG, PATRICK.....182, 582	ATHILL, CHARLES.....102, 604	BAGHOUMIAN, MARINEH.....2559
ARNETT, JUSTIN.....303, 649, 650	ATIENZA, PAMELA.....1160	BAGINGITO, AUSTIN.....1195, 1451, 1452
ARNOLD, REBECCA.....155, 2445	ATIGA, SCHUBERT.....24, 121, 1817	BAGINSKI, LEON.....464
AROCHO-SALGADO, MIRELIS.138, 696, 697, 1833, 1885, 2349	ATILLO, RONALD MAR.....286, 609	BAGRODIA, ADITYA.....330, 708
ARONLEE, TRACY.....2478	ATKINS, CHEYENNE.....525	BAHADOR, AFSHIN.....632
ARRIESGADO, MINNETT.....649	ATKINS, JOYCE.....693	BAHADORANI, JOHN.....358
ARRIETA, ANTONIO.....473	ATKINS, WILLIAM.....525, 756	BAHENA-COLLEY, SANDRA. 547, 678
ARRIETA, IRIS.....776, 2408	ATMAR, AKMAL.....545, 2063	BAHIA FAMILY MEDICAL GROUP INC.....15
ARRIETA, NOEMI.75, 729, 1246, 1247, 1707, 1708, 2390	ATTIA, NADER.207, 217, 425, 501, 512, 738	BAHRAMZI, MARIA.....1452, 1453
ARROYO VISTA NURSING CTR.879, 2431	ATTOBRA, TATIANA.....791	BAI-TONG, SHIYU.662, 1849, 1945, 2200
ARROYO, ARIANNA.....520	AUSTIN, ANDREA.....1918, 2156	BAIG, NABIL.....111, 144
ARROYO, VANIA.....664	AUSTIN, MARK.....500	BAIK, JESSICA.....60
ARTHUR, KRISTINE.....39	AUSTIN-PAGE, LUKAS.....2266	BAILEY, CHARLES.....86
ARTS, SERENA.....1386, 1387	AVALLONE, THOMAS...188, 650, 2559	BAILEY, CRISTINA.....79
ARUTYUNOV, BORIS.....2183	AVALOS, ROY.....159, 284	BAILEY, JACOB....320, 679, 1997, 2325
ARVIZU, MARGARITA.....2114	AVIARA HEALTHCARE CENTER.876, 2425	BAILEY, THOMAS.....464, 594
ARVIZU, PALOMA.....1285	AVILA, MICHAEL.....29, 1247	BAILEY, TIMOTHY.....182
ARYA, MALVIKA.....303, 650	AVOCADO POST ACUTE.....876, 2422	BAILIS, JESSICA.....318, 1992, 2456
ARZATE, VANESSA.....252	AWADALLA, FARAH.....504, 740	BAILONY, AHMAD.....1324
ASFAR, RAFID.....137, 696	AWDISHO, ALAN.....27, 154, 1207, 1838	BAILONY, MOHAMMED.....1324
ASHBY, KEVIN.....203	AWDYKOVYCH, MARTA.....1600	BAIN, NATALIE.....1453
ASHIER, SAURABH.....753	AYELE, MAHOGANY.....769, 2398	BAISLEY, SHAWN.....1105, 1267
ASHIZAWA, JAMES.....73	AYON MARTINEZ, CARLOS....79, 1784	BAJWA, SAIF.....43
ASHKENAZE, DAVID.....353, 354	AYSON, NICOLE.....1601	BAKER, BRUCE.....500
ASHLEY, BLAKE.....399, 400	AZAD, HABIB.....459, 461	BAKER, DAVID.....93, 169
ASHMAN, ELLEN.....285, 609	AZAM, ARSALAN.....108	BAKER, LINDZEE.....312
ASHMAN, RANDY.....162	AZIMI, AYSUN.....1601	BAKER, ROBERT.....225, 753
ASHRAF, HADIA.....32	AZIMI, NASSIR.....332	BAKER, SERENA.....209
ASHRAF, HEBA.....203, 204, 244, 430		BAKER, TANYA.....2115
ASHTARI, MOZHGAN.....39	B	BAKHTIARY, PEJMAN.....749
ASHTIANI, ALI.....237	BABAKNIA, ARDALAN.....244	BALAKER, ASHLEY.....261, 388
ASIMAKOPOULOS, FOTIOS.....1931	BABKINA, NATALIA.....187	BALBOA NEPHROLOGY MED GRP INC, .....2210
ASIS, STEPHANIE.....2526, 2537, 2559	BACHARACH, REBECCA.....1450, 1772	BALBOA NURSING AND REHAB CTR. ....2431
	BACKMAN, JOHN.....159	
	BACON, LOUISE.....400, 485, 486	
	BADALYAN, SEDA.....295	
	BADER, RACHEL.....678	

E. Índice de proveedores

BALDERAS-MAGALLANES, RODOLFO.....	22, 113	BARRON, KAVITA.....	2479	BECERRA, GABRIEL.....	184, 2448
BALDONADO, ANALICIA.....	1170, 1171	BARRY, JEFFREY.....	1919, 2156, 2157	BECK, TIFFANY.....	248
BALDWIN, ANDREA.....	565, 2068	BARTHEL, ROBERT.....	296	BECKER GALUSHA, JANE.....	435
BALDWIN, DONNA.....	192, 1380, 1381	BARTZ, BRYAN.....	2344	BECKER, JANTIMA.....	312, 576, 726
BALIKIAN, PHILIP.....	587, 2100	BARTZ, PAUL.....	181, 200, 740	BECKER, OLGA.....	194, 672
BALL, SHELDON.....	635, 2183	BARVALIA, MIHIR.....	114, 148, 154, 155	BECKMAN, KARI.....	184
BALL-ZONDERVAN, MONICA.....	45	BARVE, PRANAV.....	33, 45	BEDFORD, RONALD.....	209, 503, 739
BALLARD, BROOKE.....	2032, 2363	BASA, GRACIOUS.....	209, 503	BEDRAN, ASAD.....	42
BALLAS, JERASIMOS.....	1847, 1943	BASCH, MICHAEL.....	82	BEDROSIAN, DIANE.....	1791
BALTRUS, JUSTINEANN.....	730, 2506	BASEN, ANGELA.....	40	BEHNAWA, SUSAN.....	78
BAMFORD, LAURA.....	2180	BASEN, TYLER.....	448	BEHR, CHRISTOPHER.....	702
BANDAK, DIANA.....	2537	BASERI, BABAK.....	112, 215, 509, 511, 632, 633, 743, 774	BEHREND, TERRY.....	642
BANDARI, DANIEL.....	374	BASHAM, CLAUDIA.....	639	BEIERMEISTER, KEITH.....	325
BANDUKWALA, RAHIL.....	363	BASICH, CANDACE.....	46	BEJKO, ETLEVA.....	578
BANERJEE, PUSHPENDU.....	294, 299	BASIN, NATALIE.....	520, 576, 664, 726, 753	BEKENDAM, PAMELA.....	749
BANGS, SASHA.....	1329	BASS, GURGIANA.....	2316, 2479	BEKENDAM, PETER.....	749
BANIADAM, BEHZAD.....	55	BAST, SIDNEY.....	515	BELANGER, TANYA.....	722, 1672, 1673, 2381
BANKS, SARAH.....	2316, 2478, 2479	BASTUBA, MARTIN.....	330, 708	BELEN, NEZER.....	1179, 1387
BANSAL, NEERAJ.....	767	BATHAEE, FARSHAD.....	265, 417	BELINSKY, MARIA.....	583, 2448, 2449
BANSAL, PREETI.....	1852, 1871, 2040, 2080, 2231, 2532, 2538, 2588	BATIN, FRANCES.....	33	BELL, ANDREA.....	286
BANTA, WARREN.....	215	BATISTA, OSVALDO.....	1629	BELL, IRA.....	428
BANTHIA, VISHAL.....	125, 519, 657	BATRA, MUNISH.....	526, 531, 699, 708	BELL, JENNIFER.....	577, 780, 2467, 2509
BANUELOS, LYDIA.....	379, 467, 595	BATRA, REEMA.....	333	BELL, TRACY.....	2166
BAO, GANG.....	679, 696	BAUM, PETER.....	1708	BELLA VISTA HEALTH CENTER.....	878, 2429
BARADARIAN, SAM.....	329	BAUMAN, LAURA.....	2173	BELLA, ARCHIE.....	54, 69
BARBA, ARNEL.....	181, 2145	BAUMANN, DANIELA.....	2516, 2526, 2532, 2538, 2549, 2559, 2560, 2576, 2589	BELLINGHAUSEN, AMY.....	1919, 2157
BARBA, DANIEL.....	199	BAUTISTA, JENNIFER.....	167, 172, 774, 781	BELLO, JUSTINE.....	42
BARBA, DAVID.....	2012, 2360	BAUTISTA, LUIS.....	1101, 1454	BELLO, OSAGIE.....	215, 216, 509, 1520
BARBADILLO, FERDINAND.....	1160, 1755, 1756	BAWA, MANEESH.....	702	BELOTT, PETER.....	332
BARBADILLO, TERESITA.....	1325	BAXTER, SALLY.....	1957, 2231	BELTRON, KIMBERLY.....	1387
BARBOZA, GEORGE.....	503	BAXTER, STEPHANIE.....	283, 603	BELVERUD, SHAWN.....	2361
BARE, IAN.....	45	BAYAT, HAMED.....	183, 583, 1865, 2096	BEMANIAN, SHAHROOZ.....	204, 244, 245, 455
BAREISS, ANNA.....	307	BAYLIS, CHRISTOPHER.....	1914, 2145	BEN-HAIM, SHARONA.....	1800, 2013, 2361
BARI, MONICA.....	445, 525	BAYLON, ALDO.....	134, 1827, 2442	BENARD, ROBERT.....	2115
BARLEBEN, ANDREW.....	2011, 2360	BAYSHIRE CARLSBAD.....	876	BENCH, SHAWN.....	699, 2354
BARNARD, LUKE.....	336	BEAR, JONATHAN.....	174, 320	BENDER, FRANK.....	197
BARNES, RYAN.....	699, 2354	BEAUCHAMP-WALTERS, JULIA.....	2294	BENDER, RICHARD.....	460, 746
BARNHILL, JOSHUA.....	354	BEAUDRY, AMANDA.....	2538, 2589	BENESCH, ERIN.....	479
BARR, AUSTIN.....	224, 443, 751	BEAUMONT, THOMAS.....	2012	BENIK, KAREN.....	428, 429
BARR, JESSICA.....	258	BEAZER, ALEX.....	1957, 2231	BENITEZ, MARTHA.....	1524, 1525
BARRERA, HUGO.....	138	BECERRA SONGOLO, TOSHA.....	282, 601, 1895, 2102	BENNER, ERIC.....	48
BARRERA, JOSEPH.....	453	BECERRA, CARLOS.....	255	BENNETT, LAUREN.....	242
BARRERA, KAYLENE.....	230, 760, 793			BENSON, JIMI.....	27
BARRIO, VICTORIA.....	152, 537				

E. Índice de proveedores

BENZL, JERRY.....	464	BIERMAN, DINA.....	548	BODKIN, DAVID.....	333
BENZL, ROBERT.....	445	BIFFL, SUSAN.....	2050, 2302	BOECK, CARL.....	2590
BERENTER, JAY.....	171, 315	BIGGER, ALAINA.....	639	BOEING, KRISTINA.....	2146
BERG, CHRISTOPHER.....	250	BILAL, BASSAM.....	42	BOEN, MONICA.....	622
BERGEN, SOPHEA.....	2304	BILAN, NATALIA.....	58	BOGUNIA, ARIKA.....	678
BERGER, COLBY.....	171, 315	BILLINGTON, KATHERINE.....	2145	BOHR, CHRISTINA.....	1525
BERGERON, PATRICK.....	2004, 2344	BILOTTA, NATALIE.....	609, 2115	BOISKIN, MARK.....	584, 642
BERGGREN, ERICA.....	641, 730, 732, 1745, 1746	BINAVI, HOWNAZ.....	91, 160, 352, 609	BOKOSKY, JOHN.....	303
BERGMARK, JAMIE.....	2538, 2589	BINDAL, ANKUR.....	119, 132, 644, 672	BOLADIAN, LANA.....	264
BERKOFF, GREGORY.....	291	BINDER, NICHOLAS.....	89, 156, 188, 303, 336, 650, 2516, 2526, 2539, 2560, 2577, 2590	BOLAR, DIVYA.....	321, 684
BERMAN, BRETT.....	102, 114, 284	BINDER, PRATIBHA.....	169, 302, 513, 573, 776, 1851, 1950, 2039, 2080, 2408	BOLO, KYLE.....	303, 650
BERMAN, ZACHARY.....	1998, 2328, 2329	BINETTE, DONYA.....	1331, 1332, 2068	BONAGIRI, PRANAY.....	296
BERNADETT, ALEX.....	628, 2166, 2167	BINGHAM, LUCAS.....	349	BOND, KIMBERLEE.....	2230
BERNALES-MENDEZ, DEZARINA.....	335, 336	BIRCH PATRICK CONV CTR.....	2422	BONDRE, IOANA.....	302
BERNARDO, RACHELLE.....	727, 1689, 1690	BIRD, JEREMY.....	286	BONEV, VALENTINA.....	562
BERNARDO, STACEY.....	79	BISCHER, MARGARET.....	286	BONILLA, EDWARD.....	222
BERNETICH, MEGHAN.....	2398	BISHOP, LESLIE.....	91, 180, 582	BONNICI, MARCELLA.....	85
BERNSTEIN, DAVID.....	526	BISHOP, MELISSA.....	1454	BONSU, BEMA.....	545, 1325, 1601, 1602
BERRY, JULIE.....	779	BISUNA, BLANCA.....	46, 453	BOODMAN, SANDRA.....	252
BERRY, MEGHAN.....	664	BISWAS, MIMI.....	201, 207, 217, 501, 502, 738	BOONJINDASUP, AARON.....	580
BERRY, MICHAEL.....	91	BIXBY, MINDY.....	87	BOOTH, CHRISTOPHER.....	1992, 1993, 2456
BERTELSEN, CAITLIN.....	559	BJORNSON, MICHELE.....	769	BOQUIN, ENRIQUE.....	83, 84
BERUMEN, JENNIFER.....	2355	BLACK, JASON.....	50	BORDIN-WOSK, TALYA.....	1935, 2183
BESHAI, ALFRED.....	236, 450	BLACK, NICHOLAS.....	292, 1919	BORECKY, ADAM.....	351
BESSUDO, ALBERTO.....	166, 509, 633, 723	BLAIS, MICAH.....	327, 702	BOROK, ZEA.....	298, 637
BESTERFELDT, LYDIA.....	1388	BLAKE, GARY.....	646, 1559, 2220	BORQUEZ, ALEJANDRO.....	2043, 2260
BETTS, ANDRES.....	500, 591	BLAKEMORE, JASON.....	252, 253	BORRAJERO, OBEL.....	1891
BEVINS, ELIZABETH.....	672, 1948, 2211	BLAND, HOWARD.....	363	BORSAN, COSMIN.....	1708, 1709
BEYENE, YEMISRACH.....	25	BLAND, JACELIS.....	2093, 2378	BORTNER, ADAM.....	1455, 1456
BHAGAN, SHANNA.....	1630	BLASKIEWICZ, DONALD.....	1800, 2013	BORTNIKER, ETHAN.....	164, 165, 293, 629
BHAJU, JESHMIN.....	678	BLISS, MORGAN.....	1854, 1874, 2041, 2085, 2241	BORTZ, DAVID.....	144, 296
BHANGOO, AMRIT.....	473	BLOCK, EDWARD.....	455	BORTZ, PASCAL.....	145, 326
BHATIA, PRERANA.....	168	BLOCKER, NIRIT.....	1657	BOSTON, LAURA.....	1119, 1120, 1432
BHATIA, SHAGUN.....	1853, 1871, 2040, 2081, 2231, 2532, 2539, 2589	BLOSSER, JOSHUA.....	79	BOSWELL, GILBERT.....	321, 684
BHATT, JAY.....	469	BLOSSER, NICHELE.....	82	BOUCHARD, REID.....	578, 783
BHATT, JIKEN.....	604	BLUCHER, CHERI.....	524	BOULDER CREEK POST ACUTE.....	878, 2430
BHATTACHARJEE, RAKESH.....	2289	BLUM, RICHARD.....	1384, 1385	BOURLAND, BRYAN.....	702
BHOYRUL, SUNIL.....	145, 326	BLUMENFELD, LIZA.....	325, 697	BOUTELLE, AMY.....	1903
BIALOSTOZKY, MARIO.....	2266	BOBICK, BRIAN.....	576	BOUTELLE, BARBARA.....	198, 588, 694, 728, 733
BIAMA, RICHARD.....	529, 764	BOBO, JERRY.....	541, 547, 644, 672	BOUTELLE, DAVID.....	198, 588, 694, 728, 783
BIANCHI, CHRISTIAN.....	526	BOCK, MATTHEW.....	2260	BOUTELLE, KERRI.....	318, 1993, 2456, 2457
BICKLER, STEPHEN.....	2368	BODIFORD, SAMANTHA.....	1455		

E. Índice de proveedores

BOW, LINDA.....	264, 417	BRIGHTON PLACE SAN DIEGO.879,	BRUHN, JOSHUA.....	1196
BOWNES, MARISA.....	252	2431	BRUMUND, KEVIN.307, 657, 1962,	
BOYD, JAMES.....	60, 293	BRIGHTON PLACE SPRING VALLEY.	2242	
BOYD, LISA.....	1982, 2304	.....	BRUNETTO, HEIDI.....	436, 2033, 2465
BOYDSTON, EMILY.....	735	.....	BRUNO, KELLY.....	1895, 2102
BOYS, JOSHUA.....	2018	BRINSON, CIRSTEN.....	218	
BRAAMSE, CHLOE.....	769	BRION, PAUL.....	578, 784	
BRACE, ELION.....	22	BRION, SONJA.....	1242	
BRACEY-ASIEDU, ALEKSANDRYA.		BRIONES COLMAN, FELICIA.1525,		
.....	106, 721, 1802	1526		
BRADLEY COURT SPECIAL CARE		BRODAK, DANIKA.....	108	
CENTER.....	876	BRODAK, PHILIP.....	532, 767	
BRADSHAW, MICHAEL.....	623	BRODERICK, RYAN.....	699, 2355	
BRADY, KATELYN.....	1903	BRODSKY, DENNIS.....	576	
BRADY, MATTHEW.....	399, 484, 486	BRODSKY, MARK.....	1457	
BRADY, PATRICIA.....	1456	BROGAN, JACQUELINE..	152, 537, 582	
BRAHMBHATT, BHOOMI.....	646	BROMAN, GRETCHEN.1332, 1333,		
BRANCH, CODY...321, 684, 1998, 2329		1334		
BRANNEN, MANDY.....	150	BROOKDALE SAN JUAN		
BRAR, HARBINDER.....	509, 512, 513	CAPISTRANO.....	879	
BRAR, KARANBIR.....	84	BROOKMAN, MYLES.....	379	
BRAR, SIMERJEET.....	315	BROOKS, JEFFREY.....	577	
BRAR, SUKHDEEP.....	209	BROOKSHIER, TRENT.....	670	
BRASKET, ADAM.....	209	BROOME, HELEN.....	1978, 2255, 2256	
BRAUN, TARA.....	163, 623	BROUDY, ABRAHAM.....	1160	
BRAVERMAN, IRA.....	54, 1321	BROUHA, BROOK.....	163, 623	
BRAVO, ARLENE.....	249, 447, 759	BROUHA, SHARON.....	321, 684	
BRAVO, RICARDO.....	664	BROWN, BRANDON.....	1196, 1457	
BRAYTENBAH, MELANIE.106, 1802,		BROWN, COLLEEN.....	664	
1803		BROWN, DARCIÉ.....	2480	
BRAZEL, DANIELLE.....	296, 635	BROWN, EDEN.....	639	
BRAZIER, SETH...129, 586, 1826, 2098		BROWN, HOSEA.....	40, 205, 735	
BRECKON, SAMANTHA.....	693	BROWN, JOHNNY.....	649, 731	
BREDENKAMP, JAMES.....	469	BROWN, KEVIN.....	213	
BREEDLOVE, AMANDA.....	2479	BROWN, MITCHELL.....	108	
BREITHAUPT, ANDREW.....	548	BROWN, REGINA.504, 567, 723, 740,		
BREMNER, AMY.....	408	2076, 2381		
BREMNER, LUKE.....	176	BROWN, RICHARD.....	148, 327	
BRENDECKE, LORIE.....	524	BROWN, SHENISE.....	181	
BRERETON, DANIEL.....	141, 702	BROWN, VICTORIA.....	609, 2115	
BREWER, ANH.....	49	BROWNLOW, ROY.101, 148, 178, 331,		
BREWER, SARAH.....	42	563, 581, 603, 1860, 1861, 2066, 2067,		
BRIED, JAMES.....	587, 2100	2093, 2094		
BRIGGS, BENJAMIN.....	2284	BRUBAKER, ALEAH.....	2356	
BRIGGS, BRIDGET.....	49, 79	BRUECKNER, TAMMIE.665, 1983,		
BRIGHTON PLACE EAST.....	880	2305		
		BRUGGEMAN, ANDREW.135, 321,		
		346, 680, 681		

E. Índice de proveedores

BURROWS, TERENCE.....	1914, 2146	CAMACHO, BENJAMIN.....	539, 2058	CARDONES, ARTHUR.....	1772
BURROWS, WILLIAM.....	1442	CAMACHO, MARIAM.....	37	CARE MERIDIAN LA MESA.....	2427
BURRUEL, KAYLA.....	757	CAMAQUIN, MIA.....	286, 609	CARLIN, CHRISTOPHER.....	591, 592
BURTON, LUCAS.....	1458	CAMARGO, SANDRA.....	116	CARLO HOUSE.....	2434
BURTON, PAUL.....	232	CAMARGO-LOWTHERS, ANGELICA.....	609, 610, 2116, 2117	CARLSON, JOHN.....	515
BUSCH, HEIDI.....	92, 291	CAMARILLO, DANIEL.....	44, 79, 80	CARLSON, ROBERT.....	51
BUSH, JAMES.....	657	CAMERON, KENDALL.....	585	CARLSON, STACY.....	324, 783
BUSH, KELLY.....	2285	CAMERON, MELISSA.....	1879, 2294	CARLSON, STEVEN.....	102, 149, 179, 604, 720, 721
BUSH, MELISSA.....	254, 258, 372, 373, 374	CAMP, ANDREW.....	2232	CARLTON-PENN, CORNELIA.....	195, 196, 727, 1882, 2449
BUSINO, ROWLEY.....	341, 342	CAMPA, PATRICIA.....	1842	CARMEL MOUNTAIN REHAB AND HEALTHCARE CTR.....	879, 2432
BUSTAMANTE, ANGEL.....	444	CAMPBELL, AMBER.....	503	CARMONA, RUBEN.....	135, 346, 681, 1828, 2031, 2326
BUTLER, KELLEY.....	730	CAMPBELL, BRIANNA.....	51, 68, 628, 1307, 1459, 2167	CARNEY, AMY.....	180, 1244
BUTLER, KIM.....	2526	CAMPBELL, SARA.....	2267	CARPENTERIII, ROBERT.....	1208, 1734
BUTLER, LISA.....	69	CAMPBELL, TANNER.....	2364	CARR, CHERYL.....	240, 451, 452
BUTLER, PHILIP.....	145, 348, 708, 709	CAMPOS, MELISSA.....	1125, 1709	CARR, MIANDA.....	730, 1746, 1747
BYNON, KRISTEN.....	392	CAMPOS, PRISCILLA.....	1459	CARR, OLIVIA.....	264, 392, 476
C					
CABADING, DOREEN.....	1178	CANDARE, VANESSA.....	312	CARR, WARNER.....	235, 448, 449
CABALLERO, JAMES.....	621, 1434, 1435	CANLAS, AVELINO.....	1308	CARRA, BARBARA.....	721, 2378
CABARLO, JEHRIB.....	1602, 1756	CANO, SARAH.....	2102	CARRABY, ARNETT.....	122, 188, 336, 542
CABRAL, ALEJANDRA.....	2379	CANTRELL, SARAH.....	290, 620	CARRERA, JORGE.....	31, 1260
CABRAL, ERIK.....	740	CANTU, ALICIA.....	2294	CARRIEDO-CENICEROS, MARIA.....	75, 1308, 1460, 1709, 1710
CABREJOS, CLAUDIO.....	727, 2504	CANTU-REYNA, GUILLERMO.....	54, 1323, 1552	CARRILLO, MARITZA.....	110, 1122, 1444, 1806
CABRERA, JOANNE.....	184	CAO, LISA.....	474	CARRION GELABERT, ANA.....	106, 1803
CABRERA, JUAN.....	249	CAO, STEPHANIE.....	2590, 2591	CARROLL, JEANNE.....	2201
CABRERA, MICHELLE.....	2385	CAO-NGUYEN, TIEN.....	170	CARROLL, SARAH.....	575
CAGATAY, HARRIER.....	225, 753	CAPERNA, JOSEPH.....	635	CARSON, LATISA.....	1747
CAGE, DORI.....	702, 2360	CAPETANAKIS, ELENI.....	1161	CARSON, MIA.....	32
CAI, SHEILA.....	98, 99	CAPISTRANO BEACH CARE CENTER.....	876	CARSON, STEPHEN.....	1603
CAINE, SAMUEL.....	129, 130, 344, 345, 546, 1826, 1827, 2030, 2063	CAPISTRANO BEACH EXTENDED CARE AND LIVING CTR.....	876	CARSWELL, AIMEE.....	321, 684, 1998, 2329, 2330
CALABRIA, MEGAN.....	290, 620	CAPORELLI, AMY.....	610	CARTER, CAITLIN.....	2288
CALAME, ANTOANELLA.....	623, 626, 2152	CAPOZZI, JENNIFER.....	1904, 2117	CARTER, KHALIL.....	1150, 1218, 1290, 1291, 1563, 1564, 1565, 1566, 1775, 1776
CALCUTT, SUZANNE.....	609	CAPUTO, ROY.....	233	CARTER, NATASHA.....	1443
CALDERON MORALES, ASTRID.....	138, 198, 697	CARABULEA, GABRIEL.....	714	CARTER, STEPHANIE.....	160
CALDERON, JORGE.....	1732, 1733	CARAMBAS, CLARITA.....	69, 638	CARTWRIGHT, SHANIQUA.....	745
CALDERONMOLINA, JUAN.....	541, 642	CARASQUERO, ANDREA.....	360	CARVALHO, DANIELA.....	2041, 2243
CALHOUN, CHANELLE.....	1366, 1367	CARAZO, MATTHEW.....	284, 604	CASA PACIFICA ADHCC.....	2440
CALIFANO, JOSEPH.....	307, 657, 1962, 1963, 2242	CARBONELL, SONIA.....	678	CASE, ERINN.....	610
CALLAGHAN, KATHRYN.....	2480	CARDENAS, MICHAEL.....	302, 647	CASEY, CARLEE.....	253
CALLAWAY, MALLORY.....	693	CARDENAS, MIRIAM.....	150, 536, 610	CASEY, SHANNON.....	1842, 2445, 2446
CALLISON, YANHUI.....	607, 608	CARDENAS, RICARDO.....	392		
CALOCA, LAURA.....	195	CARDINELL, ANNA.....	161, 769, 1844, 2398		
CALZADA, AUDREY.....	96, 125, 657				

E. Índice de proveedores

CASILLAS BERUMEN, SERGIO.138, 139, 198, 699, 1834, 1886, 2356	CHAC, RICK..... 121, 647	CHANG, TOM.89, 542, 650, 2533, 2539, 2561
CASO, STEPHEN..... 312	CHAIN, PEI CHI.....124, 1818, 2591	CHANG, WILLIAM..... 394, 395
CASTANER, ZALYA.767, 1247, 1248, 1785	CHAIT LLAMAS, LWBBA..... 1757	CHANGCHEN, ERIC..... 785
CASTELLANO, TIFFANY.626, 1920, 2158	CHAKRABARTI, PRIYA.1151, 1218, 1291, 1567, 1568, 1776	CHANTALA, ELIZABETH..... 610, 2117
CASTELLANOS, GRACIELA.....116	CHAKRABARTY, MILANKUMAR.214, 215	CHAO, BRIAN.....196
CASTELLANOS, JOEL..... 1900, 2108	CHALMERS, VIRGINIA.....2468	CHAO, JAMES..... 177, 708, 766
CASTELLANOS, LUIS.....2109	CHAMBERLIN, DAVID..... 495	CHAPIN, DENISE..... 1114
CASTELLON, SHAWN.....427, 791	CHAMBERLIN, JOSHUA..... 475	CHARLAT, MARTIN.....284
CASTELNOVI, CLAUDIA.....1603	CHAMBERLIN, KALIANA.....565, 769	CHARLES COWAN, TRICIA...220, 440
CASTILLEJOS, DAVID.....2521	CHAMBERS, KATRINA.....161, 1844	CHASE AVENUE FAMILY HEALTH CTRS INC.....914, 915, 917, 918, 924
CASTILLEJOS, MARIA..... 2520	CHAMBI-HERNANDEZ, RUTH..... 214	CHASE AVENUE FAMILY HEALTH CTRS INC, 26, 1204
CASTILLO, MARIA..... 647	CHAMMAS, JOSEPH.....140, 199, 701	CHASE, AVA LOU.....1389
CASTILLO, PATRICIA. 1630, 1631, 2305	CHAN, ALONSO.....127	CHATFIELD, ALEXANDRA.192, 585, 1880, 2098
CASTILLO, STEPHANIE..... 1710	CHAN, ANDY.....1526	CHATHAM, OLIVIA..... 769
CASTILLO, TIFFANY.....194	CHAN, CHI-BEW...282, 601, 1895, 2103	CHAU, CINDY..... 254, 373
CASTLE MANOR NURSING AND REHABILITATION CTR..... 878, 2429	CHAN, JASON.....233	CHAU, JOHN.....635
CASTLEBERRY, DANI..... 2442	CHAN, JESSICA..... 363, 454	CHAU, PETER.....2260
CASTREJON, JOSEPH..... 82	CHAN, JUDY..... 452	CHAU, VIVIAN..... 2539
CASTRO RUEDA, HERNAN... 459, 484	CHAN, JUSTIN..... 176	CHAUDHRI, YASHWANT.132, 547, 577, 733
CASTRO, DAVID.....435	CHAN, KWOK FUNG..... 2521, 2527	CHAUDHURI, KALI..... 447
CASTRO, JORGE.....1792	CHAN, LINDA..... 397	CHAUHAN, SMIT..... 672
CATIPON, GABRIELLE..... 515	CHAN, TIFFANY.....1631	CHAURASIA, OM.....455, 456
CAUCHI, CAROLINE GUERRERO. .....2560	CHAND, RAVINDRA.....194	CHAUSSE CASTRO, EKATERINA.1699, 1700
CAVIRIS, DIONYSIA..... 610	CHANDRADAS, SAJIV...629, 1526, 1527	CHAVARRIA, JESSICA.....1657
CAZARES, DARIANA..... 639	CHANG KIMES, AUDREY.....361	CHAVEZ, ALEXANDRIA..... 610, 2117
CEBALLOS, JACQUELINE.....2480	CHANG, ALBERT..... 34, 35	CHAVEZ, BRIAN.....242
CELANO, NICHOLAS.152, 537, 582, 623	CHANG, ALEXANDER.....199	CHAVEZ-SERRANO, VIOLETA..... 777
CELAYA, PATRICIA.....134, 1828, 2443	CHANG, AMY..... 1444, 1445	CHAVEZSANTOS, MARIA... 17, 92, 1797
CELESTIN-RAMSEY, AKANKE.610, 1389	CHANG, ANGELA..... 307, 308	CHAWLA, ANUJ..... 442, 515
CELESTINO, MISHEL..... 2386	CHANG, DAVID.219, 220, 425, 746, 785, 786, 787	CHEATHAM, BRITTANY..... 610, 2118
CELIZ, ADRIANA.....728, 1699	CHANG, EDWARD.96, 97, 125, 657, 1798, 1821, 2243	CHELMILLA, HARITHA.....182
CENTRO MEDICO EL CAJON.906, 907, 908, 909	CHANG, ELMER..... 455	CHELVAKUMAR, GAYATHRI..... 2101
CEPIN, DANIEL..... 102, 114	CHANG, ENOCH..... 663	CHEN, ALICE.292, 626, 1920, 1928, 2158, 2167, 2168
CEPIN, MONICA.....22	CHANG, HELEN..... 48	CHEN, ANDREW. 183, 583, 1865, 2096
CERALDE, ALAN..... 225, 226	CHANG, JENNIFER..... 321, 684	CHEN, BRYAN.....623
CERNELC-KOHAN, MATEJKA.1856, 2290	CHANG, JEREMY.....464	CHEN, CHENG-HAN..... 358, 370
CEVALLOS, JAMES... 51, 1309, 1710, 1711	CHANG, JOHANNA.....1857, 2292	CHEN, CHRISTINE..... 685
CHA, DANIEL..... 2520	CHANG, KU JUEY.....40, 363	CHEN, EILEEN.....1603
	CHANG, LAWRENCE..... 59	CHEN, HAMILTON.206, 225, 436, 444, 737, 753
	CHANG, MICHAEL..... 38	
	CHANG, STEVEN.....353	
	CHANG, TIMOTHY.....291	

E. Índice de proveedores

CHEN, HEATHER.....	778	CHISWICK, GARY.1112, 1376, 1383,	CHRISTIE, PATRICIA.....	31, 1890
CHEN, JAMES.....	489, 1527	1690, 1691	CHRISTY, TYLER.565, 769, 1336, 1337,	
CHEN, JENNIFER.....	1604	CHITKARA, PUJA.113, 137, 548, 696,	2069, 2399, 2400	
CHEN, KAREN.....	684	1833	CHU, ANDREW.....	130, 193, 586
CHEN, KATIE.....	610	CHIU, STEPHAN.303, 336, 2533, 2549,	CHU, CHRISTOPHER.1856, 1879, 2049,	
CHEN, LESLIE.....	2591	2561	2089, 2283	
CHEN, MARGARET.....	31, 1260, 1261	CHO, AARON.....	CHU, ERIC.....	456
CHEN, MAY.....	432, 459, 461	321, 685	CHU, JAMES.....	519, 520
CHEN, SANFORD.....	379	CHO, ANTHONY.....	CHU, WEIMING.....	394
CHEN, SISI.....	180	261, 262, 388, 469	CHUA, WILLY.....	755
CHEN, STEVEN.....	177, 708	CHOAN, CAROLINE.....	CHUAN, SANDY.....	647
CHEN, TONY.....	709, 2375	374	CHUANG, KAI-WEN.....	435
CHEN, TSUH-YIN.....	22, 1146, 1734, 1735	CHOATE, BERNADETTE.....	CHUDACEK, JANET.....	150
CHEN, YU-WEI.....	295, 633, 1932, 2178	610, 2118	CHULA VISTA FAMILY HLTH CTR.884,	
CHENG, BRANDON.136, 234, 547,		CHODAY, PRITHI.....	885, 886, 887, 899, 900, 901, 902, 903	
1829, 1892, 2064		34	CHULA VISTA FAMILY HLTH CTR, .21,	
CHENG, CATHY.....	249	CHOI, ANTHONY.....	1142, 1143	
CHENG, GEORGE.....	1935, 2184	604	CHULA VISTA PEDIATRICS....	895, 896
CHENG, HOWARD.....	367	CHOI, DAVID.....	CHUN, DAVID.....	471, 472
CHENG, KAREN.....	321, 685, 1999, 2330	245, 379, 430, 431, 456	CHUN, HYUN.....	1461, 1462
CHENG, WAYNE.....	529	CHOI, ESTHER.....	CHUNG, ARTHUR.....	790
CHENG, YU-TSUN.....	2053, 2365	301, 646	CHUNG, CHRISTINE.....	321, 685
CHERRY, REENA.....	1983	CHOI, JI EI.....	CHUNG, KIYON.....	605, 635, 638
CHERY, FARAH.....	1125, 1126	239	CHUNG, LINDA.....	375
CHESHER, NICHOLAS.1994, 2317,		CHOI, JIHOON.328, 702, 2015, 2016,	CHUNG, NATHAN.....	270
2457, 2480		2365	CHUNG, SUEMIN.....	610
CHEUNG, SUNNY.....	742	CHOI, MIN.....	CHWA, JEFFREY.....	138, 1833
CHEW, WESLEY.....	2561	2465, 2481	CIANCIOLA, MARK.....	58
CHEWNING, RUSH.....	2331	CHOI, NATHALIE.291, 620, 621, 1916,	CIDAMBI, EMILY.....	2092, 2365
CHIANG, JENNIFER.152, 537, 582, 623		2148	CIES, WILLIAM.....	558
CHIAO, HELLEN.....	569	CHOI, RANA.....	CIOBANU, COSMINA.....	2481
CHIARAPPA, FRANK.....	2015, 2365	240	CISTRONE, MONICA.....	735
CHIEN, JOHN.....	249	CHOI-SIRITARATIWAT, ISABELL.386,	CISZEK, ALEXANDRA.....	2069
CHIEN, PEI.....	2005	597	CIZMAR, BRANISLAV.....	187
CHIEN, SHELBY.....	331, 601	CHONG, AMY.....	CLAIREMONT HEALTHCARE AND	
CHILAKA, SAMUEL.565, 769, 1335,		2295	WELLNESS CENTER LLC.....	879
1336, 2068, 2069, 2399		CHONG, ILSONG.....	CLANCY, JOHN.....	84
CHIN, CHANA.....	474	56, 571	CLANCY, TARA.....	84
CHIN, ERIC.....	515, 516	CHONG, MARIBETH.....	CLARK, CYNTHIA.....	769
CHIN, MICHAEL.....	526, 527, 528	17, 18	CLARK, LORI.....	40, 59
CHING, ANDREA SHERYL.....	749	CHONG, TIMOTHY.....	CLARK, MA BELEN.....	82
CHING, TSUNG.....	34	603	CLARK, MELISSA.697, 1833, 1885,	
CHIODI, MARTINA.....	513	CHONG, YOO JIN.....	2349, 2350	
CHIRIANO, JASON.....	528	17	CLARY, BRYAN.....	2010
CHISHOLM, CHRISTOPHER.....	603	CHONGKRAIRATANAKUL, TEPSIRI.	CLAVERIA, RICHARD.....	489
CHISHOLM, KAREN.....	2521	.....	CLAY, CORRIE.....	1279, 2029
CHISUM, FAITH.....	234	635, 642	CLEEREMANS, BRUCE.....	256
		CHOO, SUN.....		
		2087, 2267, 2285		
		CHOPLIN, NEIL.....		
		188, 303, 304, 650		
		CHOU, BILL.....		
		1460, 1461		
		CHOU, SUSANNA.....		
		18		
		CHOU, WILLIAM.....		
		483		
		CHOUDRY, BILAL.....		
		93, 300, 747		
		CHOUDRY, QASIM.....		
		185		
		CHOW, BYRON.....		
		1263		
		CHOW, JASON.....		
		222, 442, 516, 749		
		CHOW, JENNIFER.....		
		649		
		CHOW, MAN HUNG.....		
		1735		
		CHRISMAN, JESSICA.....		
		610		
		CHRISTENSEN, PATTI.....		
		184, 2449		
		CHRISTIANSON, WARREN.577, 780,		
		2468, 2469, 2510		
		CHRISTIE, CAMERON.....		
		264		

E. Índice de proveedores

CLEMENT, LUIS.....	2317, 2482	CONCORS, ANDREW.....	1658	COULLAHAN, JESSICA.....	1264
CLEMENTINO, NANCY.....	1243	CONDEZ, EDSSEL.....	1236, 1632	COUNCELBAUM, NANCY.....	36
CLOTFELTER, CHRISTINE.....	28	CONE, STEPHANIE.....	1229, 1325, 1326, 1604	COUNTRY HILLS HEALTH CARE CENTER.....	2423
COBB, DAMON.....	2097	CONNER, PAMELA.....	286, 610, 1904, 2119	COUNTRY HILLS POST ACUTE.....	876, 2423
COBIAN, VANESSA.....	80, 182, 1248	CONNER, RICHARD.....	532, 767	COUNTRY MANOR LA MESA HEALTHCARE CENTER.....	877, 2427
COBURN, PIERRE.....	445, 525	CONNOR, CAROLINE.....	286, 611, 1904, 2119	COURIS, MICHAEL.....	650
COCCIA, MICHAEL.....	353	CONNOR, JEFFREY.....	2547	COVARRUBIAS, GRACIA.....	40, 48
COCKERHAM, KIMBERLY.....	122, 336, 650, 2524, 2561	CONRAD, HEATHER.....	2268	COWAN, JOHN.....	576
CODEN, DANIEL.....	2550	CONRAD, RANDALL.....	2561	COX, JEREMY.....	201, 207, 218, 738, 744
COFFEY, CHARLES.....	308, 657, 658, 1963, 1964, 2243, 2244	CONSTANTINO, STEPHANIE.....	1773	COX, JUSTIN.....	103, 605
COFFLER, ELIANE.....	295	CONTRERAS, LORETTA.....	1632	COX, KEVIN.....	345
COFFLER, MICKEY.....	568	COOK, SHERYL.....	2091, 2469	COX, MATTHEW.....	416
COGGAN, JAMES.....	633	COOKE, LAWRENCE.....	39	COX, VICTORIA.....	29, 1249
COHEN, BRAD.....	588	COOKISH, DAVID.....	1983	COYER, MICHAEL.....	265
COHEN, CARA.....	1264	COOPER, JAMES.....	685	COYNE, CHRISTOPHER.....	626, 2159
COHEN, DAVID.....	283, 284	COOPER, MICHAEL.....	202, 518, 751, 2547, 2592	CRAFT, KEVIN.....	1836, 1888, 2112, 2394
COHEN, EDWARD.....	143, 145, 177, 330, 348, 709	CORATE, LALAINE.....	320	CRANDAL, BRENT.....	318, 1994, 2457
COHEN, GARY.....	601	CORBIN, DAVID.....	78, 733	CRAWFORD, ELWARD.....	2020
COHEN, MANSOUR.....	2220	CORCORAN, KIMBERLY.....	503	CRAWFORD, KAYVA.....	1595, 1596
COHEN, STEPHEN.....	237	CORDERO, RAYMUND.....	760, 793	CRAWFORD-DAY, ANN.....	732, 2506
COHEN, ZACHARY.....	148, 178, 331, 563, 581, 603	CORDES, WILLIAM.....	1605	CRAYCHEE, LEO.....	1786
COLBURN, KEITH.....	229, 447, 759	CORDOBA, MIGUEL.....	1161	CRIBE, TAYLOR.....	1984
COLE, JASON.....	290, 620	CORMAN, DANIEL.....	1197, 1463, 1464	CRISELL, MONISHA.....	448, 532, 767
COLEMAN, BROOKE.....	202, 224, 518, 751, 2547, 2591	CORONA, FRANK.....	577	CRISOL, CAROLINE.....	2482
COLEMAN, COLLEEN.....	270	CORONADO, MYRNA.....	729, 1711, 1712	CRITES, LAURA.....	665
COLEMAN, LORI.....	135, 197, 346, 681, 1829, 1884, 2031, 2327	CORREA, CARINA.....	106	CROCKETT, DENNIS.....	262, 470, 598
COLEMAN, PAGE.....	610, 2118	CORRY, ANDREA.....	163, 291, 621, 1191	CROTTEAU, ALEX.....	770
COLESON, PAMELA.....	192	CORTES, CHRISTINE.....	621	CROWLEY, DONNA.....	545
COLLINS, BRIAN.....	502	CORTES, ELIZABETH.....	560	CROWLEY, DOUGLAS.....	296
COLLINS, CATHLEEN.....	2043, 2258	CORTES, JAMES.....	108	CRUZ RODRIGUEZ, JOSE.....	298, 638, 1941, 2191
COLLINS, MICHAEL.....	130, 345, 670	CORTEZ, AARON.....	694, 2345	CRUZ WHITLEY, JESSICA.....	299
COLLINS, RESENIA.....	1956	CORTEZ, JAIME.....	772, 2405	CRUZ, GUADALUPE.....	2446
COLLINS, WILLIAM.....	1462, 1463	CORVINI, NICOLAS.....	1880	CRUZ, MICHAEL.....	1122, 1123, 1705
COLOGNE, SCOTT.....	147	CORY, ALLISON.....	565, 769, 770, 1337, 1338, 1339, 2400	CRUZ, VANESSA.....	571, 775, 2469, 2470, 2511
COMBS, MATTHEW.....	32, 80	COSINO, ANJELICA.....	2119	CSAPOCZI, PETER.....	69, 635, 1527, 1528
COMBS, WALTER.....	80	COSTALES, STEPHEN.....	362	CU-UNJIENG, ANDREW.....	650
COMMUNITY CARE CENTER.....	877	COSTELLO, DENNIS.....	284	CUA, BENNETT.....	451
COMUNALE, RODERICK.....	54, 541, 2060	COSTELLO, MARK.....	2345	CUA, NICOLE.....	121, 649
CONCENTRA URGENT CARE.....	15	COTTONWOOD CANYON HEALTHCARE CENTER.....	876, 2423	CUBAS, IVAN.....	153, 629
CONCHA URDAY ZAA, JANNY.....	346	COUGH, HEIDI.....	258, 375, 376	CUENCA, ARNOLD.....	455
		COUGHLIN, DAVID.....	1948, 2212	CULLEN, BENJAMIN.....	670

E. Índice de proveedores

CULOTTA, ANTHONY.169, 304, 442, 516	DANESHVAR, ABRAHAM..... 192, 665	DAY, CHRISTOPHER..... 1326
CUMMINGS, GEORGE.1175, 1240, 1658	DANG, ERIC..... 2345	DAY, ROBERT..... 254, 373, 376
CUMMINS, ANDREW..... 630, 1528	DANG, KAYLEE..... 694, 2345	DE CARO, ROBERT..... 226
CUNNINGHAM, ISIS..... 2054	DANG, LAUREL..... 628, 2168	DE CARVALHO, CARLOS..... 70
CUNNINGHAM, STEPHANIE..... 1891	DANG, TIMOTHY..... 623, 2153	DE CASTRO, SHARLENE JOYCE.2055
CUNNINGHAM-AHUMADA, ROSE..... 467	DANIELS, SARAH..... 1369	DE DIOS, SARAH JANE.286, 611, 1803, 1905, 2120
CURET, ZULMA..... 1264, 1378	DANON, SAAR..... 460	DE MIK, TRAVIS.1151, 1219, 1292, 1569, 1570, 1776, 1777
CURLEY, EDWARD..... 575, 1368, 1369	DAO, LISA..... 454	DE ROTH, GEORGINE..... 29, 61
CURRAN, BRIAN..... 1896, 2103	DAO, MARC..... 84, 2407	DEACON, CASSIE..... 2482
CURRAN, PERRIN..... 56	DAO, NU..... 503	DEAN, MOENA.170, 340, 2516, 2527, 2533, 2550, 2562, 2577, 2592
CURRY, JASON..... 97, 575	DAO, VIET..... 60, 61	DEARING, DAVID..... 400, 403, 793
CURTIS, DANIEL..... 226	DAPPEN, AMANDA..... 1464	DEBOTTIS, DANIEL..... 273
CURTIS, MEGAN..... 1528, 1529	DAROU, PARIMA..... 756, 790	DECOCK, JAMES..... 32
CUSACK, ANNE..... 318	DARZI, MARIAM..... 665	DECONDE, ADAM.308, 658, 1964, 2244
CUSHING, JAMES..... 475	DAS, GOURAB..... 171	DEDES, HOWARD..... 475
CUTLER, APRYL..... 611	DASCENZO, EMILY..... 159, 1240, 1241	DEEL, MARGARET..... 31
CUTLER, MICHAEL..... 60, 76	DASGUPTA, DEBORSHI.1696, 1697, 1698	DEEMER, ANDREW..... 579
CVAR, KATHRYN..... 465	DASHI, ARBEN..... 296, 635	DEIS, CRISTINA..... 1806
CVIJANOVIC, GORAN..... 32	DATE, AMIT..... 97, 519	DEISS, ROBERT..... 2180
CYMBALUK, ANNA..... 2282	DATO, PAUL..... 145, 177, 330, 709	DEJBAKSH, SHEILA..... 204, 376
CZYPULL, MONICA..... 286, 1904	DAUGHERTY, DAVID..... 579, 580	DEKKERS-O'HARE, INGRID..... 770
D		
DABO, TARAM..... 60	DAVALOS, RICARDO..... 59	DEL VECCHIO, MEGAN..... 611, 2120
DABROWSKI, THOMAS..... 68	DAVE, SHRAVAN..... 1929, 2173	DELA PAZ, LENNIE..... 54
DADA, FESTUS..... 527	DAVENPORT, STEPHEN..... 447	DELA ROSA, KRISTINA..... 623
DADA, STEPHEN..... 527, 760, 793	DAVID, MARVIC..... 1633	DELANEY, CODY..... 167
DADACHANJI, CYRUS..... 737	DAVID, MARY LOU..... 452	DELANEY, MICHAEL. 93, 186, 584, 747
DAHMS, ERIC..... 1529	DAVID, TAL..... 703	DELARA, KAROLJOHN..... 611
DAHMS, MADELYNN..... 1659	DAVIDSONIII, JOHN.130, 546, 1827, 2063	DELAROSA, JOSE..... 77, 1736
DAIGNEAULT, ARTHUR..... 40	DAVIES, SUMMER..... 1905, 2119	DELAROSA, RENATO..... 23, 54
DAIRO, BRANDON.101, 159, 178, 563, 603, 1800, 1801, 1861, 2067, 2108	DAVIS, BARBARA..... 249	DELCAMPOCASANELLES, MIGUEL..... 2177
DAL PORTO-KUJANPAA, STEPHANIE..... 477	DAVIS, CHARLES..... 76, 1712	DELCORE, LAURA.169, 302, 647, 1851, 1950, 2221
DALAL, PRITHA..... 2051, 2302	DAVIS, CHRISTOPHER.1875, 2043, 2261	DELENGOCKY, TAYSON.122, 188, 337, 542
DALUGDUGAN, ESTHER.729, 1712, 2390	DAVIS, CHRISTOPHER.1875, 2043, 2261	DELEON, ROBERT..... 433
DAMANI, SAMIR.284, 298, 535, 539, 1942, 2059	DAVIS, DEIRDRE..... 61, 1464	DELNITZ, DANUTA..... 46
DANDURAND, JOHN..... 154, 632	DAVIS, JADE..... 2592	DELRE, AMANDA..... 1274
DANESH, HOUMAN..... 249	DAVIS, JANET..... 2120	DELRE, ANGELO..... 2268
DANESHMAND, HOOTAN..... 205	DAVIS, JASON..... 145, 299, 636, 642	DELROSARIO, GELEN.542, 2060, 2061
DANESHMAND, SAID..... 628	DAVIS, JASON..... 145, 299, 636, 642	DELROSARIO, PAMELA..... 1945, 2201
DANESHMAND, SHAHRAM.730, 731, 1748, 1749	DAVIS, KELLE.92, 112, 144, 154, 632, 1797, 1808, 1835, 1838, 2178	DEMASCO, MICHAEL..... 1984
	DAVIS, KELLY..... 474	
	DAVIS, MICHAEL..... 442, 516	
	DAVIS, MORGAN..... 1596	
	DAVIS, STEPHANIE..... 204, 258, 376	
	DAVIS, TRACIE..... 156, 541, 647	
	DAWOOD, FARAH..... 102, 103, 332	

E. Índice de proveedores

DEMBO-SMEATON, ELENA.....	36	DILLEN, REBECCA.....	611	DONALDSON, JARED.....	201, 516, 517
DEMLINGER, GLENN.....	2618	DILLMAN, ARIANA.....	108, 1804	DONG, TAMMY.....	1161
DEMOOR, PATRICIA.....	1984	DILLON, BENEDICT.....	77, 731, 1736	DONLON, RYAN.....	503, 739
DENNIS, TSHEKEDI.....	479	DILLON, MAYRA.....	110, 538, 1309	DONOFRIO-ODMANN, JOY.....	2269
DENNY-BROWN, SINAN.....	391	DIMAIRA, FRANCESCA.....	1905, 1906	DORADO, SUE.....	151, 537, 622
DENTICO-OLIN, MARC.....	2241	DIMEGLIO, PAUL.....	515	DORAISWAMY, ARUL.....	206, 737
DENYSIAK, JACQUELINE.....	61, 68, 628	DIMMETTE, PATTIE.....	513	DORINGO, ELAINIE.....	1162
DEPAOLO, AMANDA.....	2506	DING, HILDA.....	2285	DORN, TIA.....	1287
DEPORTO, TANYA.....	780	DINH, JACK.....	507, 743	DORR, KASIE.....	80
DERISSI, DANA.....	2305	DINH, MY.....	731, 1749, 1750, 2392	DORRIZ, PARSHAW.....	461, 462
DESAI, ASEEM.....	450, 451	DINH, Y NHA THI.....	392	DORROS, STEPHEN.....	322, 685
DESAI, SONAM.....	240	DIOKNO, RHODA.....	2317, 2483	DORSEY, KYLE.....	136, 234, 547
DESHPANDE, KAVITA.....	61	DIXIT, SHUBHAM.....	1530	DORUELO, ASHLEY.....	1152, 1219, 1292, 1570, 1571, 1572, 1777
DESILVA, GAYANI.....	433, 434	DIXON, SARAH.....	1605	DOSCAS, MICHELLE.....	1465
DESILVA, PETER.....	59	DIXON, THOMAS.....	132, 672	DOSHI, AMI.....	2295, 2296
DESTA, TADDESE.....	111, 153, 630	DJEKIC, KRISTINA.....	295, 634, 1936, 2184	DOSHI, NEELIMA.....	1265
DEUTSCH, KAREN.....	2121	DO, HULBERT.....	103, 149, 179, 605, 721, 724, 768, 775, 2382, 2396	DOSHI, NITA.....	472
DEVERA, GEMMIE.....	1822, 2045, 2268	DO, JACKIE.....	770	DOSS, KATIE.....	2483
DEVERA, SARAH.....	97	DO, JOCELYN.....	428	DOUGHERTY, CHRISTINE.....	571, 572, 775, 2470, 2471, 2512
DEVEREAUX, CHRISTOPHER.....	569	DO, LUAN.....	334	DOUGHERTY, CLARA.....	312
DEVONSHIRE CARE CENTER.....	877	DO, STEPHANIE.....	2045, 2268	DOUGLAS, JASON.....	295
DEWING, JANNE.....	38	DO, THOMAS.....	2261	DOULL, MATTHEW.....	100, 175, 578, 783
DHARKAR-SURBER, SAPNA.....	536, 611, 1300, 1390	DOAN STEPHENS, CRYSTAL.....	662, 1520, 2295	DOVE, KATHERINE.....	2213
DHIMAN, DARSHAN.....	217, 220	DOAN VAN, NICOLAS.....	237	DOWLING, DAVID.....	641
DHOLAKIYA, PRIYAL.....	366, 367	DOAN, ANGELA.....	611, 2121	DOWNING, KRISTOPHER.....	141, 327, 328, 703
DHOOT, SONIA.....	379, 595	DOAN, CHINH.....	1381	DOWNSA, SAIGE.....	372
DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC.....	974, 975, 976, 977, 978, 979, 980, 981, 982, 983, 984, 1052	DOBECKI, DOUGLAS.....	601	DOWNTOWN FAMILY CTR AT CONNECTIONS.....	1031, 1032, 1050
DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC,.....	66, 1503	DOBYNS, JEFFREY.....	474, 475, 489	DOWNTOWN FAMILY CTR AT CONNECTIONS,.....	66, 1504
DIAZ, JAENAI.....	639, 2482	DOCKERY, LEE.....	2450	DRAKE, ROBERT.....	227
DICESARE, DANIEL.....	453, 588	DOCKTER, ANDI.....	697	DRAME, SALWA.....	1633
DICKINSON, PHILLIP.....	347	DOCTORS EXPRESS OF OCEANSIDE INC.....	15	DRAYER, JEFFREY.....	740
DICKS, BRIAN.....	143, 146, 177, 330, 348, 709, 710	DODGE, JOHN.....	1530, 1531	DRIEBE, AMY.....	169, 302, 647, 1851, 1852, 1950, 1951, 2222
DICKSON, MATTHEW.....	627	DOEZIE, ALLEN.....	352	DRILLING, KATHERINE.....	97
DIEFFENBACH, BRYAN.....	699, 701	DOKICH, SRETENKA.....	1276	DRINHAUS, ROLF.....	530
DIEP, BRIAN.....	61	DOLLAND, STEVEN.....	290, 620, 1915, 2146	DRISCOLL, KARRIE.....	286, 611, 1906, 2121
DIEP, KEVIN.....	1529, 1530	DOLNAK, DOUGLAS.....	2483	DRISCOLL, SUSAN.....	536, 611, 728, 1180, 2055, 2122
DIETERICH, FREDERICK.....	776	DOMBROWSKY, JOSEPH.....	696	DRISKILL, BRENT.....	658
DIETZLER, MARQUE.....	226	DOMINGUEZ, DENNIS.....	1197	DRIVER, CATHERINE.....	484
DIGGS, THOMAS.....	605	DOMINGUEZ, FERNANDO.....	1531	DRIVICK, VALERIE.....	693
DIKRANIAN, ARA.....	728	DON, MICHELLE.....	1979	DROKER, BRIAN.....	93, 186, 300, 1797
DILAURO, STEVEN.....	165	DONALDSON, CHADWICK.....	97, 658, 1798		

E. Índice de proveedores

DRUET, JACK.....	500	EDMUNDSON, MORIAH.....	376, 465	ELSTER, JENNIFER.....	2285
DRURY, PAUL...357, 358, 370, 591, 593		EDNACOT, KARYNNE.	611, 612, 2122	ELY-KONOSKE, RACHEL.163, 291, 621	
DSOUZA, NICOLE.....	639, 2483	EDRIS, MARWAN.....	40	ELZIK, MARK.....	490, 599
DU, SARAH.....	97, 127, 665	EGHTEDARI, MOHAMMAD.322, 685,		EMERUWA, UKACHI.299, 641, 1943,	
DUARTE, KRISTEN.....	1994, 2457	686		2194	
DUBE, BIANCA.....	1102	EICHEN, DAWN.. 318, 1994, 1995, 2458		EMPIE, KRISTEN.....	1279
DUBOIS, SUJA.....	630	EICHENFIELD, DAWN.....	2265	ENCE, EMILY.....	665
DUCK, CRAIG.....	28	EIDT, HERBERT.....	599	ENCINITAS NURSING AND REHAB	
DUFFIELD, GARY.....	564, 768, 769	EIFRIG, CHARLES WILLIAM.379, 380,		CTR.....	877, 2425
DUGGAN, BRIDGETTE.....	632	558		ENCOMPASS HEALTH	
DUGGAN, DANIEL.....	489, 490	EINSTEIN, ERIC.....	108, 1804	REHABILITATION HOSPITAL OF	
DULAY, JOTI.....	290, 620	EISENBERG, STEVEN.....	633, 641	MURRIETA.....	13
DUMMER, KIRSTEN.....	2043, 2261	EISENSTEIN, SAMUEL.698, 2351, 2352		ENDSLEY, DELVIN.....	46
DUNN, JOSEPH.....	229	EISMAN, SCOTT.....	167, 172, 781	ENG, STEVE.....	88
DUNN-PIRIO, ANASTASIE. 2213, 2484		EKANAYAKE, PREETHIKA.	627, 2163	ENGELMAN, SUZANNE.....	416, 417
DUNPHY, TAYLOR.....	273	EKHOLM, JANNA.....	621, 2148	ERICKSON, CHRISTOPHER.. 623, 626	
DUONG, CHERYL.....	2548, 2593	EKLUND, BONNIE.....	565, 770	ERICKSON, LISA.....	612, 2123
DUONG, KIM.....	2539, 2593	EKPENYONG, ATIM.....	2269	ERWTEMAN, ANDREW.....	530
DUONG, MAI.....	1208	EL CAJON ADHC.....	2439	ESCALANTE, JUVY.....	727
DUPLECHAN, LAWRENCE.....	427	EL SAID, KHALED.....	144	ESCAMILLA, KARLA.....	639
DUQUE, JOHN.....	111	EL SHERIEF, KARIM.....	564	ESCONDIDO CARE CENTER.877,	
DURAN, ANTONIO.....	100	EL-BERSHAWI, AHMED.	249, 269	2425	
DURAN, EDWARD.160, 284, 605, 1843		EL-GHONEIMY, AHMED.....	27, 54, 70	ESCONDIDO FAMILY HEALTH	
DURNAN, CASSANDRA.138, 198, 697,		EL-HENAWI, IGLAL.....	33	CENTER.....	936
1833, 1886, 2350		EL-MOGHRABI, NANCY.....	124, 544	ESCONDIDO FAMILY HEALTH	
DUSTIN, ADAM.....	172, 1858	EL-MOGHRABI, ROULA.124, 191, 544,		CENTER,	30, 1257
DUTTON, PASCUAL.....	141, 703	655		ESHOIEE, MIRIAM.....	598
DWEK, JERRY.....	312, 661	ELBALALESY, NASER.	257, 463, 464	ESKANDER, RAMEZ.166, 294, 570, 773	
DWINELL, LAUREN.....	351, 598	ELFELT, TIMOTHY.....	514, 749	ESLAMI, BAHRAM.....	237, 238
DWYER, ERIN.144, 161, 332, 611, 1844,		ELHOFY, ASHRAF.....	167	ESLAMI-FARSANI, MAHMOUD.238,	
2122		ELI, BRADLEY.....	171, 657	250	
DY, DIANE.....	1127	ELIAS, RAMIZ.....	27, 70	ESLANI, MEDI.....	304, 650, 651
DYER, MARC.....	414, 416, 590	ELKAYAM, ISAK.....	80	ESPARZA, SOPHIA.....	29
DYER, SHARON.90, 157, 190, 340, 544,		ELKHOURY, FUAD.277, 408, 409, 495,		ESPELETA, VIDAL.....	395
655, 2517, 2527, 2533, 2550, 2562, 2577,		600		ESPINOSA-SILVA, YAMINAH.55, 56,	
2593		ELKIND, JAE.....	1979	82, 1350, 1351, 1352, 1789	
DYKHUIS, KATELYN.....	560	ELLEDGE, LINDSAY.....	298, 2458	ESSER, STEPHANIE.....	783
E		ELLINI, AHMAD.....	472, 520	ESSIEN, FRANCIS.....	760, 794
EAGAN, TERRY.....	394	ELLIOTT, GRACE.....	665	ESTABROOK, LARA.....	162, 290
EAJAZI, ALIREZA.....	322, 685	ELLIS, ADAM.....	167	ESTAVILLO, SAUL.....	155, 730, 2484
EAST COUNTY URGENT CARE.....	16	ELLIS, JOHN.....	742, 764	ESTELLE, KIRA.....	757
EBRAHIMIADIB, TANNAZ.....	573	ELLNER, JULIE.....	699	ESTEN, JOHN.....	298
ECLARINO, GALELEO.....	2122	ELPEDES, BERNARD.....	453	ESTES, SAMANTHA.....	665
EDDOW, JIM.....	427	ELSANADI, RAEF.....	37	ESTRADA PATINO, ANGELA.196, 678,	
EDE, KEKOA.....	183, 194	ELSAYED, MOHAMMED.....	19, 1127	1882, 2450	
EDEM, MARY.....	209	ELSAYED, SARAH SABRY.....	237	ESTRADA, JOHANNA.....	164, 729, 1713
EDMONDS, ERIC.....	1887, 2366	ELSISSY, PETER.....	233	ESTRELLA ITCHON, RHODA.....	49

E. Índice de proveedores

ETTEFAGH, LELIA.....	549	FAMILY HLTH CTR OF SD SAN	FARRAR, COURTNEY.136, 198, 578,
EUBANY, JACQUELINE.....	451	DIEGO COMMERCIAL. 988, 989, 1053	694, 695, 2092, 2346
EVANS, CATHERINE.....	290, 620	FAMILY HLTH CTR OF SD SAN	FARRIS, REUBEN. 19, 22
EVANS, ELISABETH.....	286	DIEGO COMMERCIAL, 66, 1506	FARSAD, RAMIN. 28, 29
EVANS, RICHARD.....	522	FAMILY HLTH CTR SAN DIEGO- CITY	FARSHIDI, ARTA..... 549
EVANS, RYAN.....	518	COLLEGE..... 1051	FARSHLER, ANTHONY.200, 438, 740,
EVERETT, ELIZABETH.1268, 1269,		FAMILY HLTH CTR SAN DIEGO- CITY	1889
1339, 1340		COLLEGE, 66, 1506	FARUQUE, TANIA..... 178
EVES, WILLIAM.....	141	FAMILY HLTH CTR SAN	FARZIN, ABDUL 506
EVORA, DARRYL.....	312, 661	DIEGO-BEACH AREA.1004, 1005,	FATEMI, SEPIDEH. 253
EWBANK, CLIFTON.	139	1006, 1007, 1008, 1009, 1050	FATHI, NAGHMEH. 426
F			
FABELLA, GABRIEL.....	70, 1531	FAMILY HLTH CTR SAN	FATLAND, SARAH. 1352, 1353
FADAVI, HAMID.....	475, 476	DIEGO-BEACH AREA, 66, 1507	FAZEL, NASIM..... 549
FADDA, GEORGE.	333, 334	FAMILY HLTH CTR SAN DIEGO-EL	FAZELI, SOUDABEH.322, 686, 1999,
FAHIM, ASHRAF.....	713	CAJON..905, 906, 907, 909, 910, 911,	2331
FAHIMI, GOLSHAN.....	453, 462	912, 913, 914, 915, 916, 923	FAZILAT, GOLAREH..... 432
FAIQ, JAMILA.....	161, 503, 721	FAMILY HLTH CTR SAN DIEGO-EL	FE, ALEXANDER..... 320
FAIQ, NADIA.....	108	CAJON, 26, 1204	FEDERHART, JAY..... 322, 686
FAIRBANKS, TIMOTHY.1860, 2053,		FAMILY HLTH CTR SAN DIEGO-RICE	FEINBERG, STEVEN. 470
2092, 2357		FAM HC..... 896, 904	FEINER, JEFFREY..... 358, 370
FAKHRO, SAMEEH.....	70	FAMILY HLTH CTR SAN DIEGO-RICE	FEIZI, SEDI..... 612
FALLBROOK FAMILY HLTH CTR.937,		FAM HC, 21, 1143	FEJLEH, ASHLEY..... 1896, 2103
938		FAMILY HLTH CTR SAN DIEGOCITY	FEJLEH, MOHAMMAD..... 1929
FALLBROOK SKILLED NURSING.877,		COLLEGE..... 1031, 1032, 1033	FELD, KEREN..... 2123
2426		FAMILY HLTH CTR SD HILLCREST.	FELDMAN, GARY..... 86, 87
FAMBRO, CYNTHIA.....	62, 1465	1009, 1010, 1011, 1012, 1013, 1014, 1015,	FELDMAN, ROBERT..... 40
FAMILY HEALTH CTR IBARRA.1034,		1016, 1026, 1052	FELLION, LAUREN..... 313
1035, 1036, 1037, 1052		FAMILY HLTH CTR SD HILLCREST, .	FENG, CHU-PEI..... 483
FAMILY HEALTH CTR IBARRA, .66,		..... 67, 1507	FENNEMA, ERIC..... 224, 443
1504		FAN, LI..... 585	FERBER, JEFFREY..... 82
FAMILY HEALTH CTR OF SD- ELM ST.		FAN, ROBERT..... 507	FERNANDEZ LEYVA, JUAN. 1115
..... 1050		FANNIN, HANAHAH..... 97	FERNANDEZ, GENARO.103, 114, 149,
FAMILY HEALTH CTR OF SD- ELM ST,		FANOUS, ASHRAF..... 194, 672	332, 333, 539
..... 66, 1504, 1505		FARAMARZI, FARNAZ..... 751, 752	FERNANDEZ, RAYMOND. 40
FAMILY HEALTH CTR OF SDELM ST.		FARASAT, SADAF..... 1532	FERNANDEZ, RODRIGO..... 116
..... 1031		FARAVARDEH, ARMAN.333, 334, 636,	FEROLIE, PAM..... 612
FAMILY HEALTH CTR SAN		642	FERRAILOLO, NATALIE..... 1249, 1282
DIEGO-OAK PARK.990, 991, 1051,		FARAZ ESLAMI, PARASTOO..... 465	FERRANTE, JADE..... 241
1052		FARHAT, KELLI..... 649	FERRARA, SAMANTHA. 344, 2029
FAMILY HEALTH CTR SAN		FARHIDVASH, FARIBA..... 119, 725, 748	FERRER, MIRON..... 324, 695
DIEGO-OAK PARK, 66, 1505, 1506		FARID, NIKDOKHT..... 322, 686	FERRITER, STACY..... 1915, 2146
FAMILY HEALTH CTR SD NATIONAL		FARINAS, LEAH..... 699	FIEDLER, DEREK..... 181, 290, 620
CITY..... 955, 956, 958, 959		FARJOURI, FARHAD. 242, 363	FIELDING, JOSEPH..... 1659
FAMILY HEALTH CTR SD NATIONAL		FARMER, STEVEN..... 193, 727	FIGHTLIN, STEFANIE..... 46
CITY, 53, 1317, 1318		FARNSWORTH, WILLIAM.93, 186,	FIGUEROA RODRIGUEZ, BRENDA.
		584, 748	..... 191, 1879
			FILIPOVIC, MAYA..... 282, 601

E. Índice de proveedores

FILIPPELLO, LAUREN.....	612	FORRESTER, JARED.....	270	FRIEDMAN, RICK.308, 658, 1965,
FINCH, CHRISTINA.....	696, 2290	FORRESTER, MICHAEL.....	519	1966, 2245
FINDAKLY, DAWOOD.....	633, 723	FORTMANN, DANIEL.....	75	FRIENDSHIP MANOR NURSING AND
FINK, PATRICK.....	1633, 1634	FORTUNE, ERIN.....	1606, 1607	REHABILITATION CTR.....
FINN, DAPHNA.....	315, 2458	FORZANI, CHRISTINA.....	2318, 2485	878, 2429
FIREIZEN, YARON.....	2290	FOSSUM, CROIX.....	136	FRIESEN, TZYYNONG.1854, 1874,
FIRESTEIN, CATHERINE.....	295, 634	FOSTER, ANDREW DAVID.....	764	2041, 2086, 2246
FIRESTONE, MICHELLE.2317, 2484,		FOSTER, MARK.....	38	FRISHBERG, BENJAMIN..94, 186, 300
2485		FOWLER, AARON.....	493, 494	FRITZ, JENNIFER.....
FIRST, BRIAN.....	627	FOWLER, KATHRYN.322, 686, 1999,		90
FISH, STEVEN. ...	169, 170, 304, 337, 542	2332		FRUGONI, GINA.....
FISHER, CASEY.....	563, 575, 581, 585	FOWLER, VINCENT.....	504	647, 2222
FISHER, JAY.....	2269	FOX, DELANIE.....	445, 525	FRUMIN, HOWARD.....
FISHER, JENNIFER.....	633, 694	FOX, KENNETH.....	2373	370
FISHER, SLOANE.....	2123	FOYGELMAN, ALEKSANDR. ...	670, 671	FRY, LIANE.....
FISHER-GAMEZ, LORI.....	565	FOYOUZI-YOUSEFI, NASTARAN.628,		2486
FISHMAN, ELENA.....	1606	647		FRYER, KEVIN.....
FITZGERALD, MICHAEL.....	673, 2485	FRAGOSO, DOMINIQUE.....	155	520
FITZPATRICK, APRIL.....	163	FRAKES, LAURIE.....	168, 633, 641, 724	FU, KAREN.....
FITZPATRICK, MICHAEL.....	490, 599	FRANCIS, CATHERINE.....	480	42
FLANIGAN, MARILYN.....	2465, 2485	FRANCIS, LARRY.425, 776, 777, 2032,		FU, KATHERINE.....
FLANNERY, CHRISTOPHER..439, 508		2408		194, 2450
FLEMING, DAVID.....	1298	FRANK, GUIDO.....	2485	FUJII, CINDY.....
FLEMING, JOHN.....	2575, 2615	FRANK, STEWART.....	71	1757, 2393
FLEMING, SARAH.....	1812, 2201	FRANKLIN RUTLAND, CEDRIC.....	205	FULKS, ZACKARY.....
FLEMING, TARA.....	1230	FRANKLIN, ADAM.....	599	151, 435
FLEMMING, WESLEY.....	696	FRANKWICH, KAREN.....	454	FULLER, DONALD.....
FLETCHER, EMILY.....	1162	FRASIER, BRADLEY.....	580	197, 681
FLINN, SCOTT.....	583, 2095	FREDERICK, ALIYA.....	644, 2213	FUNARI, CHRISTOPHER.....
FLINT, JAMES.....	2016, 2366	FREDERICK, JANE.....	365, 376	1880
FLISZAR, EVELYNE.....	322, 686	FREEDOM VILLAGE HEALTHCARE		FUNDINGSLAND, BRENT.282, 602,
FLORENCE, BRYNA.....	313	CTR.....	878	1896, 2104
FLORES, BRIANNA.....	665	FREEMAN, WANDA.1667, 1668, 1835,		FUREY, CINDY.....
FLORES, BRUNO.....	701	2379		695
FLORES, EDNA.....	168, 299	FRENCH, MICHAEL.....	764	FUSSELL, KEVIN.....
FLORES, ERNEST.....	1162	FRENCH, TONIANNE.....	108, 1804	168, 172, 781
FLORES, JOE.....	1466	FRENETTE, CATHERINE.....	1517, 1518	
FLORES, TERESA.....	46	FRESHMAN, JANELLE.....	417	
FLYNN, DANIELLE.....	2388, 2504	FRESNO, BLANCA.....	1162, 1327	
FODDA, RAMI.....	721, 1666, 1667, 2379	FREY, LAUREN.....	313	
FOLCHTORRES-AGUIAR, BEATRIZ.		FREYNE, BRIGID.....	526	
156, 542, 647, 1293, 1573, 1574, 1777, 1778		FRICKS, CARL.....	320	
FONG, TSE LING.....	249	FRIEDLICH, DANIEL.....	529	
FONSECA, ROSANNA.....	181	FRIEDMAN, BROOKE.....	628	
FONTANA, LOUIS.....	728, 732, 2506	FRIEDMAN, BRUCE.....	235	
FORCIER, NANCY.....	1999, 2331, 2332	FRIEDMAN, JAIME.....	1607	
FOREMAN, TANYA.....	550, 592	FRIEDMAN, RICHARD.....	605, 638	

G

GADDIPATI, KISHORE.....	630, 1518
GADIYARAM, VARUNA.....	296, 636
GADRE, ABHISHEK.....	172, 173, 781
GAFFEY, ANN.....	2012
GAGE, SUSAN.....	474
GAGLANI, RAHUL.....	512
GAIKWAD, SHILPA.....	24
GAINOR, GRETCHEN.....	1276
GALANT, DANIEL.....	547, 679
GALASSO, MADISON.....	108, 1804
GALKO, BARBARA.....	88
GALLAGHER, JEFFERY.....	92, 112, 632
GALLARES, DANIEL.....	1288, 1289
GALLEGOS, CYNTHIA.....	1390
GALLO, LINDA.....	134, 1828, 2443
GALUST, HENRIK.....	292, 1920
GAMIE, SHERIEF.....	301, 646
GAN, TERENCE.....	296
GANDE, ABHIRAM.....	447, 448
GANDHI, ANAND.....	1445
GANDHI, SHEETAL.....	1277
GANDY, JODIE.....	472
GANESAN, ANUSHA.....	2286
GANGJI, SHAZMIN.....	192, 1880

E. Índice de proveedores

GANTA, SANYASI.....	32, 78	GEPSHTEIN, YANA.....	1432, 1433	GLASSER, DANIEL.....	576, 779
GANTA, SRUJAN.....	2373	GERAYLI, AFSHIN.....	354, 355, 449, 450, 590, 591	GLASSER, MARGA.....	100, 101
GARA, NAVEEN.....	183, 1864	GERBATSCH-BORNEMISZA, ILDIKO.....	62	GLASSMAN, JERROLD.....	605, 638
GARBER, MARC.....	100, 578, 783	GERMAN, JOHN.....	493	GLEASON ROHRER, GWEN.....	1466, 1467
GARCIA, CALVIN.....	1915, 2146	GERSTENFELD, ERIC.....	623	GLEICHMAN, JULIA.....	673
GARCIA, CARLOS.....	24, 1163	GERWER, JOHANNA.....	1533	GLENN, TARA.....	2201
GARCIA, DEANA.....	1634	GHAFAI, DAUOD.....	153	GLICKMAN, SAMUEL.....	320
GARCIA, JASON.....	445	GHAHREMANI, SIMIN.....	1163, 1164, 1758	GODINEZ, BRENDA.....	572, 775
GARCIA, JENNI.....	2193, 2486	GHAYOUMI, POURIYA.....	530	GOEB, YANNICK.....	328, 703, 2016, 2366
GARCIA, JOHNNY.....	1180, 1391	GHAZAL, RONNY.....	233	GOEL, GUNJAN.....	701
GARCIA, KARLA.....	19, 1128	GHAZARIAN, ZERON.....	269	GOGGIN, SAMANTHA.....	1607, 1608
GARCIA, RAFAEL.....	1163, 1327	GHAZI, FARANAK.....	58	GOHIL, RAJIT.....	32, 44
GARCIA, REGINA.....	2379	GHIASI, ZAHRA.....	260	GOKHROO, RAHUL.....	207, 218, 439
GARCIA, RICHARD.....	2486	GHOSH, SUBRATO.....	249	GOLD, JEFFREY.....	1869, 2038, 2039, 2214
GARCIA, ROSEMARIE.....	2447	GHOSHEH, FARIS.....	467, 468	GOLD, MARGARET.....	36
GARCIA, TEDAYSHIA.....	1700	GI, HUNG.....	1764, 1824	GOLDBERG, ROBERT.....	459, 482
GARDNER, STEPHEN.....	490	GIALAMAS, GUS.....	599	GOLDEN HILL POST ACUTE.....	879, 2432
GARFF, KEVIN.....	2613	GIAMMANCO, PIERRE.....	752	GOLDEN LIFE ADHC.....	2440
GARFINKLE, REBECCA.....	416	GIAMONA, KRISTEN.....	2318, 2486	GOLDENSON, BENJAMIN.....	248
GARGULINSKI, MATTHEW.....	530	GIANFORTUNE, RACHEL.....	1280	GOLDFINGER, SARAH.....	1391
GARIBYAN, VARTAN.....	605, 1385	GIANG, STEVEN.....	2593	GOLDING, IAN.....	2261
GARNER, KAREN.....	59	GIBONEY, JENNIFER.....	662, 2269, 2296	GOLDKLANG, ROBERT.....	165, 293, 630
GARTH, MELISSA.....	1906, 2124	GIBSON, JULIA.....	735	GOLDMAN, DAVID.....	122, 1818
GARVIN, JOSEPH.....	180	GIGER, ANTON.....	73	GOLDSTEIN, EDWARD.....	731, 1750
GAULT, MICHAEL.....	370	GIL, GABRIEL.....	62	GOLDSTONE, ADAM.....	2540
GAUSEPOHL, MARY.....	520	GILANI, SAPIDEH.....	308, 658, 1966, 1967, 2246	GOLDSZTEIN, HERNAN.....	97
GAVRILYUK, IGOR.....	71	GILBOA, RUTH.....	200, 567, 723, 734	GOLLAPUDI, RAGHAVA.....	103, 114, 605, 638
GAVRILYUK, OLEG.....	663	GILIBERTO, JOSEPH.....	537, 622, 1435, 1436, 2057, 2151	GOLLIN, YVONNE.....	641
GE, NENGJIE.....	259, 260	GILL, MANPREET.....	178, 581	GOLLOGLY, HEIDRUN.....	304, 337, 442, 517, 542, 2563, 2578
GE, NORMAN.....	262	GILLAN, JAMES.....	171, 779	GOLSHAHI, BAHAR.....	393, 394, 477
GEBHARD, KARL.....	46	GILLES, LOUIS.....	172	GOMER, JEREMY.....	82
GEE, JENNIFER.....	426, 574, 778, 2032, 2083, 2409, 2410	GILLILAND, TYLER.....	324	GOMEZ, DANIELA.....	730, 1751, 2392
GEE, JOEY.....	459, 462	GILLMAN, MICHAEL.....	354	GOMEZ, GABRIEL.....	482
GEE, KELLY.....	38, 363	GILROY, LAURA.....	2454	GOMEZ, GUILLERMO.....	425, 426, 749
GEHR, MARC.....	1532, 1533	GIM, RONALD.....	358, 370	GOMEZ, JESSICA.....	122, 188
GEIGER, ERIK.....	249	GIORGI, ASHLEY.....	612, 2124	GOMEZ, JUANITA.....	172, 679, 1859, 2318, 2448, 2487
GEISINGER, TERESA.....	739	GIOVANNETTI, ERIN.....	286, 1907	GOMEZ, LESLIE.....	286, 612, 1907, 2124
GELBERG, ANNA.....	636	GISH, ROBERT.....	539, 630, 1206, 1320, 1321, 1521	GONZALES, DARRELL.....	292
GELLENS, ANDREW.....	156, 542, 647	GISI, SYLVIA.....	82	GONZALES, EDIVINA.....	45, 50
GENG, BOB.....	2259	GITTINGS, DANIEL.....	273	GONZALES, MICHELLE.....	56, 1176
GENOVESE, KELLY.....	2070	GIURGIU, DAN.....	699	GONZALES, PATRICK.....	45, 50
GENTILI, AMILCARE.....	322, 686	GLADSDJO, JULIE.....	163, 623		
GEORGE, BRUCE.....	2548, 2618				
GEORGE, JENNIFER.....	1176				
GEORGE, KENDALL.....	2548, 2618				
GEORGIEV, MARY-JO.....	2388, 2504				

E. Índice de proveedores

GONZALEZ, ADRIANA.....	639	GRATIANNE, ROBERTO... 119, 725, 748	GROVE, VICKI.....	776
GONZALEZ, ANDRES.160, 564, 721, 1843, 2067, 2378		GRATTAN, ANNE.....	GROVEY, BRITTANY.....	602, 603
GONZALEZ, CLAUDIA.....	2455	GRAVES, JENNIFER.....	GRUENENFELDER, JENNIFER.277, 409, 495	
GONZALEZ, DAVID.....	46, 74	GRAY, IGA.....	2525, 2563	
GONZALEZ, JOSE.....	152, 537, 582	GRAY, SARAH.....	1608, 2296	
GONZALEZ, KEVIN.....	226	GREAR MANN, MELISSA.....	1917, 2149	
GONZALEZ, KRISTEN.....	694	GREEN, BILLIE.....	71	
GONZALEZ, LISA.290, 612, 620, 1915, 2147		GREEN, HANNAH.....	25	
GONZALEZ, NICOLETTE.....	97, 780	GREEN, TRAVIS.....	87	
GONZALEZ-GARCIA, CAROLINA.	2507	GREENBAUM, BRADLEY.....	406	
GOODRICH, ANDREW.....	1920	GREENE, DAVID.....	524	
GOODWIN, RACHEL... 1916, 2148, 2149		GREENE, ERIC.....	196	
GORDON, BRENT.....	2262	GREENE, JACQUELINE.308, 658, 1967, 2246, 2247		
GORDON, CHRISTOPHER.....	1198	GREENSPAN, SCOTT.....	74	
GORDON, DANIELLE.....	612, 735	GREENSTEIN, JOSHUA.....	185, 584	
GORDON, JUSTIN.....	152, 537, 538	GREINER, ALEXANDER.....	1855, 2259	
GORDON, MICHAEL.....	273	GREWAL, NAVROSE.....	784	
GORE, GWENDOLYN.....	58, 590	GREWAL, PRABHJOT.....	762	
GORGES, RANDA.....	1209	GRIESINGER, MICHAEL.....	108, 1805	
GORHAM, LAURA.1823, 1877, 2087, 2270		GRIFFETH, BRADLEY.....	524, 736	
GORSKI, TITO.230, 759, 760, 761, 792, 794		GRIFFIN, SETH.....	290, 620	
GORSKI, YARA.230, 231, 760, 761, 762, 794, 796		GRIFFITH, PATRICK.....	406, 407	
GORWIT, JEFFREY.....	183	GRIFFITHS, KENNETH.....	1467	
GOSHEN, KIRSTEN.....	144, 287	GRIMALDI, JOHN.....	143	
GOSMAN, AMANDA.177, 329, 708, 2369		GRIMES, KELLY.....	695	
GOULD, HILARY.....	134, 1828, 2443	GRINDLE, SILVIA.....	585	
GOVASHIRI, REZA.....	44	GRISOLIA, JAMES.....	644, 1553	
GOVEA, ALAYN.....	298, 1942	GRISSOM, MURRAY.2000, 2332, 2333		
GOYAL, NIDHI.....	2283	GROBMAN, LILLIAN.....	312, 662	
GOZZO, YVETTE.....	269	GROGAN, BRIAN.....	2223	
GRACE HOUSE.....	2435	GROSS, KIMBERLY.....	612	
GRAHAM, SCOTT.....	273, 417, 418, 419	GROSS, MATTHEW.1823, 1877, 2028, 2045, 2087, 2270		
GRAMES, BARRY.....	233	GROSSMONT HOSPITAL.....	2417	
GRANDISON, BROOKE.....	218	GROSSMONT HOSPITAL DP SNF.	2427	
GRANESE, MARSHA.....	465	GROSSMONT POST ACUTE CARE.	877, 2428	
GRANITE HILLS HEALTHCARE AND WELLNESS CENTRE LLC.....	2423	GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC.1084, 1085, 1086, 1087, 1088, 1089		
GRANT ANDERSON, BETTY.207, 217, 218		GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC, 78, 1774		
GRANT, REBEKAH.....	1574	GROTTING, JOHN.....	141, 176, 703	
		GROVE, JAY.198, 784, 1886, 2099, 2415		

E. Índice de proveedores

GUTFLAIS, ERIC.....	644, 673	HAMDAN, AYAD.	1932	HARDIN, JEREMY.....	292
GUTH, CARA.127, 344, 665, 1824, 2305		HAMID, WAHIDA.	1181, 1836	HARDISON, CHARLES.....	588
GUTIERREZ, ANGELICA.	1533	HAMIDI ASL, KAMRAN.	352	HARE, MARC.....	108, 109, 182, 627
GUTIERREZ, CRYSTAL.....	503	HAMIDI, AFSHIN.	415, 590	HARFORD, ROBERT.....	213
GUTIERREZ, JUSTINE.....	1241	HAMIDI, MAHSHID.	62	HARFOUCH, CHAWKI.....	511
GUTIERREZ, LORAINÉ.....	62	HAMILTON, JOANNE.....	480, 481	HARGROVE, RACHEL.....	407
GUTIERREZ, TANIA.....	1468	HAMILTON, LISA MARIE.1250, 1468,		HARIANAWALA, SALIM.....	269
GUTTIKONDA, RAKHESH.....	548	1469		HARKNESS, RUMIKO.....	1908, 2125
GUZMAN, HORTENCIA.....	665	HAMILTON, ROSS.....	94, 186, 300, 584	HARMAN, JACY.....	445, 446
GUZZO, RICHARD.....	184, 2450	HAMM, DEANNA.....	639	HARMEYER, JENNA.....	665
GVOZDYEV, BORYS.....	490, 719	HAMMAN, MICHAEL.....	623, 624	HARMIS, NATASHA.....	731, 1764, 1765
GWYNN, DAVID.....	260, 380, 595	HAMMEL, NATHAN.....	177	HARMS, MONICA.....	39
H					
HA, THU.....	612, 1392, 1393, 2125	HAMMES, JOHN.....	636, 642, 643	HAROUSH, GAL.....	2125
HAAK, LOGAN.....	651	HAMMETT, ERIN.....	138, 1146	HARPEL, SHERYL.....	1181
HAAS, RICHARD.....	227, 300, 644	HAMMOND, CHARLES.....	295, 634	HARRELL-BRUDER, BEVERLY.....	109
HABBOUSH, RANA.....	158, 545, 665	HAMMOND, HEATHER.....	151, 181	HARRINGTON, BARBARA LORRAINE.....	1393
HACINAS, REYNALDO.....	728, 1701	HAMOUÏ, NAHID.....	255, 270, 271	HARRIS, CHRISTINA.....	665
HACKLEY, DAVID.....	328	HAMOUÏE, JUDY.443, 2527, 2533,		HARRIS, GENEVIEVE.....	283, 603
HADDAD, FADI.....	333	2540, 2564		HARRIS, JACQUELLIN.....	218
HADDADIN, HASSAN.511, 523, 744,		HAMZEI, ALI.....	159, 283	HARRIS, JEFFREY.309, 658, 1968,	
755, 756		HAN, AMY.....	624	2247	
HADINGER, JANE.....	287	HAN, ANGELA.....	2380	HARRIS, LAURA.....	184, 2450
HADLEY, ZACHARY.....	233	HAN, JAMES.....	577	HARRIS, MATTHEW.....	355
HAFTBARADARAN MOHAMMADI,		HAN, KYOUNG.....	130, 193, 586, 2098	HARRIS, PAMELA.....	424, 1344, 1345
AFSANEH.....	374	HAN, PAUL.....	1534	HARRISON, AMY.....	33, 44, 560
HAGHVERDIAN, BRANDON.....	273	HAN, SUL.....	157, 341, 655	HARSOLIA, ASIF.....	397
HAHN, LEWIS.....	322, 686	HAN, SULKI.....	2527, 2564	HART, BECKY.....	1393, 1394, 2125
HAHN, MICHAEL.....	322, 686, 687	HANAGAMI, CORI.....	673	HART, MARQUIS.....	700
HAI, FAIZI.....	1518, 1519	HANDLER, BARRY.....	708	HARTFORD, NICOLE.....	1792
HAIDER, SANDRA.....	477, 478	HANDLER, SUZANNE.....	651	HARTMAN, ANDREW.....	579
HAIDER, SHANZAY.....	214, 438, 439	HANDLEY, KAREN.....	481	HARTMAN, JULIE.....	503, 739
HAIDER, UZMA.....	214, 438, 439	HANDWERKER, JASON.....	322, 687	HARTMANN, PHILLIPP.....	2283
HAIGHT, BRUCE.337, 542, 2026, 2061,		HANJAN, TIVA.....	476, 491	HARVEY, DELFINA.....	612
2563, 2578		HANLEY, LAUREN.1152, 1220, 1293,		HARVEY, SCOTT.302, 647, 648, 1951,	
HAJNIK, CHRISTOPHER.....	176	1574, 1575, 1576, 1778		2223, 2224	
HALEY, JESSICA.1855, 1875, 1876, 2262		HANNA, ANDREW.....	391	HASAN, AWS.....	293, 630, 1930, 2173
HALEY, STEVEN.....	151, 537, 622, 1436	HANNA, KAREN.....	784	HASAN, BUSHRA.....	503, 739
HALGEDAHL, YI TING.565, 770, 1340,		HANNA, LINDSAY.....	287, 1908	HASE, KATHLEEN.....	181
1341, 1342, 1343, 1787, 2400		HANNAWI, ANDREW.....	2215	HASEGAWA, CHRIS..1984, 2305, 2306	
HALIM, NEIL.....	75	HANNSUN, GEMMY.....	2000, 2333	HASHAM, SOPHIA.....	98
HALL, ANDREW.....	18	HANONO, ABRAHAM.....	2549	HASHEM, SHIVA.....	1120
HALL, JACOB.....	94, 748	HANONO, HELFON.....	2549	HASHEMI, EMAD.....	258
HALLDORSON, JEFFREY.....	699	HANSEN, CHRISTINA.....	147, 313	HASSAN, SARAH.....	367
HALPERIN, JASON.....	84, 2406	HANSEN, DOYLE.....	152	HASSANEIN, TAREK.111, 113, 153, 154,	
HALPERN, DAVID.....	91, 287	HANSINK, RAYMOND.....	716	183, 593, 630, 634	
HALVORSON, PAULA.....	1889	HANSON, ADRIENNE.....	757	HASSANI, FARZANEH.....	1365, 1366
		HAPKE, ELENA.....	1660		

E. Índice de proveedores

HASTANAN, CAROL.....1198	HENRY, BRIAN. 40	HILLIARD, THESALONICA.613, 1394,
HASTIE, ELIZABETH.....636, 2185	HENRY, REBECCA. 62, 63	1395, 2126
HATEFI, DUSTIN.199, 327, 701, 1886,	HEPNER, ABSALOM.....451	HINCHCLIFF, KATHARINE. . 2018, 2371
2013, 2361	HERMAN, ANDREA..... 1758, 1759	HINES, TAYTE.....213, 722
HATTANGADI-GLUTH, JONA.135, 174,	HERMAN, RACHEL.....136, 234, 547	HINKLE, CORINNE..... 344, 2029
321, 681, 2327	HERMAN, SAM..... 17, 82	HINOJOSA-VALENCIA, ALEJANDRO.
HAUFF, SAMANTHA. ....658, 659	HERMANSON, KATHLEEN 98, 1798	.....23, 71
HAUPT, DAVID.....561	HERMES, MARY..... 1660	HINSHAW, PAUL. 188, 1870, 1871, 2385
HAUSER, BRIAN.....42, 58	HERNANDEZ RIVERA, JOSE DANIEL.	HIRSCH, JENNIFER.....1917, 2149, 2150
HAWKINS, MELISSA.....777, 2409	..... 29	HIXSON, THOMAS. 2564
HAWLEY, DANIEL.....322, 687	HERNANDEZ, CRISTINA.292, 1921,	HLAVAC, SANDRA. 739
HAWTHORNE, KAREN..... 732	2159	HO, ALAN.....355, 356
HAYDEN, SANDRA..... 372	HERNANDEZ, JESSICA.424, 2070,	HO, AMIEE.....1818, 2550, 2594
HAYDIS, MARIA. 253	2071, 2401	HO, GILBERT..... 94, 584
HAYS, SHEENA..... 287, 612	HERNANDEZ, MARCO.....424	HO, HOANG..... 666, 2594
HAYTON, TAMMY.....514	HERNANDEZ, MIRIAM..... 2387	HO, HOANG MINH. ....655
HAZAN, ALISON.....665	HERNANDEZ, RALPH.....1714, 1715	HO, LARRY.....236
HAZELBAKER, PAUL..... 1534	HERNANDEZ, SILVIA. 2487	HO, LYSA..... 58
HEAD, KRISTIN.1844, 1862, 2034,	HERR, COLLEEN. ....161	HO, TAMMY.....277, 278, 409, 496, 600
2070, 2126	HERR, RAYMOND..... 671	HO, TRAM.....2520
HEADLEY, ALISON.....644	HERSEVOORT, SHAWN.....673	HOAG CLINIC. 16
HEBREO, JOSEPH.....185	HERSH, LINDSEY.....218, 219	HOAG HOSPITAL IRVINE.....13
HEFNER, ANNA..... 613, 2126	HERSKOVITZ, SCOTT. 2270	HOAG ORTHOPEDIC INSTITUTE.....13
HEHE, KYLE..... 88, 478, 599	HEURING, JULIE..... 287	HOAGLAND, PETER. 100, 601
HEIFETZ, SUSAN.....57	HEYMAN, BENJAMIN..... 1932, 1933	HOANG, CHI..... 1395
HEIMLER, GRAHAM..... 62	HIBBS, NICOLE..... 1609	HOANG, KENNY..... 2575, 2615
HEINRICH, JAMES.....470	HICKS, TOMMY..... 38	HOANG, KEVIN..... 2594
HEINRICI, ALEKA.62, 600, 1469, 1713,	HIETALATI, SAMANTHA.....1945, 2202	HOANG, MAI. ....1952, 2224
1714	HIGGINS, DAWN.....446	HOANG, VY..... 1230, 1609
HEKMAT, RAZI.....54, 55, 1321	HIGGINS, JOSHUA.171, 313, 665, 1857,	HOCHBERGER, WILLIAM..... 713
HEMET GLOBAL MEDICAL CENTER.	1984, 1985, 2306	HODGKIN, EDWARD.....1198, 1199
..... 13, 877	HIGGINSON, MICHELLE. 1535	HOEFKE, ANGELA. 287
HEMP, JAMES.....708	HIGHTOWER, GEORGE.....624	HOFFMAN, STEVEN. 2594
HEMPERLY, STEPHEN..... 164, 624	HIGUERA, EDITH..... 545, 666	HOFMEISTER, ERIC.....141, 703
HENDERSON, GREGORY..... 550, 773	HILAL, TARIQ..... 391, 392	HOGAN, ROSELYNNJOY.1395, 1396,
HENDERSON, PHILIP..... 1535	HILDRETH, AMBER.....2173	1397
HENDERSON, RODNEY..... 347	HILES, DANIEL.....113	HOGARTH, MICHAEL.....1936, 2185
HENDERSON, TREVOR..... 1609	HILL, CARLA.....159, 732, 1769, 1770	HOGUE, BRENNNA.292, 627, 1921, 1922,
HENDRICKS, MARK. 71	HILL, GENIELYN.....613, 1394, 2126	2159
HENDRIX, JEFFERSON.1469, 1470,	HILL, KAITLYN.....302	HOLDEN, MARC. 710
1714	HILL, LINDA.628, 1652, 1653, 1654,	HOLLEMAN, KEVIN.184, 194, 195, 640,
HENLEY, MEARA..... 1668, 1669	2168	673
HENNEIN, LAUREN.304, 1853, 1872,	HILLCREST HEIGHTS HEALTHCARE	HOLLICK, NATALIE. ....1164
2040, 2081, 2232	CENTER..... 879, 2432	HOLM, WILLIAM.....560
HENNINGER, DELMER.....523	HILLDALE HABILITATION CENTER.	HOLMER, ARIELA. ....1930
HENRICK, ANDREW.....352, 380, 381	.....2428	HOLMSTROM, STEVEN. ....90
HENRY, ANEEL..... 71	HILLER, ASHLEY.....520	HOLNESS, RONALD.....400

E. Índice de proveedores

HOM, DAVID.309, 659, 1968, 1969, 2247, 2248	HOWELL, AMANDA.424, 565, 770, 1345, 1346	HUNSAKER, NALANI.....226, 444
HOM, GREGORY..... 2595	HOWELL, STACEY..... 251	HUNT, TYRELLE..... 33
HOM, KATHERINE..... 441	HOXMEIER, KRISTA..... 1634, 1635	HUNTER, JACOB.313, 666, 1985, 1986, 2306
HOM-TEDLA, MARIANNE...1952, 2224	HSIAO, ALBERT..... 322, 687	HUNTER, MICHAEL..... 273
HOMESLEY, SUSAN..... 2587	HSIEH, TUNG CHIN..... 2020	HUNTER, WENDY..... 1277, 2271
HOMSI, YASER..... 248	HSING, ANDREW..... 173, 781, 782	HUO, KEUN-HENG..... 491, 719, 720
HONG, ANDREW..... 74	HSU, BRADFORD..... 139	HUOH, KEVIN..... 470
HONG, ERIC..... 284	HSU, CHRISTOPHER.156, 337, 2528, 2540, 2564	HUOTT, PATRICK..... 186, 748
HONG, HANNA..... 474	HU, JINGJING..... 1979	HUPFELD, CHRISTOPHER... 164, 1846
HONG, HEE KYUNG..... 239	HU, JOHN..... 458	HURD, MELISSA..... 83
HONG, JOHN..... 201	HUA, MENG..... 630	HURSCHMAN, ALAN..... 663
HONG, THOMAS..... 703, 704	HUA, NATHAN..... 71	HURST, MICHAEL..... 729, 1737
HONOLD, JOSE..... 2202	HUANG, ALEX..... 304	HURWITZ, MICHAEL..... 271
HOO, PAMELA.. 306, 1960, 2551, 2595	HUANG, BRADY..... 322, 687	HUSAIN, ASGHAR..... 233
HOOPER, BONNIE.91, 161, 613, 1796, 1844, 2127	HUANG, CHARLIE..... 36	HUSEBY, DAVID..... 41
HOOPER, WILLIAM..... 781	HUANG, DANIEL..... 458	HUSKEY, DANA..... 188
HOOPES, DAVID.. 578, 681, 2327, 2328	HUANG, JANET..... 35	HUSSAIN, ABID..... 34
HOREISH, ADAM..... 116, 1813, 1814	HUANG, MARIA..... 2296	HUSSAIN, SHAHID..... 643, 645
HORENSTEIN, MARIA..... 472	HUANG, MARK..... 139, 142, 143	HUSSEMAN, JACOB.309, 659, 1969, 2248
HORGAN, SANTIAGO.326, 700, 2010, 2357	HUANG, PETER..... 2521	HUSTANA, LARA..... 2551, 2552, 2595
HORIZON CBAS..... 2440	HUANG, STEPHANIE..... 98, 192, 585	HUSTED, JOHN..... 794
HORKY, LAURA..... 2000, 2333	HUBBARD, EUSTRATIA..... 662	HUYNH, ANDREW..... 72
HORMOZDYARAN, SANAYA..... 1610	HUBLEY, PAUL..... 1128	HUYNH, ANTHONY..... 387
HORN, ADAM..... 174, 321	HUDSON, BONNIE..... 649	HUYNH, CHI..... 2596
HORN, TREVOR..... 757	HUDSON, HENRY.170, 188, 304, 338, 543, 651, 2027, 2534, 2540, 2551, 2564, 2565, 2578, 2595	HUYNH, DOQUYEN..... 696
HORNBEAK, KIRSTEN..... 1922, 2159	HUDSON, JESSICA..... 329, 708	HUYNH, JUDY..... 38
HORNEY, KRISTAN..... 1397	HUEGE, STEVEN..... 2459	HUYNH, LOAN..... 2596
HORNFELD, COURTNEY..... 613	HUERTA, CARMEN.209, 503, 504, 739	HUYNH, PAUL..... 651, 2233, 2596
HOROWITZ, MICHAEL..... 322, 687	HUERTA, STEVEN.424, 565, 566, 770, 2071, 2072, 2402	HWANG, BRIAN..... 404, 405
HORTON, LUCY..... 2180	HUFANA, ALYSSA..... 267, 268	HWANG, CAROLINE..... 245
HOSALKAR, HETAL..... 1896	HUGHES, CHARLOTTE..... 309, 659	HWANG, DONNA..... 469
HOSEIN, NADEEN..... 627, 1445, 1446	HUGHES, ELISA..... 121	HWANG, JOHN..... 381, 558, 559
HOSSEINI, ALIREZA..... 243, 454	HUGHES, HEATHER..... 33	HYLTON, DIANA.1897, 2034, 2104, 2415
HOSSEINZADEHMALEKI, ANA.119, 725, 748, 1816, 2384	HUGHES, LARRY..... 33	HYUN, SUZANNE..... 206, 436, 737
HOUGHTON, ROBERT..... 63	HUGHES, TUDOR..... 687	I
HOURLANI, RAYAN..... 103, 149, 605	HUI, KIM..... 648	IBANEZ, BERENICE..... 2393, 2507
HOURIHAN, KEITH.1191, 1192, 1305, 1436, 1437, 2033	HUISA-GARATE, BRANKO..... 119, 725	IBARRA, MARTHA.106, 1115, 1701, 1702, 1803, 2127
HOUSELY, ALEXIS..... 324, 2005	HULL, ANDREW..... 1847, 1943	IERARDI, STEPHEN..... 38
HOVANESIAN, JOHN..... 381, 595	HUMPHRIES, CORINNE..... 252	IGNACIO, ROMEO..... 2357
HOWE, STEVEN.2012, 2053, 2054, 2395	HUNG, JANICE..... 2565, 2578	IGWE, CHINWENDU..... 209
	HUNG, JENNIFER..... 250	IGWE, DANIEL..... 231, 447, 527
	HUNG, LYNNE..... 450, 460	IHEMEDU, AMARACHI.209, 210, 784, 785

E. Índice de proveedores

IHEMEDU, MAGNUS.209, 210, 784, 785	JACOBS, JEFFREY.....222, 381, 595	JEDAMSKI, WALDTRAUT..... 206, 737
IJAZ, TAHIR.....197, 681, 682	JACOBS, KATHLEEN.....322, 687	JENKIN, FREDERICK..... 63
IKE, ERICA..... 733, 2394	JACOBS, NATALIA.....439, 744	JENKINS, ENCHANTA..... 648, 1752
ILCHENA, ALESANDRA.....1437	JACOBS, RANDOLPH.....438, 740, 741	JENKINS, ERIN..... 287, 613
IM, TAE WOONG..... 80	JACOBS, ROBERT..... 575	JENNINGS, AMY..... 730, 2507
IMAM, ASIF..... 500	JACOBS-KLEISLI, MILAGROS..... 1165	JENSEN, ADRIENNE..... 613, 1182
IMAM, SYED.....2388, 2505	JACOBSEN, BRADLEY.573, 651, 2081, 2233	JENSEN, BRIAN..... 2091, 2471
IMPERIAL BEACH HEALTH CENTER. 940	JACOBSEN, GARTH.176, 700, 1859, 2011, 2358	JENSEN, BROOKE..... 222
IMPERIAL BEACH HEALTH CENTER, 34, 1275	JACOBSON, ARTHUR..... 222, 736, 749	JENSEN, NATISHA.....271
IMUS, PAUL.....1280	JACOBSON, JON.....322, 687, 688	JEPPESEN, LANCE.....722
INDA, PRISCILLA.127, 128, 158, 1171, 1824, 1825, 1841	JACOBY, RICHARD.....160, 168	JERCINOVICH, IGOR..... 530
INDRA, SEAN..... 2045, 2271	JAFARI FARSHAMI, FATEMEH.....484	JESPERSEN, RHONDA.....101
INGULLI, ELIZABETH.....2288	JAFFE, GILAD.....298, 637, 638, 786	JI, AMANDA.....1782
INOCELDA, ANDREW..... 98, 1798	JAFFRAY, JULIE..... 2286	JIANG, FEN.....459
INSTONE, SUSAN..... 1397, 1398	JAFFRAY, PAUL...322, 688, 2001, 2334	JIANG, WEN..... 1874, 2042, 2249
IP, COLIN..... 188	JAHANPANAH, FERESHTEH..... 27	JILLANI, ASIF.....236
IRAGUIMADOZ, VICENTE... 1949, 2215	JAIME, CINDY..... 648	JIMENEZ, ANDREA..1830, 1892, 2064
IRIZARRY, NICOLE.....1660, 1661	JAIN, ALEXANDRA.....137, 1830	JIMENEZ, CARLOS..... 125
ISAIAS, AGNELA..... 1164	JAIN, RINA.....704	JIMENEZ, CLARIBEL.580, 588, 722, 2101, 2381
ISHAK, SALAM.....220, 736	JAIN, SUPRABHA..... 113, 636	JIMENEZ, KRYSTAL.....19, 1129
ISHIMINE, PAUL.....2271	JAKKULA, JAGAN.228, 434, 754, 788, 789	JIMENEZ, NANCY..... 730, 2507
ISHO, MATHEW..... 698	JAKOBSEN, MICHAEL.388, 389, 470, 471	JIMENEZBACARDI, ADRIA.....2297
ISLAM, JULIE..... 1193, 1194, 1446	JALALI, FARID..... 366	JINDAL, ANUJA.1850, 1869, 2038, 2080, 2297
ITURBE-ALESSIO, IGNACIO..... 112	JALISI, NEJAT.....25	JOHN, ALAN.....114, 155, 638, 724
IVANOV, MARGARET.....1936	JAMAL, MOHAMMAD.....431	JOHN, TANNER..... 63, 673, 674, 2168
IYENGAR, RADHA.....1109, 1110	JAMES, CHRISTINE.....732, 2101, 2507	JOHNSEN, HEGE..... 231, 761, 794, 795
IYENGAR, RAVI..... 293, 627	JAMES, JOJI..... 255, 374	JOHNSON, BRYCE..... 273, 419
IYER, LAXMI..... 86	JAMISON, KAREN.....1536	JOHNSON, CHRISTINE.....2094
IYER, VICTORIA..... 1908	JAMSHIDI-NEZHAD, MOHAMMAD. 579	JOHNSON, CHRISTOPHER.2576, 2615
J	JANISZEWSKI, EVA.....47	JOHNSON, DANIEL.....1274, 1275
JABBARI, SIAVASH. .135, 197, 346, 682	JANKOWSKI, PAWEL..... 256, 271	JOHNSON, KENNADY.....695, 2346
JABBOUR, MOUSSA.....1936, 2185	JANNESARI, ROYA.....1862	JOHNSON, KENNETH..... 112, 1808
JABRI, ZAIN.....1209, 1210	JANSEN, CORNELIUS.....309, 659	JOHNSON, KIMBERLY.... 106, 150, 210
JACKSON, ALLYSON.....524	JARDON, JAVIER.....1225	JOHNSON, ROGER..201, 202, 222, 517
JACKSON, ANITA..... 43, 80	JASKI, BRIAN..... 100, 601	JOHNSON, RYAN.....98, 171, 576
JACKSON, CODY.....649, 671	JASSO-RAMIREZ, MARTHA...540, 640	JOHNSON, SHAWNA AKIKO.1398, 1399
JACKSON, DANA.....1230, 1231, 1297	JAVAHERI, MANIJEH.....41	JOHNSON, SUSAN.....376, 594
JACKSON, GAVIN.....1536	JAVIER-DESLOGES, JUAN.....348	JOHNSTON, ERIC..... 170, 778
JACKSON, MADELEINE.....2367	JAZBEH, SAMMER.....2001, 2334, 2335	JOHNSTON, KARLY..... 253
JACKSON, ROBERT..... 405	JEAN-MURAT, CAROLLE..... 68, 79, 82	JOHNSTON, RACHEL..... 291, 620
JACKSON, TAYLOR.....2271	JEBAIN, JEBAIN.....296, 636	JOLICOEUR, MEGAN.293, 628, 629, 1928, 2169
JACOB HEALTH CARE CENTER LLC. 879, 2432	JECMENICA, MLADEN.....431, 432	JOLLEY, WALTER..... 671

E. Índice de proveedores

JOMOC, CAITLIN.306, 655, 1960, 2239, 2552, 2596, 2597	KALANTARI, OUZHAN.....261	KARROWNI, WASSEF. ....370
JONES, CHRISTA.. 287, 613, 1908, 2128	KALBAKJI, NATALY.2517, 2534, 2540, 2552, 2565, 2578, 2579, 2597	KARUNAMUNI, JENNIFER... 322, 688
JONES, DANIEL. ....298, 320	KALE, RAHUL .....714, 715, 717	KASAI, SARAH.....2586
JONES, KENDRA.....514	KALINIAN, HAYGOUSH. 713, 716, 717	KASAWA, JOHN.....25, 1199
JONES, LAILA.....287	KALKANIS, JAMES.....752	KASEY'S HOME.....2423
JONES, LAKESHA.....210	KALRA, ANKUR.....2521, 2579, 2616	KASIR, RAFID.....704
JONES, MARILYN.....294, 632	KAMAREI, SHAPARAK.....59	KASSAB, GHADA.....152, 624
JONES, SETAREH.....1231, 1232	KAMATH, SUNIL.....474	KASSAM, HAFIZ.....274
JONES, STACY.....770	KAMEL, JOSEPH.....551	KATSNELSON, MARCELLA...296, 636
JONES, VALORIA.....219, 745, 786	KAMOTO, LYNN.....1765	KATZ, JONATHAN.330, 710, 2020, 2375
JOO, KATHY.....742	KANAAN, SAMER.....276, 277, 407	KATZ, YISRAEL.....1937, 2185
JORDAN, JAMIE.....1610	KANALY, KIM.....458, 465	KATZEN, SETH.....127, 344, 663, 664
JORJADZE, KETEVAN.....287	KANE, KARA.....560, 590	KATZMAN, BARRY.338, 2517, 2528, 2566, 2579, 2597, 2598
JOSEPH, JEFFREY.....222, 517, 749	KANE, NORMAN.....328, 580	KATZMAN, LEE.....2525, 2566
JOSHI, YASH.....315, 674, 2487	KANG, EILEEN.....268, 435	KAUFER, DAVID.....729, 1737, 1738
JOSHUA, JISHA.....1997, 2325	KANG, JOSEPH.....790	KAUFHOLD, ANNE.....1102, 1470, 1715
JOSON, PETER.....352, 381, 468, 596	KANG, KYUNG.....241	KAUFMAN, AVRUM.....350
JOU, BILL.....742	KANNAN, SWATI.....2153	KAUFMAN, BRITNEY.....520, 560
JOURDAIN, VICTOR.....109	KANSAGRA, AKASH.....688	KAUFMAN, DAVID.....245
JOYCE, ROBERT.....2617	KANSARA, DEVANSHU.....704	KAUFMAN, JENNIFER CHILYN.1470, 1471
JU, NATHANIEL.424, 567, 772, 1788, 1789, 2076, 2406	KANTAS, PARIS.106, 728, 1702, 1703, 2389	KAUFMAN, TIFFANY.....520
JUANG, PATRICIA.....1927, 2163	KANU, ABDUL.....206, 737	KAUNITZ, GENEVIEVE.....624, 2153
JUAREZ, AMERICA.....2443	KANUKUNTLA, TULASI.434, 435, 754, 789	KAUP, ALLISON.92, 99, 291, 318, 319, 582, 587
JUAREZ, LETICIA.....1239, 1649	KARANDE, PRACHI.137, 234, 548, 1830, 1893, 2064	KAUR, JATINDER.....29, 57, 1250, 1377
JUAREZ, PATRICIA.....1610	KARANIKKIS, CHRISTOS.....777	KAURA, MAYA.....41
JULAZADEH, SARA.....191, 306, 656	KARANJIA, NAVAZ. 300, 316, 645, 674	KAYAL, ANAS.....116, 724, 725, 776
JULIAN, FIDES.160, 285, 608, 1843, 1902, 2112, 2113	KARAPETIAN, ELENA.....2541	KAYE, ALYSON.....770
JUMA, SAAD.....143, 146, 330, 348, 710	KARAVAN JAHROMI, MAHSA.....551	KAYE, SHAWN.....17
JURKOWSKI, LEONARD.....627	KARCHES, KELLI.....1537	KAYE, WALTER.....2487
JUSTINO, HENRI.....2262	KARI, ELINA.310, 659, 1970, 1971, 2042, 2249	KAYYAL, SIMON.....464
K		
KAAKI, BILAL.....424, 426	KARIMABADI, MARJAN.....58	KAZEM, AHMAD.....181, 622, 1437, 1438
KABADI, ALISHA.....173, 782	KARIMIAN, AMIR.....284	KAZEM, HARON.....1120, 1121
KABOLIZADEH, PEYMAN.....397	KARIPPOT, ANOOP.132, 133, 134, 316, 317, 318, 674, 677, 678	KAZEMI, SEPIDEH.....251
KABRA, ASHISH.....564, 775	KARMAKAR, KANKA.662, 1610, 1611, 2297	KEALEY, TAMMY.....561
KADAKIA, AMAR.....242	KARMUR, AMIT.....232, 762, 795, 796	KEARNS, MARK.....2018, 2019
KADAKIA, NIMISH.....273, 274, 419	KARNIK, KUSHAL.....296	KEARNY MESA CONVALESCENT AND NURSING HOME.....879
KADIFA, FADY.....369, 395, 396	KAROW, DAVID.....322, 688	KEARSE, WILFRED.....348
KAFRI, HASSAN. 103, 114, 149, 155, 1216	KARP, MICHAEL.....1792	KEDDINGTON, JOAN.2522, 2579, 2616
KAGAN, CALVIN.....604	KARPEN, SARAH.....313	KEEFE, KELLY.....651
KAHL, NICHOLAS.....613, 1099, 1244	KARRIS, BIANCA.....195, 674	KEEL, DOUGLAS.....624
KAISEY, MUSHRIK.....23		KEEN, WILLIAM.....284, 1900
KAKAIYA, ROSHNI.....51, 1147		KEFLEZIGHI, BAHGHI.....1471
KAKIMOTO, AMY.....28		

E. Índice de proveedores

KEIFER, JASON.....	674	KHAN, HASHIM.....	103, 605	KIM, KEUN-YOUNG.....	487
KEILLER, DANNY.143, 146, 177, 330, 710		KHAN, KHADEER.....	361	KIM, KEVIN.....	763
KELCHNER, MATTHEW....	89, 732, 1101	KHAN, MATTHEW.....	1399	KIM, LAUREN SOOJIN.....	239
KELLEHER, BRIDGET.200, 566, 770, 771, 1270, 1271, 1346, 1347, 1787, 1788, 1888, 2072, 2402		KHAN, SAMIRA.....	382	KIM, MICHAEL.574, 778, 2083, 2410, 2411	
KELLER, BENJAMIN.....	2369	KHAN, SHAHFAR.....	2271	KIM, MICHELLE.....	585, 2097
KELLER, CHARLES.....	381, 382, 596	KHANNA, POORNIMA.....	27, 72, 1537	KIM, MIN JOO.....	180
KELLER, YESENIA.....	106	KHANNA, SURABHI.....	138, 696	KIM, MOSES.264, 278, 392, 409, 410, 496, 600	
KELLEY, JESSICA.....	613	KHARADJIAN, TALAR.....	571, 573	KIM, PAUL.....	177, 704
KELLEY, STEVEN.....	764	KHARAZI, ALEXANDRA... 103, 139, 347		KIM, PHILIP.307, 656, 1960, 2239, 2541, 2553, 2599	
KELLING, JONATHAN.....	500	KHARE, MANASWITHA.....	2297	KIM, SEON-HOON SEAN.....	241, 242
KELLOGG, CHERYL.....	42	KHATIB, NORA.....	651, 2233	KIM, YUHEE.....	1288
KELLOGG, KRISTEN.....	1182	KHATIBI, NIKAN.....	178, 179, 501	KIM-ORDEN, MICHAEL. 406, 491, 720	
KELLY, KATHERINE.....	566, 2075	KHAWAR, OSMAN.....	185, 186	KIMBALL, JEFF.....	530
KEMMERLY, THOMAS.....	743	KHAYYAT, OMAR.....	167	KIMBALL, MICHAEL.....	141, 347, 704
KEMP, KATHRINE.....	1399, 2128	KHEHAR, BHUPINDER.....	72	KIMMCMANUS, OLIVIA.1850, 1869, 2039, 2215	
KENNEDY, GREGORY... 350, 430, 593		KHERADMAND, SHIVA.504, 505, 551, 741		KIMURA, BRUCE.....	605
KENNEDY, KATHRYN.....	476	KHIEU, TINA.191, 306, 307, 544, 2518, 2528, 2534, 2541, 2553, 2566, 2567, 2580, 2599		KINBACK, KEVIN.....	351
KERAMATI, SHAHIN.....	605	KHINDA, SUNEHA.....	2548, 2599	KINDRED HOSPITAL SAN DIEGO.13, 2417	
KERSTEN, DIANA.....	382, 596	KHOSHREZA, HALEH.....	38	KING CHAVEZ HEALTH CENTER.972, 973, 974, 1052	
KESANAPALLI, DEEPTHI.....	1611	KHUAT, LIEN.....	287	KING CHAVEZ HEALTH CENTER, .67, 1508	
KESARI, SANTOSH.....	462	KHURANA, AMAN.....	688, 2001, 2335	KING, APRIL.....	163
KESEL, KELSEY.....	446, 526	KHURANA, ANIL.....	361	KING, FRANK.....	476
KESHAVARZI, SARA.....	180, 1862, 1863	KI, TRISH.....	613, 1400, 1401, 2128	KING, JOHN.....	283
KESSLER, JENNIFER.....	771	KIDANE, ZINNIA.....	2129	KING, JUSTIN.....	700
KETCHEL, CLINT.1353, 1354, 1355, 1356, 1789, 1790		KIDDER, BRENDAN.....	63, 1471, 1472	KING, MARY.....	2522, 2581, 2616
KFIR, MENASHE.....	254, 373	KIDOKORO, YASUKO.....	68, 69	KINGDON, JOANNA.2046, 2087, 2272	
KHAFAJA, MOHAMAD.....	2459, 2488	KIENZLE, HELEN.....	481	KINGDON, TYLER.....	2191
KHAGI, SIMON.....	255	KIM, ABRAHAM.....	274, 418, 419, 420	KINGSBURY, A GRANT.....	72
KHAING, KATHY.....	117, 643	KIM, ALEXANDER.....	601	KINI, VIJAYKUMAR.....	562
KHALEEL, AMMAR.....	89, 2442	KIM, BONNIE.....	476	KIPPER, MICHAEL.....	301, 646
KHALEGHI DAMAVANDI, MIR BEHNAM.....	398, 399	KIM, BRIAN.....	382, 383, 596	KISCADEN, LAUREN.264, 392, 476, 477	
KHALEGHI, MANI.....	344, 666	KIM, CHEL.....	239	KLAPHEKE, ROBERT.....	293, 630
KHALIGHI, PAYMAN.....	2598	KIM, DANIEL.....	456	KLAREN, AMANDA.....	2542, 2600
KHALIL, VADY.157, 191, 341, 656, 2517, 2528, 2534, 2541, 2552, 2566, 2580, 2598		KIM, EDWARD.....	382, 383, 596	KLATMAN, SAMUEL.....	142
KHAMISA, SORAIYA.....	640, 2488	KIM, EMILY.....	511	KLAUSE, ELVIRA.....	400, 401
KHAMISHON, BORIS.....	645, 2215	KIM, ERIC.....	323, 688	KLEIN, DAVID.....	1952, 2224, 2225
KHAN, AHAD.....	203	KIM, ESTHER.....	382, 383, 716	KLEIN, LORRIE.....	415
KHAN, ALIYA.....	1220	KIM, FRANK.....	532, 533	KLEINSMITH, DARIN.....	560
KHAN, CEMONE.....	469	KIM, ILWHA.....	427	KLEWEIN, CRYSTAL.....	504
KHAN, FAHAD.....	651, 2599	KIM, IRENE.....	45, 82		
		KIM, JAMES.....	103, 115, 332, 535, 539		
		KIM, JANE.....	433		
		KIM, JANET.....	325, 382		
		KIM, JIUN.....	1147		

E. Índice de proveedores

KLIGERMAN, SETH.....	323, 688	KOUSARI, JHALEH.	1669, 1670, 1671	KURKJIAN, AZAD.	716
KLINE, LANNING.	2234	KOVACS, DAVID.	459, 484	KUROSAKA, MOMO.....	629, 2169, 2170
KLING, KAREN.1860, 1887, 2053,		KOZMA, BONITA.....	2153	KURPIUS-BROCK, MARINDA.....	252
2093, 2369, 2370		KRAD, OMAR.	468	KURTULUS, MEL.....	302
KLUEMPER, NICOLE. 2318, 2319, 2488		KRAFT, ELIZABETH.	271	KURUKULASURIYA, DAYANTHITHI.	
KNUTSON, THOMAS.	199, 1887	KRAHN, DOUGLAS.....	527	.....	56
KOBAYASHI, GARY.....	84	KRAK, MICHAEL.....	1793	KURZ, TROY.	158, 2443
KOBAYASHI, KAREN.....	24	KRAMER, MELISSA.....	1370	KUSHNARYOV, ANTON.	575, 779
KOCHARIAN, NAIRA.....	300	KRAPES, MICHAEL.....	2091, 2471	KUSHNER, KENNETH.....	401, 486
KODSI, ALICIA.....	1232	KRAUSE, MARTIN.283, 500, 602, 784,		KUSNEZOV, NICHOLAS.142, 145, 328,	
KOHATSU, KAREN.....	2225	2034, 2415		704, 1834, 2017, 2367	
KOHLI, SANJIVAN.....	396, 714, 715, 717	KREMER, ARNOLD.	17, 25	KUTZ, CRAIG.292, 627, 1922, 1923, 2160	
KOHOUT, KATHRYN.....	721, 2380	KREPS, CHRISTOPHER.	172, 315	KVIATKOVSKY, MILLA.	1937, 2186
KOLB, FREDERIC.....	2371, 2372	KRESHAK, ALLYSON.....	1922	KWAK, ANGELA.	2542
KOLODENKER, GENNADY.....	265	KRIGER, STEPHEN.	130, 345, 546	KYI, MYA.	536, 613
KOLODGE, GAVIN.127, 142, 663, 664,		KRIJGER, LISA.....	1538	KYTASTY, CHRISTINA.....	189, 651
704		KRISHNA, SHEILA.	164		
KOLODGE, KAITLEN.	128	KRISHNAN, PRIYANKA.	364, 430	L	
KONDILI, DHIMITER.323, 688, 2001,		KROCHMAL, RACHEL.....	721	LA COSTA HOUSE.....	2422
2336		KROL, THOMAS.....	569	LA FUENTE POST ACUTE... 880, 2436	
KONG, GRACE.	258, 376	KRUEGER, VAN.....	704	LA JOLLA NURSING AND REHAB	
KONING, JEFFREY.	312, 661	KRUK, PETER.....	662	CTR.....	877, 2427
KONUGRES, GEORGE.....	359, 370	KRYCHMAN, MICHAEL.....	376	LA MAESTRA CHC EL CAJON	
KONYN, CATHERINE.....	180	KUECHLE, RALPH.....	481	BROADWAY.	916, 917, 918, 919, 923
KOO, ANITA.124, 157, 158, 191, 544, 1819,		KUEK, JOHN.	541, 640	LA MAESTRA CHC EL CAJON	
1840, 1874, 2062		KUGEL, SAMUEL.	547, 2465	BROADWAY,	26, 1204, 1205
KOOKOOTSEDES, GAYLE.369, 399,		KUIOKA, TROY.....	1241, 1242	LA MAESTRA CHC-REA AVE.....	923
636		KULASA, KRISTEN.....	1927, 2164	LA MAESTRA CHC-REA AVE, .26, 1205	
KOOROS, KOOROSH.	171, 312	KULHANEK, JAN.	160, 284	LA MAESTRA FAMILY CLINIC INC.	
KOPACZ, JOANNA.	368	KULICK, DANIEL.....	451	904, 905, 924, 949, 954, 955, 959,	
KOPLIK, SHERI.....	460	KULISCHAK, JOHN.....	2553, 2600	1034, 1035, 1038, 1039, 1040, 1049	
KORFF, GARY.	17	KULJIAN, NANCY.....	504	LA MAESTRA FAMILY CLINIC INC, .	
KORMANIK, PATRICIA.161, 287, 771,		KULKARNI, NISHAT.	2451, 2476	.....26, 53, 67, 1205, 1206, 1318, 1508	
1845, 1909, 2403		KUMAR, AVNEE. .523, 790, 2052, 2416		LA MESA HEALTHCARE CTR.878,	
KORN, ERROL.....	111	KUMAR, KRIS.	284	2428	
KORSAND, SID.....	1165	KUMAR, NINA.	210	LA MESA PEDIATRICS.	940, 941
KOSEL, MATTHEW.	1691, 1692	KUMAR, NISHCHAL.	46, 47	LA PALOMA HEALTHCARE CTR.878,	
KOSMO, MICHAEL.....	723	KUMAR, RASHMI.	245, 246	2430	
KOSSMAN, STEVEN.....	641	KUMAR, SOMA.....	2174	LABIB, MICHAEL.....	2319, 2488
KOTHA, AKTHER.....	347	KUNAM, NEELIMA.....	789	LAC, PETER.....	439, 440, 787
KOTHA, PURUSHOTHAM.	332, 2021	KUNAM, SYAM.....	789	LACH, REBECCA.....	1129, 1472, 1473
KOTHA, ROSHAN.	333, 347, 2031	KUO, ALLEN.....	591, 593, 594	LAD, NIKISHA.	730, 2465
KOUCHAK, YASMIN.....	778	KUO, DENNIS.....	356, 392, 2286	LAFONTANT, JEAN.....	581
KOUKEYAN, KARIN.....	198, 697, 698	KUPFER, DAVID.	528, 531, 708	LAFORTEZA, JOZELLE.....	2129
KOUMAS, MARY.....	43	KUPPALLI, KRUTIKA.296, 635, 1934,		LAGO HERNANDEZ, CARLOS.1937,	
KOUMJIAN, MICHAEL.....	348, 531	2181		1938, 2186	
KOUPAIE, JAFAR.....	213, 438, 505, 741	KURESHI, SOHAIB.....	347, 645	LAGUNA HILLS HEALTH AND REHAB	
				CTR.....	878

E. Índice de proveedores

LAI, AMARA.....1251	LARKINS, PHILIP.....193	LEDON, JENNIFER..... 552
LAI, KHANG.....264	LAROSE, CONNOR.....233	LEE, ALAN.....581
LAI, WYMAN.....472	LARSEN, JULIE.....2230	LEE, ALEXANDER.....548
LAIDLAW, JOHN.....640, 2488	LARSEN, STEVEN.....2600	LEE, ANDREW.....260
LAJOIE, ADRIANNE.....165, 166, 293	LARSON, BENJAMIN.....448, 533	LEE, AUSTIN.....2581
LAKE FOREST NURSING CENTER.....878	LARSON, BRETT.....224, 518, 519, 752	LEE, BEGEM.....2298
LAKE, MENORE.....689	LARSON, LINDSAY.....613, 732	LEE, BRIAN.....239, 240, 246, 715
LAKHERA, YOGITA.....169, 299	LAS VILLAS DE CARLSBAD OPERATIONS LLC.....876	LEE, BYUNG.....216, 509, 510
LALITHAKUMARI, ARYA.....1538, 1539	LASKER, BRUCE.....645	LEE, DAVID.....756, 1949, 2216, 2460, 2489
LALONDE, FRANCOIS.....475, 491	LASKY, LANA.....566	LEE, GEMAYEL.....602, 603
LAM, ANNE.....2554, 2600	LASSWELL, EVE.....1995, 2459	LEE, HAEWON.....1857
LAM, CLAUDIA.....666	LAU, JANICE.....2601	LEE, INSUN.....101, 331, 602, 603
LAM, DAVINA.....2307	LAU, KUEN CHINE.....2600, 2601	LEE, ISABEL.....147
LAM, KHANH.....105, 608, 1801, 2113	LAURENT, LOUISE.....1847, 1943, 2194	LEE, JAMES.....246
LAM, KIM.....376	LAVERTY, CHAMINDRA.....2216	LEE, JASON.....2534, 2542, 2601
LAM, MICHAEL.....1938, 2186	LAW, KAREN.....51, 1130, 1310	LEE, JENNIFER.....313, 666, 1986, 2307
LAM, PAMELA.....296, 297	LAW, LINDSEY.....351, 352	LEE, JENNY.....795
LAM, TUAN.....407	LAWHORN, CHRISTA.....210	LEE, JIMMY.....260
LAM, VINH.....486, 493	LAWRENSON, LESLEY.....790	LEE, JOHN.....222, 223, 442, 736, 750
LAMALE-SMITH, LEAH.....1852, 1871, 1953, 2225	LAWRIE, ALISA.....1611	LEE, JONATHAN KWANG.....225
LAMANTIA, MICHELE.....636, 729, 1321, 1322, 1539, 1738	LAWSON, ERIN.....563	LEE, JOSEPH.....76, 1716, 1717
LAMBERT, GAGE.....2307	LAZAR, DAVID.....2370	LEE, KAREN.....2178
LAMONT, DANIEL.....359, 370	LAZARUS, ELIZABETH.....163, 291	LEE, KATHERINE.....259, 362, 376, 377
LANCASTER, MICHELLE.....520, 521	LAZO, NELLY.....458	LEE, KYUNG HAN.....738
LANDEOGUTIERREZ, JEREMY.....2291	LAZZARINI, THOMAS.....442, 750	LEE, MICHAEL.....493, 1540
LANDER, JEFFREY.....86, 349, 362, 415, 551	LE, BRANDON.....622	LEE, MINDY.....287, 613
LANDIS, SARAH.....1635, 1636	LE, CHARLES.....643	LEE, MYUNGHEE.....128, 735
LANDON, JEFFREY.....545	LE, CRYSTAL.....1867, 2203	LEE, PAUL.....204, 246, 456
LANE, BRIAN.....2203	LE, DAN.....359	LEE, RICHARD.....274, 720
LANE, KEVIN.....224, 736, 752	LE, DIANA.....1239, 1240, 1650	LEE, ROLAND.....323, 689
LANE, KIMBERLY.....1803, 1835, 1845, 1909, 2022, 2129, 2130	LE, HUAN.....680, 2326	LEE, RONALD.....250
LANE, RICHARD.....94	LE, NGUYEN.....210, 1612	LEE, RYAN.....671
LANG, LESLIE.....566, 2072	LE, SANG.....232, 233, 234	LEE, SALLY.....2567, 2581
LANG, PAUL.....304, 305, 651	LE, TAM.....2542, 2617	LEE, SANDRINE.....1473, 1474
LANGENBERG, BRET.....700	LE, TAYLOR.....1841	LEE, SEMI.....240
LANGER, ROBERT.....551, 552	LE, THUAN.....511	LEE, SHARON.....398, 483
LANGIS, TANYA.....578	LE, VU.....765	LEE, SHULAMI.....180
LANIER, JAME.....226	LEAMING, ROBERT.....394, 561, 599	LEE, SUSAN.....42
LANIER, TIMOTHY.....362	LEANO, ANYLOU.....211	LEE, WILLIAM.....521
LANUZA, MARK.....1310	LEAVITT, JAMIE.....465	LEE-KIM, CHRISTINE.....235, 449
LAPINA, LORI.....1636, 1637	LEBANO, RICHARD.....63	LEFF, MICHELLE.....662
LARA, LESLEY.....1716	LEBENSCHN CHIALVO, FLORENCIA.....2319, 2489	LEHMAN, ERICA.....268
	LEBO, DEBRA.....514	LEHNERTSCHUCHARDT, ELEANOR.....2262
	LEDBETTER, ALEX.....316, 674, 2459, 2489	LEI, SHARON.....387
		LEIBEL, SYDNEY.....2259, 2260

E. Índice de proveedores

LEIER, TIM.....	206, 737	LIANG, NI-CHENG.....	173, 782	LIOU, YUJIE.....	624, 2154
LEIGHT, TERRA.....	387, 597	LIAO, OTTO.....	354	LIPSCHITZ, LISA.1153, 1221, 1294, 1577,	1578, 1579, 1580, 1779
LEININGER, DANIEL.....	333, 334, 335	LIAUW, JASON.....	405, 410, 487	LIPTON, GREGORY.....	564
LEISH, BRIAN.....	38, 365	LIEBER, CAROL.....	1402	LIRA, JOSE.....	113, 135
LEMON GROVE CARE AND REHAB		LIEBERMAN, RONALD.....	172	LIRA, SHANNON.....	739
CTR.....	878, 2429	LIEM, WIEKE.....	552	LISH, JONATHAN.....	1475
LEMON GROVE FAMILY HEALTH		LIEN, CHRISTINA.....	527	LIU, ANDREW.113, 167, 183, 297, 333,	539, 571, 573, 636, 2079
CENTER.943, 944, 945, 946, 947, 948,	949	LIFE CARE CENTER OF ESCONDIDO.	877, 2425	LIU, CHIA CHI.....	253
LEMON GROVE FAMILY HEALTH		LIFE CARE CENTER OF VISTA.880,	2436	LIU, CHIA-LIN.....	63
CENTER,.....	44, 1288	LIM, DEAN.....	561	LIU, FRED.....	316
LENHART-PENDERGRASS,		LIM, IMELDA.536, 1300, 1301, 1402,	2056	LIU, GENE FU.....	483
PATRICIA.....	1857, 2049, 2090, 2291	LIM, ROSEMARIE.....	539, 2064	LIU, GRACE.....	203, 241
LENIHAN, MICHAEL.....	128, 704	LIM, VIVIAN.....	323, 689	LIU, SHANGLEI.....	2009, 2352
LENNON, RYAN.....	1401	LIN LEVY, JENNIFER.....	624	LIU, STEVEN.....	167
LEON, JOSUE.....	777	LIN, CHI WHEI.....	41	LIU, TIMOTHY.....	2490
LEONARD, BEVERLY.1116, 1182, 1183,	1771	LIN, DARIUS.....	274	LIU, WENJING.....	559
LEONARD, LISA.....	83, 777, 2409	LIN, GRACE.....	311, 661	LIU, YUNXIANG.....	2234
LEPARD, KRISTINA.....	780	LIN, HENRY.....	2602	LIU-BARBARO, DOROTHY.436, 1282,	1283
LEPEZ, DAVID.....	76, 1717, 1718	LIN, JAMES.....	259	LIZOTTE, PAUL.....	57
LERNER, JONATHAN.102, 148, 179,	604, 720, 1801, 1836, 1862, 2109, 2378	LIN, JOYCE.....	1986	LLANES, BENJAMIN.....	2602
LEUIN, SHELBY.1854, 1875, 2086,	2250	LIN, KEVIN.....	270	LLOYD, MATTHEW.....	1637
LEUNG, CHRISTINA.....	387	LIN, PARKSON.....	266	LO, ALAN.....	41, 369
LEUTE, ERIC.....	1311, 1718	LIN, RAY.....	521	LO, PATRICIA.....	377
LEVERONE, NICHOLAS.....	2186	LIN, RICHARD.....	765	LOBUE, THOMAS.....	442, 517, 750
LEVIE, ADAM.....	695	LIN, SHINKO.152, 153, 538, 582, 624,	1837, 2057, 2094, 2095, 2154	LOC, KIET.....	374
LEVIN, JACQUELINE.....	453, 552, 589	LIN, THEODORE.....	442, 750	LOCASCIO, ELIZABETH.....	514
LEVIN, MARINA.....	297, 636	LIN, TOM.....	2284	LOCKE, JOHN.....	530
LEVINE, MATTHEW.....	1446, 1447	LIN, YUAN.....	200	LOEFFLER, ALLISON.1153, 1154, 1221,	1294, 1295, 1580, 1581, 1582, 1583, 1779
LEVINE, MONICA.....	248	LINAMEN, NICHOLA.....	733	LOGAN HEIGHTS FAMILY HEALTH	
LEVINE, REED.....	702	LINARES, YENDI.....	1274	CENTER.984, 985, 986, 987, 993, 994,	995, 996, 997, 998, 999, 1000, 1001,
LEVY, MICHAEL.....	2361	LINDA VISTA HEALTH CARE CTR.	1018, 1022, 1023, 1047, 1048	1002, 1003, 1004, 1051, 1053	
LEVY, PHILLIP.....	2567	LINDA VISTA HEALTH CARE CTR. ,67,	1508, 1509	LOGAN HEIGHTS FAMILY HEALTH	
LEW, HOMER.....	41	LINDBACK, SARAH.....	1379	CENTER,.....	67, 1509, 1510
LEWIS, GEORGE.....	713	LINDEMAN, KURTIS.....	1474	LOHNES, ELLIE.....	1638
LEWIS, GREG.....	297	LINDEMANN, CHRISTINA..	666, 2307	LONAPPAN, HENA.....	477
LEWIS, MICHAEL.....	2374	LINKE, SARAH.1995, 2319, 2320, 2460,	2490	LONG, RYAN.....	137, 159
LEWIS, PRIYA.....	2372	LINNEMEYER-RISSER, KRISTEN..	325	LONGARDNER, KATHERINE.2216,	2491
LI, ALEXANDRIA.....	2234	LIOTTA, BENJAMIN.292, 627, 1923,	2160	LONGBERG, AUSTIN.....	453
LI, HOJUN.....	2286	LIU, SHARON.....	313	LONGOBARDO, FRANCESCA.....	666
LI, JINGHONG.....	1923, 2035, 2416			LOPER, KAREN.....	1612
LI, MING.....	458			LOPEZ VIZCARRA, MARCO.....	462
LI, XIA.....	316, 674, 675, 2460, 2490				
LI, XIANGLI.....	84				

E. Índice de proveedores

LOPEZ, ALYSSA-NICOLE.....	121, 649	LURINKS GARCIA, MARIA.....	745	MAGNOLIA ADULT DAY HEALTH	CARE.....	2439
LOPEZ, IRMA.....	31	LUSBY, FRANKLIN.....	2554	MAGNOLIA POST ACUTE CARE.....	876,	2423
LOPEZ, JOANNA.....	2448	LUSCHWITZ, BRIAN.....	1793	MAGNOLIA SPECIAL CARE CENTER.....	876	
LOPEZ, MARIA.....	150, 444	LUTTGE, SCOTT.....	448, 533, 767	MAGNOLIA SPECIAL CARE CTR.....	876	
LOPEZ, MARIBEL.....	730, 2508	LUU, DANIEL.....	622, 2152	MAGOS, DANIEL.....	184, 2451	
LOPEZ, MARIO.....	1638, 1639, 1782, 1783	LUU, QUANG.....	262, 471	MAHDAD, MEHRDAD.....	256	
LOPEZ, NICOLE.....	325, 698, 2009, 2352	LWIN, THUTHIRI.....	732, 2394	MAHDAL, SUZAN.....	1289	
LOPEZ, RACHAEL.....	377	LY, NANCY.....	103, 115, 535, 539, 605,	MAHENDRAN, SRIVIDYA.....	1613	
LOPEZ, SANDRA.....	774, 777	606		MAHESHWARI, ANOOP.....	424, 427	
LOPEZ, XIMENA.....	2049, 2298	LY, PHUONG.....	47	MAHMOOD, FARAH.....	205	
LORENZO, PATRICIA.....	1447	LY, SOPHEAP.....	183	MAHONEY, KAITLYN.....	1661	
LOSTETTER, ADRIENNE.....	1379	LYFORD, WILLIS.....	624	MAHOOTI, SEPI.....	661	
LOUGH, MICHELLE.....	1475	LYLE, DOUGLAS.....	359, 370	MAHROU, REZA.....	236	
LOUIE, BRANDON.....	533	LYNCH, GREGORY.....	753	MAI, KENNY.....	72	
LOUSSARARIAN, ARTHUR.....	451, 460	LYNN, KENNETH.....	392	MAI, TUAN.....	144, 604, 606	
LOVE, YVONNE.....	727	M			MAJDALANI, KAREN.....	253
LOVERN, JENNIFER.....	567, 772, 1438	MAACHIP, FHARAK.....	539, 541	MAJEED, WASAN.....	80	
LOVING CARE ADHC.....	2440	MAASUMI, KASRA.....	374, 375, 590	MAJITHIA, AMIT.....	1938, 2187	
LOWE, ASHLEY.....	161, 288, 614	MAC, OLIVIA.....	231, 761, 795	MAJUMDAR, ADITI.....	491	
LOWE, LINDSAY.....	640	MACASADIA, MARITES.....	128, 545	MAK, ROBERT.....	2288	
LOWRY, DAVID.....	211	MACAULEY, TODD.....	35	MAKANI, SAMIR.....	173, 782	
LOZADA-PASTORIO, ELIZABETH.....	117	MACCHIO, GREGORY.....	101	MALAK, LAWRENCE.....	2444, 2491	
LOZANO, MARTHA.....	135	MACDONALD, HEATHER.....	271	MALEK, MIKHAIL.....	179, 1865	
LOZIER, JEFFREY.....	585, 2097	MACEWAN, IAIN.....	174, 321, 682	MALEKIRAD, JACQUELINE.....	367	
LU, CHONG PING.....	229	MACHO, DANIELLA.....	226	MALHOTRA, ARATI.....	1683, 1684	
LU, CHRISTIAN.....	250	MACIAS, ALISSA.....	1671, 1672	MALIK, SUDHIR.....	645	
LU, JULIE.....	1476	MACIEL, MARLA.....	372	MALLES, CHRISTINA.....	313	
LU, LESLIE.....	48	MACINTYRE, ELIZABETH.....	1370	MANCHEL, BRUCE.....	130, 671, 731, 1173,	1651, 1768, 1769
LU, TAMMY.....	1183, 1403	MACK, GREGORY.....	704	MANCHESTER, KAREN.....	180	
LUAN, GORDON.....	63	MACKAY, GILLIAN.....	169, 302, 648, 1852,	MANDEL, RONALD.....	38	
LUCACI, BIANCA.....	437, 740	1953, 2226		MANDEVILLE, ROSS.....	119, 725, 1816,	2384
LUCAS, SARAH.....	327	MACMURRAY, MICHAEL.....	57, 571	MANDOYAN, AUSTIN.....	1199, 1200, 1476	
LUCATERO, JENNIFER.....	521, 560	MADAN, SAKSHI.....	666	MANECKE, KRISTEN.....	649	
LUCERO, RENEE.....	553	MADANI, BAHAR.....	166	MANGENE, CYNTHIA.....	1183, 1184	
LUCKETT, DECOURCY.....	150	MADANY, GEORGE.....	1613	MANGINE, REGINA.....	1771	
LUDEMA, THOMAS.....	87	MADGEDI, SHEILA.....	614	MANGOBA, LUTHER.....	55	
LUGO, GUSTAVO.....	297	MADHAV, KINJAL.....	92, 100	MANI, MAJID.....	122, 189, 338, 543	
LUHAR, RIYA.....	94, 300, 584, 1553, 1554	MADHAV, SANDIP.....	90, 97, 283, 312	MANI, NASRIN.....	1226	
LUI, STEPHEN.....	715	MADRID, RICHARD.....	44, 80	MANI, PARVIN.....	2226	
LUJAN, ARLEEN.....	1612	MAFONG, ERICK.....	624	MANNEN, JOSEPH.....	2525, 2567	
LULIC, DZENAN.....	50	MAGANA, MARISA.....	173, 782	MANNINO, ELIZABETH.....	1283	
LUM, YUIN-WAH.....	1301	MAGANDA, JESSICA.....	106	MANNINOAVILA, ELIZABETH.....	2298	
LUMHO, RACHEL.....	726, 2386	MAGEE, ANNA.....	2455			
LUNA, MARIO.....	531, 765	MAGINOT-CHESHER, TAMARA.....	1996,			
LUND, GUY.....	637, 643	2320, 2460, 2491				
LUONG, TRAN.....	1987	MAGIT, ANTHONY.....	310, 659, 660, 1971,			
LUPTON, JASON.....	624	2250				

E. Índice de proveedores

MANORCARE HEALTH SERVICES	MARSHALL, STUART.....328	MATTHESS, JANETTE.....288, 1909
HEMET.....877	MARSTON, JACQUELINE.629, 1477, 1478	MATTHEWS, MERRITT.....19, 52
MANRIQUEZ, LISETTE.150, 614, 1836, 2130	MARTIN, DAVID.....527	MATTIOLI, TAYLOR.....314
MANRIQUEZ-CASTILLO, ERENDIRA.....1613, 1614	MARTIN, FREDERIC.....1554	MAUSER, JILL ELLEN.....722
MANSOUR, RASHAD.....151, 436	MARTIN, HALEY...313, 666, 1987, 2308	MAXWELL, BENJAMIN.....2461
MANSOUR, SABAH.....76	MARTIN, RIA.....1403	MAXWELL-JUNGE, MELISSA.....2446
MANSOURY, HADI.....255, 374	MARTIN, STEPHANIE.....553	MAY, LOUIS.....23, 154, 1210, 1739, 1839
MANSY, GINA.....135, 174	MARTIN, THOMAS.....635, 2181	MAYADEV, JYOTI.....174
MANSY, TAMARA.....27, 1210	MARTINEZ, ARMANDO.297, 637, 1938, 2187	MAYER, ANDREW.....293, 294
MANUEL, FRANCESCA.....155, 2446	MARTINEZ, CAROLYN.614, 1404, 2130	MAYET, KHADIJA.....48
MANZANO, EUNICE.....614	MARTINEZ, ELADIO.....19	MAZAREI, RAHELE.....573, 777
MANZO, CORINA.....2130	MARTINEZ, JORGE.....45, 50, 51	MAZZA, DAVID.....130
MAPLES, RANDI.....134	MARTINEZ, KENNETH.....87, 88	MBA, MBAUZOMA.....293
MAPLETON, SHARINA.....207, 738	MARTINEZ, LESLY.....568, 773	MC CLEARY, DAVID.....224
MARANDOLA, MICHAEL.....455	MARTINEZ, NORAYMA.184, 724, 2451	MC DIARMID, JOHN.....519, 752
MARANGI, KENT.....491	MARTINEZ, STEPHANIE.132, 2444, 2461, 2491, 2492	MC ELROY, CARTER.....2346, 2347
MARANO, RACHEL.....2298	MARTINEZ-ANDREE, INGRID.....1614	MCADAMS, JOSEPH.....1988, 2308
MARC-AURELE, KRISHELLE.662, 1946, 2203, 2204, 2299	MARTINEZ-MURGUIA, IRENE.128, 731, 1329, 1639	MCAULEY, ROBERT.....2455
MARCINIAK, ROMAN.....1540	MARVASTI, AMIR.....260	MCCALLION, DANIELLE.....288, 332
MARCUS, DEKE.....481	MASAKI, DAMON.254, 259, 373, 374, 377	MCCALLION, PATRICK.....1822
MAREK BYKOWSKI, JULIE....323, 689	MASCARENO, EFRAIN.124, 1819, 1820, 2522	MCCALLUM, JAMES.....1447, 1448
MAREK, MAKSYM.119, 120, 725, 748, 1816, 2385	MASHAYEKHI, PEGAH.....587	MCCAMMACK, BRADLEY.....1371, 1372
MARINESCU, CATALIN.....259	MASIELLO, DAVID.....510	MCCANDLESS, JEREMY.....705
MARISCAL, MIGUEL.....128, 1825	MASLIN, JESSICA.....122	MCCANDLESS, RACHEL...2044, 2262
MARJON, PHILIP.216, 510, 633, 723, 774	MASON, JAMES.....790, 791	MCCANN, JAN.....394, 478
MARKMAN, LISA.....243, 364	MASSOUDI, FARZAD.....405, 406	MCCAUL, DAVID.....320
MARKS, ROBERT.323, 689, 2001, 2336	MAST, ASHLEY.....536, 621	MCCLAIN, MEGAN.....288, 614
MARLAY, GREG.....2581	MASTERS, ROBERT.....371	MCCLAY, EDWARD.....168, 169, 724
MARMON, JULIE.....109	MATEO, MARIE.....722	MCCLEAN, ESMERALDA.307, 1960, 2554, 2603
MAROLLA, ALICE.....2006	MATHIAS, HERMAN.....34, 217	MCCOWN, BARRY.....151, 436
MAROSOK, MICHELLE.....614, 722	MATHUR, ARVIND.....214	MCCULLEY, DAVID.....2205
MARQUE URGENT CARE.....16	MATIALEU, LEOPOLDINE.....158, 159	MCCULLOUGH, DEIRDRE.1811, 2023, 2195
MARQUEZ, ANTONIO.....252	MATIAS, JULIE.....568, 723, 1684	MCCULLUM, TIFFANY.....2320, 2492
MARQUEZ, LUIS.....63	MATICH, BRANKO.....1478, 1479	MCCURRY, LISA.....253
MARR, RYAN.90, 170, 191, 307, 341, 545, 656, 2518, 2528, 2535, 2542, 2554, 2568, 2581, 2582, 2602, 2603	MATIKO, JAMES.....234	MCCUTCHEON, CLAIRE.....297
MARRIOTT, AGATA.....147	MATOBBA, NANA.662, 1812, 1946, 2204	MCDANIEL, MICHELE.1923, 2160, 2272
MARSDEN, CLAIRE.....435	MATSHE, ZENZIWE.....1251, 1864	MCDANIEL-DAVIS, SHAYNA.203, 241, 361, 452
MARSHALL HOUSE.....2436	MATSON, GARY.....63	MCDONALD, MARIN.....323, 689
MARSHALL, CATHARINE.....294	MATSUOKA, AKIHIRO.310, 660, 1972, 2251	MCDONALD, MARY.....80
MARSHALL, LAWRENCE.....2013, 2361	MATTERA, BETH.....288	MCDONALD, ROBERT.....80
		MCDONNELL, EMMA.122, 123, 156, 189, 543
		MCFARLAND, NATHAN.....44, 1284

E. Índice de proveedores

MCGEE, JACQUELINE.100, 198, 578, 1799, 1885	MEHBOOB, SALMAN.....160, 168	MENIFEE GLOBAL MEDICAL CENTER.....13
MCGEHRIN, KEVIN.120, 132, 133, 725, 727, 748, 754	MEHDI, RAZA.....505, 741	MENIFEE LAKES POST ACUTE..... 878
MCGILLOWAY, MELANIE.....614	MEHRANPOUR, PAYAM.....332, 333	MENN, STUART..... 175
MCGINTY, PATRICK..... 160	MEHROTRA, SACHI..... 166, 631	MENON, POOJA..... 1131
MCGOWAN, GLAIZA ANN.....614	MEHTA, AMAL..... 229, 447, 759	MERALI, MURTAZA..... 2568
MCGRATH, BENJAMIN..... 478	MEHTA, CHANDRAKANT..... 447, 759	MERCADO, BRYANT..... 561
MCGRAW, JOSEPH.170, 189, 305, 338, 543, 652, 2518, 2535, 2543, 2568, 2582, 2603, 2604	MEHTA, HIRSCH..... 103, 606	MERCADO, JEFFRY..... 664
MCGUCKIN, RICHARD..... 253	MEHTA, NOOPUR.....192	MERCADO, ROBIN..... 441, 442, 515
MCGUIRE, DESMOND..... 383, 559	MEHTA, PRATIK.....527	MERCANDETTI, ALEX..... 601, 638
MCGUIRE, WILLIAM.320, 680, 1998, 2326	MEHTA, RITVIK..... 125	MERCER, KELLY.158, 545, 666, 1236, 1237, 1330, 1639, 1640
MCHENRY, KATHRYN.25, 29, 44, 57, 723, 767, 1251	MEHTA, SHILPA..... 243, 364, 365	MERCER, SCOTT..... 28
MCHONE, PATRICIA.....362	MEHTA, VIKRAM..... 89	MERLO, CLIFFORD..... 791
MCINTOSH, ANDREW.....416	MEHTA, VINAY.....235, 449	MERRILL, COREY..... 1988, 2308
MCINTYRE, DEBRA..... 443, 444, 752	MEHTA, VIVEK..... 271, 272, 488	MERRILL, SARAH..... 19, 1131
MCINTYRE, SUSAN..... 253	MEHTSUN, WINTA..... 329, 708	MERRITT, MARISA.....771
MCKENNETT, MARIANNE..... 1130	MEINEKE, RYAN.....177	MESBAH, AZITA.....256
MCKERAHAN, KELLY..... 49	MEJIA, SHAYNE..... 775	MESHKINPOUR, AZIN.....429, 553
MCKESEY, JACQUELINE..... 107	MEJIAS, JUAN.....196, 587	MESIWALA, ADNAN.....2046, 2272
MCKNIGHT, BRADEN.142, 145, 328, 705	MEKEEL, KRISTIN..... 2374	MESLEH SHAYEB, AKRAM.....633
MCLAUGHLIN, ERIK ..1479, 1480, 2170	MELBER, DORA.1811, 1867, 1944, 2024, 2036, 2077, 2195, 2196	MESSINGER, BRADLEY.201, 218, 425, 502, 512, 745
MCMAHON, SHARON..... 1166	MELE, ANTHONY.....481	MESSIHA, ANDREW..... 356
MCMICHAEL, JESSICA..... 475	MELLENDEZ, ARIANA.302, 648, 1954, 2227	MESTAN, KAREN.....1946, 2205
MCMILLAN, CATHERINE..... 48	MELLENDEZBERRIOS, IARA.156, 542, 648	METCALF, ASHLEY.....2273
MCMILLAN, MONICA..... 109	MELGAR, MONICA..... 1480	METH, ERNIE..... 646
MCMURRAY, SARAH..... 167	MELKONIAN, VIKEN..... 465, 466	MEURICE, MARIELLE ERENDIRA LUCILLE.....302, 648
MCMURREN, BRITTANY..... 2529	MELL, LOREN.....135, 174, 682	MEYER, ISAAC..... 614
MCNAMEE, CAIRINE..... 323, 689, 690	MELLOT, KAREN..... 211, 437	MEYER, JILL..... 113, 117
MCNEALY HOUSE.....2430	MELTZER, PAUL.....238	MEYER, JOAN.....193
MCPHERSON, SAMANTHA..... 288	MELTZER, VIRGINIA.....614	MEYER, MEGAN..... 1897, 2104
MEADOWS, AUDRA... 1953, 2226, 2227	MEMON, TALHA..... 506, 507	MEYERHOF, GRETA.572, 573, 776, 2472, 2512, 2513
MEAGHER, RAISHELLE..... 733, 2508	MENDELSON, SUSAN.....259, 377	MEYERS, JUDITH..... 180
MEAGLIA, JAMES.278, 279, 410, 411, 496, 497, 600	MENDENHALL, ANNA..... 1243	MICHAEL, NICOLE..... 288
MEDIC, IGOR.....333	MENDENHALL, GEORGE..... 284, 285	MICHAEL, RAMI..... 28, 154, 1211, 1839
MEDINA, ALEXANDER..... 52, 1311, 1312	MENDES, CHANTAL... 1823, 1877, 2272	MICHALOWSKI HOME.....2430
MEDINA, NATALIE..... 54, 55	MENDEZ, ADRIANA.572, 775, 2471, 2472, 2512	MICK, SHARON.288, 614, 1909, 1910, 2131, 2132
MEDINA, RUBELETA..... 614, 2131	MENDEZ, ANDRES.....1996, 2461	MID-CITY COMMUNITY CLINIC.1020, 1037, 1038, 1039, 1040, 1049, 1050
MEGALI, NICOLE.....98, 192, 314	MENDEZ, DIEGO.121, 542, 648, 731, 1154, 1222, 1752, 1753	MID-CITY COMMUNITY CLINIC, .67, 1510, 1511
MEGERIAN, JONATHAN.....464	MENDEZ, JESUS..... 128, 1171, 1172	MIDORO, ABEGAILLE..... 2056, 2132
MEHARDA, SANJIWANI.....33, 50	MENDIVIL, ALBERTO..... 248, 458	MIDTLING, STEPHANIE..... 305
	MENDOZA, GRETTEL MARIE.1404, 2131	
	MENDOZA, RAYMUNDO..... 2582	

E. Índice de proveedores

MIEL, RUFINAPAMELA.....	459, 460	MITIKU, TEFERI.....	237, 349	MONTES, VIVIAN.....	727
MIGNEA, DAVID... 1177, 1242, 1661, 1662		MITTAL, YASH.....	630	MONTEZ, REBECCA.....	2472
MIKUT, ALYSSA.....	2230	MIYA, GARY.....	660	MONTGOMERY HOUSE.....	2436
MILANCHI, SIAMAK.....	270, 271	MIZOGUCHI, LIANNE.....	2555, 2604	MONTGOMERY JR, KEITH.2073, 2403	
MILDER, EDMUND.....	2288	MIZZELL, ANNA.....	1900, 2110	MONTGOMERY, ROBERT.....	275
MILES, RENEE.....	2455	MOASIS, GHASSAN.....	329	MONTOYA, JESSICA.....	2320, 2493
MILLAR, MELISSA.....	2104	MOASIS, KAREEM.....	84	MOODLEY, AMARAN.....	2181
MILLER, ASHLEY.....	268	MOATTARI, ALI.....	556	MOOLANI, RAMESH.....	112
MILLER, BRANDON.....	31, 80	MOAYERI, SHARON.....	556	MOOLANI, UJJALA.113, 117, 118, 167,	
MILLER, BRIAN.....	345	MODENA, BRIAN.....	282	201, 297, 333, 571, 583, 637	
MILLER, DONALD.....	1372	MODHWADIA, MAMTA.....	586, 2477	MOONEY, PATRICIA.161, 288, 504,	
MILLER, EVA.....	2132	MOELLER-BERTRAM, TOBIAS.....	737	614, 615, 722, 2380	
MILLER, H.....	296	MOFFATT, KYRRA.....	1280	MOOR, TRACY.....	2555, 2604
MILLER, JAMES.....	91	MOFID, MEHRDAD.....	329	MOORE, BRIAN.....	346, 733
MILLER, JAMIE.....	204, 259, 377	MOHALE, SHARON.....	598	MOORE, CANDACE.....	146, 372
MILLER, JEAN.....	180	MOHAMEDALI, BURHAN.103, 115, 149,		MOORE, HEATHER.....	161
MILLER, JULIE.....	522, 780, 2414	606, 638, 721, 724, 1808, 1839, 1866,		MOORE, PAMELA.....	227
MILLER, KURT.....	466	2191, 2192, 2383		MOORE, PATRICK.....	526
MILLER, LAUREL.....	1640	MOHAMEDI, NADIA.....	1312	MOORE, SHAVON.316, 675, 2461, 2493	
MILLER, LUCY.....	335	MOHAMMAD, AHMADSHAH.120, 335,		MOORE, THOMAS.....	1848, 1944, 2196
MILLER, MIKAELA.....	631, 2492	1817, 2025		MOORMAN, KRISTA.....	344, 666
MILLER, RYAN.....	444	MOHEBBI, ATHENA.....	1910, 2133	MOOSAVI, MOHAMMAD.....	27
MILLER, SCOTT.....	629, 2172	MOHINDRA, SUCHITRA.....	38	MORA, WENDY.426, 574, 778, 779,	
MILLER, WILLIAM.....	1665	MOHLENBROCK, WILLIAM... 148, 328		2032, 2083, 2084, 2411	
MILLON, TINA.....	211	MOHLER, LESTER.....	705	MORAL, JOHN.....	139
MILLS, BRAD.....	2492	MOLDOVAN, STEFAN.139, 198, 199,		MORALES, ALEJANDRA.63, 1480,	
MILLS, DAVID.....	2046, 2273	700		1481	
MILLS, MARLIN.....	373, 374	MOLES, JEREMIAH.....	342	MORAN, TIFFANY.....	1404, 1405, 2133
MINASSIAN, ARPI.....	319, 679	MOLHO, DAVID.....	274, 275, 420, 421	MORCHI, GIRA.....	472
MIRACLE, ANGELYN.....	2034, 2395	MOLINA, MYRNA.....	666	MORCOS-CLARK, NERMINE.....	41
MIRANDA, CYNTHIA.....	547, 679	MOLINOS, NICOLE.....	1281	MOREIRA, LUCILA.....	1379
MIRKARIMI, MORTEZA.....	69	MOLINSKI, ALLISON.....	361	MORELL, MICHAEL.....	145, 326
MIRON, JEAN-PHILIPPE.....	675, 2492	MOLL, ANGELA.1853, 1872, 2040,		MORENO MARTINEZ, ENRIQUE.140,	
MIRSAEIDGHAZI, POURYA.....	250	2081, 2234, 2535, 2543, 2604		199, 701	
MIRZA, BASHAR.....	297	MONAHAN, CAROLYN.....	1685	MORENO, KATHERINE.....	161
MISAGHI, AMIRHOSSEIN.....	475, 491	MONARCH HOME.....	2430	MORENO, MANUEL.....	288
MISHRA, GAURAV.....	133	MONARREZ, DAVID.....	43	MORENO, SYDNIE.....	98, 171
MISSION HERITAGE MED GRP.....	16	MONDRAGON, GUSTAVO. 20, 104, 115		MOREO, HUNTER.....	128, 314, 667
MISSION HILLS POST ACUTE CARE.....	879, 2432	MONEYHON, MICHAEL.....	763	MORGAN, CRAIG.....	130
MISSION HOSPITAL LAGUNA		MONGA, MANOJ.....	2375, 2376	MORIN, RUTH.....	256, 268, 269
BEACH.....	13	MONROE, MAX.....	695	MORRIS, CHAD.....	1843
MISTRY, CHETAN.....	1166	MONTANA, WILBUR.....	511	MORRIS, JASON.....	193
MITA, MONICA.....	255	MONTANA-COLLINS, CLAUDIA... 387		MORRIS, JOHN.....	491
MITCHELL, CATHY.....	1245	MONTANE, RUBEN.....	622, 2152	MORRIS, RAPHAEL.....	675
MITCHELL, JESSE.....	213, 438, 505, 741	MONTEL, SEBASTIEN.....	482	MORRIS, SHEILA.....	121, 1818
MITCHELL, PAUL.....	226, 753	MONTENEGRO, CLAUDIA.....	63		
		MONTERO, MARIA.....	229		

E. Índice de proveedores

MORRISON REYES, JOSHUA.2518, 2535, 2543, 2555, 2569, 2582, 2583, 2605	MUNDI, JAGMEET.....262, 389, 471	NAKAMITSU, ABIGAIL.....2308
MORRISON-REYES, JOSHUA.189, 305, 338, 339, 543, 652	MUNIB, SABEEN..... 38, 39	NAKAMURA, LEAH...279, 411, 497, 600
MORTAJI, PARISA.....42	MUNOZ PINEDA, JORGE..... 320, 680	NAKAMURA, MELANIE.....1252
MORTIMER, DORI..... 1379	MURPHY, JAMES..... 175	NAKAMURA, TIFFANY..... 2193, 2493
MORTON, ASA.....189, 305, 652	MURPHY, KEVIN.....682	NAKHLA, TONY.....592
MOSHFEGH, AMIEL.....159	MURPHY, PAUL..... 323, 690	NAKKA, SREENIVASA..... 215, 508
MOSHTAGHI, OMID.....125, 342, 2028	MURRAY, BREANNA.....667	NAMAZY, DAVID..... 299, 637, 643
MOSKOW, LONNIE..... 275, 421	MURRAY, CARLA.....150	NAMBIAR, MARGARET..... 223
MOSQUERA, DIANA..... 1166	MURRAY, MATTHEW.....2273	NAMI, NAVID..... 363, 415, 553, 554
MOSS, JASON..... 652	MURRAY, STEVEN.....160, 285, 608	NANAVATI, VIMAL.....535, 582, 606
MOSSON, MARK..... 72	MURRIETA HEALTH AND REHABILITATION CENTER.....878	NANDI, SHANKHA...747, 785, 787, 788
MOST, CAROLE..... 216, 510	MURTHY, NIKHIL.100, 327, 1800, 2013, 2014	NANGIA, CHAITALI.....248
MOSTOFIAN, EIMANEH.....1680, 1681	MUTH, NATALIE.....1110	NAPOLEAN, REBECCA..... 698
MOULD, KEVIN.....25	MUY, MADINETH..... 44	NAPOLI, LYNN..... 39
MOUNT MIGUEL COVENANT VILLAGE HEALTH FAC..... 2435	MWAURA, WAIRIMU.161, 288, 289, 504, 615, 722	NARANJO, RODRIGO.1540, 1541, 1542
MOUNTAIN, KELLY..... 560	MWESIGWA, PATRICIA.....244, 365	NARAYAN, ARCHANA.....1212
MOUSAVI, SHAHRYAR...356, 450, 591	MYER, JONATHAN.....705	NARAYAN, HARI.1855, 1876, 2044, 2263
MOUSSAVIAN, MEHRAN.149, 179, 571, 768, 775	MYERS, JESSE.....161	NARAYANAN, MEENA.104, 113, 149, 179, 606, 637, 721, 723, 1542
MOVAGHAR, MANSOOR.1853, 1872, 1957, 2041, 2082, 2235, 2543	MYREN, DONALD.....740	NARAYANAN, PRIYADHARSHINI.72, 78
MOY, TALAR.....42	N	
MOYA, MARY..... 20, 76, 1132, 1718, 1719	NABILI, SIAMAK..... 48	NARDI, MELISSA..... 167
MOYSES, HARRY..... 398	NACOSTE, LAKEISHA.....1911	NARDI, SEAN..... 109
MUDGE, BRADLEY.....213, 562, 766	NADEAU, DANIEL..... 86	NARLA, VINOD..... 282, 602
MUELLER, DANA..... 2263	NADI, FAHIMA.....1211	NARULA, ARVIN.....113, 606
MUELLER, GEORGE..... 700, 2358	NAFICY, K.....74, 713	NASH-GOELITZ, ALYSSA..... 292
MUHAMMAD, LAMA.....2493	NAFIU, BOLAJI.231, 232, 761, 762, 795, 796	NASSERY, KRISTEN..... 579
MUHONEN, LINDA..... 472	NAGASUNDER, ARABHI.201, 217, 220, 221, 439, 440	NASSIR, BASSAM.....28, 1200
MUHONEN, MICHAEL..... 488	NAGATA, CERAH.....615	NATH, ASHOK..... 221, 440, 441
MUKHERJEE, ASHIS.....502	NAGEL, IRENE.....392	NATH, DEVARSHI..... 723, 1674, 1675
MULDOON, MICHAEL.....705	NAGELBERG, JODI.293, 627, 1194, 1448, 1927, 2164, 2165	NATHAN, CARLY... 291, 621, 1918, 2150
MULFORD, MIM.....454	NAGHI, JESSE.104, 115, 149, 155, 334, 1809	NAUDIN, VERONICA..... 1793
MULICK, STEPHANIE..... 387, 597	NAGNUR, PRITI.....1232, 1233	NAVA, PETER.....144, 566, 771
MULLVAIN, JEFFRY..... 606, 638	NAHM, WALTER.....625	NAVARRO, ROSA.....101
MULTANI, GURPREET.....367	NAIK, RAHUL.....510	NAVARRO, STEVEN.....771
MULVEY, CAOILFHIONN.288, 615, 1911, 2133	NAIK, SHILPA..... 1233	NAVARRO, VANESSAMARIA.52, 76, 1312, 1313, 1481, 1719, 2057, 2390
MULVIHILL, DANIEL.....583	NAITOH, JOHN..... 177, 178, 330	NAWAR, MAGDY.....461
MUMTAZ, SEEMAL.....143	NAJAFI, DAVID.....339, 1593, 1594	NAWAZISH, SABA..... 517
MUNAVU, LILY.....269	NAJAND, SADAF..... 583, 2095	NAYAK, KESHAV.....606
MUNCADA, CAESAR..... 303, 1956	NAJAR, FAUZI..... 72, 671	NEAL, JAMES..... 514, 749
MUNCE, DANIELLE.....2187	NAJI, MAHTAB..... 59	NEESE, SUSAN.....325
		NEGRON, RICARDO.193, 202, 586, 754, 1268
		NEIGHBORHOOD HEALTHCARE. 1089, 1090

E. Índice de proveedores

NEIGHBORHOOD HEALTHCARE ESCONDIDO..... 926, 927, 928, 930, 937	NETZEL, JENNIFER..... 615, 2133, 2134	NGUYEN, MARGARET..... 2274
NEIGHBORHOOD HEALTHCARE ESCONDIDO, 30, 1257	NEUSTEIN, PAUL.143, 146, 178, 330, 348, 710	NGUYEN, MARICEL.....361
NEIGHBORHOOD HEALTHCARE GOLD FAMILY HEALTH CENTER.969, 970	NEVAREZ, IRENE.....1302, 1405	NGUYEN, MINH..... 75, 2382
NEIGHBORHOOD HEALTHCARE GOLD FAMILY HEALTH CENTER, .57, 1378	NEVES, VANESSA.....1685	NGUYEN, MYLINH.....2273
NEIGHBORHOOD HEALTHCARE GRAND AVE. 928, 929, 930	NEVILLE, MARGARET.572, 775, 2472, 2473, 2513	NGUYEN, NGOC.....1481, 1482
NEIGHBORHOOD HEALTHCARE LAKESIDE. 942, 943	NEWMAN, DAVID.....531	NGUYEN, NINA.....1406
NEIGHBORHOOD HEALTHCARE LAKESIDE, 44, 1283	NEYAZ, MOHAMMED..... 186, 584	NGUYEN, QUOC SY..... 1897, 2105
NEIGHBORHOOD HEALTHCARE PAUMA VALLEY..... 968, 969	NG, DANIEL.....270	NGUYEN, QUYEN.310, 660, 1972, 1973, 2251, 2252
NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL.933, 934, 936	NG, REBECCA.....387, 469, 597, 598	NGUYEN, STEVEN.....346
NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL, .30, 1258	NGO, CATHERINE..... 366	NGUYEN, THANG.....79
NEIGHBORHOOD HEALTHCARE PEDS AND PRENATAL.... 931, 935, 937	NGO, DONALD..... 282, 602	NGUYEN, THANH..... 2606
NEIGHBORHOOD HEALTHCARE PEDS AND PRENATAL, 30, 1258	NGO, MAI..... 2050, 2299	NGUYEN, THERESA. 2523, 2583, 2616
NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY.930, 931, 932, 933, 937	NGO-BIGGE, ANGELA.....615	NGUYEN, THO..... 522
NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY, .....31, 1259	NGUYEN CLEARY, THAI.....1482	NGUYEN, THU.....124, 1820, 1821
NEIGHBORHOOD HEALTHCARE, .82, 1784, 1786	NGUYEN, ALEXIE..... 167	NGUYEN, THUY.....250
NEJATI, FRESHTA..... 2133	NGUYEN, AN..... 369	NGUYEN, THUY-VY.....128, 667
NELKIN, CORY..... 167	NGUYEN, ANDY..... 167, 211, 437	NGUYEN, THUYTRANG..... 75
NELMS, MICHAEL.....667	NGUYEN, ANTHONY..... 633, 2178	NGUYEN, THY.....2569
NELSON, AISLYN..... 538, 582	NGUYEN, BACH..... 50	NGUYEN, TIA.137, 234, 548, 1830, 1831, 1893, 2065
NELSON, MARK.....705	NGUYEN, BAO-THU..... 260	NGUYEN, TONY..... 417
NEMATI, MARYAM.....415	NGUYEN, BRUCE..... 2605, 2606	NGUYEN, TRACY.....2522
NEMCEFF, DENNIS.....199	NGUYEN, BRYANT..... 334, 638	NGUYEN, TRI..... 606, 637
NESTOR COMMUNITY HEALTH CENTER.....970, 971, 972, 1053	NGUYEN, CARIE.20, 1132, 1133, 1719, 1720	NGUYEN, TRUC.....1167
NESTOR COMMUNITY HEALTH CENTER, 67, 1511	NGUYEN, DANIELA..... 1356, 1357	NGUYEN, TUAN.....51, 630
	NGUYEN, DAT..... 37	NGUYEN, TUYET.....453
	NGUYEN, DAVID.....79	NGUYEN, VANESSA.....2380
	NGUYEN, DENNIS..... 554, 555	NGUYEN, VI..... 1233
	NGUYEN, DOUGLAS.....456, 457	NGUYEN, VIET..... 250, 637, 643
	NGUYEN, ETHAN..... 84	NGUYEN, VINCENT..... 574, 652
	NGUYEN, HAN. 130, 131, 345, 478, 546	NGUYEN, VY..... 48
	NGUYEN, HARRY.....2347	NI, YU-MING.....238
	NGUYEN, HOANG.....238, 2462, 2494	NIAKAMAL, EVAN.....192, 1881
	NGUYEN, HUNG.143, 146, 178, 331, 348, 710, 711	NIAVARANY, PIRAYEH.. 236, 357, 450
	NGUYEN, HUY.....238, 251, 349, 350	NIAZI, HARRIS. ... 1200, 1201, 1482, 1483
	NGUYEN, JANICE.....1614	NICHOLAS, ESTELA.....771, 2403
	NGUYEN, JASMINE.....2605	NICHOLS, ALPHONSO.133, 134, 316, 317, 318, 675, 677, 678
	NGUYEN, JOHN..... 473	NIELSEN, AMY..... 94, 95, 301
	NGUYEN, KELVIN.....2605	NIEMI, ANNA-KAISA. . 1812, 2177, 2205
	NGUYEN, KHANG.....708	NIETO, MICHAEL.....275
	NGUYEN, KHANH..... 667, 2308, 2309	NIGRO, JOHN.....2374
	NGUYEN, LETHUY.....87	NIHIRA, MIKIO..... 221, 234
	NGUYEN, LINH.....1132, 1133	NIK, ANDREW.....432, 462
	NGUYEN, LINHKIEU..... 64	NIKZAD, JASON.....1313, 1720
		NING, GRACE..... 2321, 2494

E. Índice de proveedores

NINH, CHRISTOPHER.....275		OMIDI, SHOHREH..... 360
NISHANIAN, GARABED.....271		OMRAN, JAD..... 104, 149, 606
NISHIMURA-KAMINSKI, MARIN.104, 149, 606		OMURO, ARTHUR..... 95
NISKANEN, RACHEL.....2587		ONEILL, ANDREW..... 745
NISSAN, BETI.....1759		ONEILL, SEAN..... 253
NIZHEBORSKY, OKSANA. . 161, 162, 771		ONEILL, THERESE..... 181, 767
NOCEDA, ANA..... 615, 1406, 1407		ONG, DONALD..... 83
NOEL, NANCY..... 99		ONUOHA, NOJA.....211, 740, 785
NOGUCHI, JONATHAN..... 383, 596		ONYEKWULUJE, ANNE..... 59
NOJAN, JOSEPH.....477		OPEN ARMS ADHC.....2439
NOKES, BRANDON.297, 637, 1938, 2187		OPERATION SAMAHAN - MIRA MESA.....1004, 1044, 1045, 1046, 1047, 1048
NOLASCO, JOANNA..... 52, 1313, 1314		OPERATION SAMAHAN - MIRA MESA, 67, 1513
NOORIAN, NADER..... 48		OPERATION SAMAHAN - NATIONAL C.....955, 956, 957, 958
NORBASH, ALEXANDER..... 323, 690		OPERATION SAMAHAN - NATIONAL C, .....53, 1318
NORMAN, MARC.....2321, 2494, 2495		OPERATION SAMAHAN GRANGER SCHOOL BASED.....957, 958
NORMAN, STACY..... 560, 561, 598		OPERATION SAMAHAN GRANGER SCHOOL BASED, .....53, 1319
NORRIS, JEFFREY.....1483		OPERATION SAMAHAN RANCHO PENASQUITOS.1043, 1044, 1046, 1047, 1050
NORTH PARK FAMILY HEALTH CENTERS. 1016, 1017, 1018, 1019, 1024, 1025, 1027, 1028, 1029, 1030, 1031, 1048, 1049		OPERATION SAMAHAN RANCHO PENASQUITOS, 67, 1442, 1514
NORTH PARK FAMILY HEALTH CENTERS, .....67, 1511, 1512		OPTUM..... 16
NORTON, MARILYN..... 112		ORDINANZA, MYLENE..... 1703
NOSRATI, SAM.....394, 478		OREJEL, EDITH..... 615, 2135
NOSTE, ERIN..... 1924, 2160, 2161		ORFF, HENRY.....2321, 2495
NOURI, LABEED.....159		ORIENTE HOUSE..... 2436
NOURI, SARVENAZ... 231, 761, 795, 796		ORPILLA, IMELDA..... 615, 1410, 1411
NOVAK, ERIKA..... 608		ORR, ROBERT..... 179
NOVAK, LOREN..... 83		ORTEGA, JOSEPH.....181
NOVENCIDO, ANDREW.137, 234, 548, 1831, 1893, 1894, 2065		ORTEGA, LUIS..... 76, 1720, 1721, 2391
NOVENCIDO, JOSEPH.....20, 52		ORTEGA-ENDAHL, DAVID.....128
NOVENO, HILARIO JR..... 2056, 2134		ORTIZ, BEVERLY.....2473
NOVO, MEGAN.111, 154, 570, 630, 1838, 2077, 2174		ORTIZ, KENNETH.....1484, 1721
NOVOTA, GABRIELA.....1372		ORTIZ, MARIA.....2322, 2495
NUNE, SUNITHA..... 512, 513		ORTIZ, TINA..... 460
NUNO, JOSE.....1640, 1641		OSHODI, GANIYU..... 501, 502
NUQUI, JOSIE.....1483, 1484		OSORIO, JOSEPH..... 2014, 2362
NWAGWU, CHIEDOZIE..... 488		OSORIO, SANTIAGO..... 578
NWOSU, MICHAEL..... 81		OSTROM, NANCY..... 601
NYMAN, KATHERINE.1813, 1849, 1947, 2037, 2206		OSTRUP, RICHARD.....327, 347, 702
	O	
	O HALLORAN, HENRY.2536, 2544, 2606	
	O TOOLE, MARY.....377	
	O'CONNELL, STEFANY..... 1891, 2134	
	O'DORAN, KAYLA..... 759	
	O'NEIL, NICOLE.....211	
	OAKEY, ZACKERY..... 260	
	OBEREMOK, STEVE..... 213, 214	
	OBOYLE, MARY.....323, 690	
	OBRIEN, KATHARINE..... 33	
	OBZEJTA, NATALIA..... 714	
	OCAMPO, ELAINE.....1407, 1408	
	OCEAN VIEW POST ACUTE.....877	
	OCEGUEDA, JOSHUA.....53, 1314	
	OCHOA, ERLINDA..... 1184, 1185, 1302	
	OCHOA, RAUL.....1705	
	OCONNOR, ERICA.....1110	
	ODA, NINOS.....531	
	ODA, THAGHAR. . 1185, 1186, 1409, 1410	
	ODONNELL, F.....2206	
	OGANDO, SHEENA.....1663	
	OH, GERALD.....529	
	OH, IRENE..... 95, 186, 301	
	OHALLORAN, HENRY.1854, 1873, 2041, 2082, 2235	
	OHARA, JUN ICHI.....246	
	OIRA, VICTORIA.....1167	
	OJEDA-FOURNIER, HAYDEE.323, 690	
	OJHA, PRITI.....675, 732	
	OJURI, ADEBAMBO..... 508	
	OKADA, MICHELLE..... 314, 1988	
	OKAMOTO, VINCENT..... 1897	
	OKINAGA, PATRICK..... 695	
	OKONSKI, MICHELE..... 352	
	OKWUOSA, CHRIS.....1770	
	OLENSKI, KLARI.....120, 121, 726, 748	
	OLESCO, JENNIFER..... 106, 536	
	OLIVEIRA, THOMAS..... 43	
	OLIVER, DEANNA.23, 72, 113, 114, 145, 154, 183	
	OLSEN, MARTIN..... 1438, 1439	
	OLSON, CHERYL.....326	
	OLSON, ERIK..... 699	
	OLSON, ROBERT.....772	
	OMAN, MATTHEW...204, 246, 247, 457	

E. Índice de proveedores

OSWALD, JESSICA.....	1897, 2105	PANITCH, JILL.....	37	PARRY, LISA.175, 325, 698, 1859, 2009,	2352, 2353
OTAY FAMILY HEALTH CLINIC.894,	895	PANNARAJ, PIA	2182	PARSI KANEMOTO, MARYAM.	240
OU, JOCELYN.	2525, 2569	PANSARA, MEGHA.....	2544	PARSI, HOOMAN.....	219, 512, 633, 774
OVIEDO-LINARES, RAUL.104, 115, 535,	540	PANSE, MILIND.....	234, 448	PARSONS, GENEVIEVE.	1277
OWEN, LISA.....	393	PANTOJA, DANICA-ELLA.	106	PARSONS, MEKRAE.	722, 2380
OWEN, MICHAEL ...	1116, 1411, 1412, 1413	PAOLERCIO, NANCY.	227	PARVARESH, KEVIN.....	275
OWYANG, ASHLEY.....	261	PAPA, AMY.....	137, 346, 695	PASHMFOROUSH, MOHAMMAD. 564	
OZCAN, ALI.....	2046, 2274	PAPA, RHETT.....	335	PASICOLAN, MARI.....	146, 349, 452
OZGUR, BURAK.	272	PAPASTERGIU, GEORGIOS.123, 189,	339, 543, 1158, 1226, 1227	PASIN, ERIK.	411, 497
P		PAPP, STEPHAN.	295	PASTERNAK, RACHEL.....	252
PAAMONI, ARIELLE.....	314	PARADISE VALLEY HEALTH CARE		PATANKAR, KAUSTUBH.425, 502, 512,	738, 745
PACE, RACHELLE.....	615, 2135	CENTER.....	878, 2429	PATEL, AARTI.....	2299
PACE, SARAH.....	41	PARADISE VALLEY HOSPITAL.13,	2418	PATEL, ALPA.	383
PACHOE, MADISON.	162	PARASHAR, ANUSHREE.	195, 675	PATEL, AMAR.114, 118, 275, 404, 406,	421, 422, 1814
PADE, KATHRYN.	2274	PARDO, PATRICIA.....	282, 602	PATEL, BAKULKUMAR.....	32
PADILLA, MICHELE.....	1413	PAREDEZ, EDWARD.	294	PATEL, BHAVESH.....	729
PADUGA, REMIA.....	95, 96, 186, 301	PAREKH, NIRAJ.....	201, 207, 218, 425	PATEL, BIJAL.	643
PAGE, BIANCA.	1282, 1439	PARIKH, MILIND.104, 149, 179, 606,	721, 724, 768, 774, 1212, 1542, 1543	PATEL, BINOY.....	446
PAI, SARAH.....	2135	PARISE, CHARLES.....	359, 371	PATEL, BRIJESH.....	181, 722
PAKENHAM, KATE.....	1845	PARIZO, JUSTIN.....	104, 606	PATEL, DEVIN.	2376
PALANCA, ARIEL.....	199	PARK, BRIAN.	2046, 2274	PATEL, GITANE.89, 90, 156, 157, 189,	339, 543, 652, 2519, 2529, 2544, 2570,
PALLIA, CHRISTOPHER.145, 328,	1836, 2017	PARK, DANIEL.....	1739	2583, 2607	
PALM TERRACE HLTHCARE AND		PARK, ERIC.....	415	PATEL, HEMANSHU.	37, 1278
REHAB CTR.....	878	PARK, JAMES.....	256	PATEL, HITESH.	594, 599
PALMER, VIVIENNE.....	393	PARK, JAY.....	292, 627, 1924, 2161	PATEL, JANKI.	166, 1846
PALOMAR FAMILY COUNSELING		PARK, JESSIE.	319, 679	PATEL, JAY.....	257, 717, 718
SERVICES,	31	PARK, JOSEPH.....	417	PATEL, JENNIE.....	521
PALOMAR HEALTH.....	13, 2417	PARK, NURI.	361	PATEL, JIGAR.	284, 285, 604, 607
PALOMAR HEIGHTS CARE CTR.877,	2426	PARK, RONALD.....	1372, 2088, 2275	PATEL, JITENBHAI.30, 182, 767, 1252,	1253
PALOMAR MEDICAL CENTER.13, 2417		PARK, SAMUEL.....	492, 599	PATEL, JYOTINKUMAR.....	42, 415
PALOMAR VISTA HEALTHCARE CTR.		PARK, SE.....	241, 361, 452, 591	PATEL, KELLY.....	1413, 1414
.....	877, 2426	PARK, SOO.....	1933	PATEL, KETAN.	263
PALOMINO, MARY.....	20, 1133	PARK, SUSANNA.	648	PATEL, MILAN.....	359, 371
PANDHI, JAY.....	535, 539, 540, 2059	PARK, TARI.....	1615	PATEL, MITA.....	377
PANDIT, IVY.....	1744, 1745	PARKER, SHERINE.1615, 1877, 2028,	2088, 2275	PATEL, MITESH.577, 780, 781, 2473,	2474, 2513
PANDIT, LALITA.	248, 255	PARKS, MONICA.....	768, 775, 2408	PATEL, NEHAL.....	365
PANDY, LIZANDER.	74	PARKSIDE HEALTH AND WELLNESS		PATEL, NIKHIL.	524, 783
PANDYA, BHUMIKA.....	2529, 2570	CENTER.....	876, 2424	PATEL, NIMIT.....	696
PANEK, KRISTI.	450	PARKSIDE SPECIAL CARE CENTER.		PATEL, PAAVAN.....	20, 53
PANG, GARY.	206, 436, 437, 737	.....	876	PATEL, PRASHANT.....	149, 535
PANG, JASON.	715	PARKWAY HILLS NURSING &		PATEL, PUJA.....	325, 696
PANGANIBAN, CHRISTINE.....	202	REHAB.....	878, 2428		
PANICKER, CIBU.....	568, 1358, 1359	PAROLY, WARREN.	571, 573		

E. Índice de proveedores

PATEL, RAKESH.153, 182, 436, 583, 767	PENA, JOSE.....24	PHAM, SANDY. ....667
PATEL, REENABEN.....34, 85	PENA, NICHOLAS. ....1641	PHAM, STEVEN. ....167
PATEL, SAGAR. ....511, 786	PENERA, KEITH.....478	PHAM, TONY. ....2608
PATEL, SANJIV.....238	PENG, YING.....350	PHAN, CU. ....563
PATEL, SARJAN.89, 157, 189, 339, 543, 544, 652, 2518, 2529, 2544, 2570, 2583, 2607	PENNINGTON, JENNIFER. ....578, 783	PHAN, MIMI.....387
PATEL, SHREYA.....1237	PENT, MICHELLE. ....205, 228	PHAN, RYAN.....653, 2235, 2236
PATEL, VIJAY.1855, 1875, 2042, 2086, 2252	PERENS, ELLIOT.....2289	PHAN, TIFFANI.....648, 1583, 1584
PATEMAN, CAROLYN.....566, 771	PERERA-THANGARATNAM, D.....236	PHELAN, ELISHA.....180
PATHAK, BHAVANA.....367, 557	PERESS, LILIA.....629, 2170	PHILIPOSE, JAYA. ....484
PATHAK, RAJIV.....24	PEREZ, ALLYSSA. ....616, 2136, 2137	PHILIS-TSIMIKAS, ATHENA.....1449
PATHRIA, MINI.....323, 690	PEREZ, FRANCISCO. ....250	PHILLIP, OMARI.....137, 695
PATIAG, DANIEL. ...615, 1414, 1415, 2136	PEREZ, PERLITA. ....1134, 1485	PHILLIPS, BARRATT.....223, 517, 518
PATSIAS, ALEXIS. ....125, 126, 342	PEREZ, RONALD.....17	PHILLIPS, JASON.....580
PATTERSON, MARY.....2050, 2282	PERKINS, RACHEL.....1373	PHILLIPS, JOSHUA.....264
PATTERSON-HYATT, KIMBERLY.134, 2322, 2495	PERLMAN, MONICA.....319	PHILLIPS, KATHERINE. ....89
PATTON, MICHAEL. ....2495	PERLMAN, TAMARA.....566, 2075	PHREANER, NICHOLAS. ....1901, 2110
PAUL, MEGAN. ....2179	PERREAULT, MARK.314, 667, 1989, 2309, 2310	PHUNG, AIVI. ....667, 1641, 1642, 2310
PAUL, ROBERT.....576, 667, 2309	PERRIZO, NATHAN.....576	PHUNG, RICHARD N V.....2608
PAUL, SUPRITI. ....97	PERRONE, AIMEE.....695	PIANSAY, MARIACORAZON.126, 127, 1167, 1759, 1760
PAULHUS, PATRICIA. ....211, 437	PERRY, ANGELA.....383	PICKERING, OANA. ....668
PAULITSCH-BUCKINGHAM, ANDREA.....98, 99	PERRY, ARTHUR.305, 339, 544, 653, 2556	PICKETT, CHARLOTTE.302, 648, 1954, 2227, 2228
PAULSON, KERRY.....1911	PERRY, KATHERINE. ....1415, 1416	PIDDINGTON, CHRISTINE. ....219
PAVLOVICH, WENDY. ....1615, 1616	PERSAUD, PRIA.....228, 444, 445, 754	PIERCE, HEATHER.....2300
PAYAMI, MADDIHA. ....1484	PERTL, URSULA.....1794	PIEROS, JANELLE.....20, 1135
PAYNE, RICHARD. ....28	PETERS, AMY.....204, 259, 377	PIERSON, MICHAEL. ....588
PE, MARK-RALLY.143, 146, 178, 331, 348, 588, 711	PETERS, JAMIE.....2570	PINA, RAQUEL.....1135
PEAIRS, JAMES.....123, 189, 339, 544	PETERSEN, KATE. ....2508	PINO, ALEJANDRO.....168, 173, 782
PEARCE, ALEX. ...320, 680, 1998, 2326	PETERSON, JENYFFER. ....269	PINSON, KELSEY.....648
PEARCE, DANIEL. ....183, 217	PETERSON, SAMUEL.....349, 350	PINTO, ANITA.....1233
PEARSON, RACHEL.....464	PETERSON, TYLER.....714	PIRTLE, KEYSHONE.....151, 1837
PEDARSANI, MARJAN.....47	PETREK, MEAGAN.....289	PISINGER, PATRICIA.....1136
PEDERSEN, ERICA. ....526	PETROSIAN, MELISSA.....184	PITECK, CAITLIN. ....289, 616
PEDERSEN, SUESAN. ....586	PETTIS, BETH.....616, 2137	PITT, WILLIAM.....637, 638
PEDROTTY, JOHN.....1134	PETTIS, ROBERT. ....262	PITTMAN, LILIANA. ....1703, 1704
PEDROZA, JENNIFER. ....128	PETTUS, JEREMY.....293, 1927	PITZER, GEOFFREY. ....342, 343
PEET, MELISSA. ....616	PHAM, ALEXANDER.....401	PIZZIFRED, TIFFINY.....504
PEJAVAR, SUNANDA.....136, 346, 682	PHAM, ALISE.120, 133, 726, 727, 748, 754	PLANTE, CHARLES.....1121
PELHAM, WILLIAM.....319, 1996, 2462	PHAM, CHRISTINE.....44	PLASCENCIA, CINDY. ....2508
PELIO, DARREN.171, 314, 667, 1858, 1989, 2309	PHAM, JENNIFER. ....118, 120, 667, 1814	PLASTER, WHITNEY.....427
PENA ROMERO, CESAR.....135	PHAM, LILY.....1805, 1863, 2076, 2161	PLECHOT, ERIQ. ....387
	PHAM, MARTIN. ....1800, 2014, 2362	PLOESSER, MARKUS. ....479, 675, 676
	PHAM, NGUYEN.....471	PLUCINIK, STANLEY. ....2523
	PHAM, NINA.....2523	POAST, JENNIFER.....1740
	PHAM, QUYNH.....1144	PODOLSKY, ANATOL.....492
		POGGI, SARA. ....98, 128, 668

E. Índice de proveedores

POINT LOMA CONVALESCENT HSP. .....879	POUSTI, SHEIVA..... 2608	PYLE, ALEXANDRA.128, 344, 668, 2310
POKALA, SATHYA..... 333, 346, 680	POVOLI, LAUREN..... 162, 616	PYRKO, PETER.....275, 422
POLICH, MICHELLE..... 2300	POW-ANPONGKUL, PETE..... 86, 367	PYUN, JEONG..... 252
POLIKOWSKI, SAMANTHA.291, 620, 1916, 2147	POWAY ADULT DAY HEALTH CARE CENTER.....2440	
POLIS, NICK..... 137	POWAY HEALTHCARE CENTER.878, 2431	Q
POLISKIE, MICHAEL.....394	POWELL, LEDFORD.....407	QASEEM, TAHIR..... 215
POLIZZI, BRITTANY..... 91, 162, 591, 616	POWELL, STEPHANIE.....1616	QASQAS, SHADI.....423, 424
POLK, DAVID..... 2174	POWERS, BRET..... 234	QAYOUMI, WALI.301, 316, 317, 645, 676, 1949, 2217, 2462, 2496
POLLACK, JAMES..... 527, 528	POZUN, CARA.....298	QUACH, DUC..... 744, 785
POLLACK, LARRY..... 700, 2359	PRABHU, NAMRATHA..... 148, 563	QUACH, PHUC.....2571
POLLEMA, TRAVIS.....2019, 2054	PRABHU, SUJATA.157, 189, 190, 339, 340, 544, 653, 2519, 2544, 2570, 2571, 2584, 2608	QUAN, MARIA..... 777
POLLEY, SHANNON..... 727, 1642, 2387	PRASAD, AMITHA..... 2451	QUAN, MICHELE GRACE.....197, 1884
POLLINGTON, CHRISTOPHER.98, 576	PRASAD, RUPA..... 90, 91, 179, 581	QUANG, TONY.....524
POLLOCK, KATHLEEN..... 466	PRATHER, ALLYSON.....184	QUE, HOWIE..... 131
POLLOM, JESSICA..... 291, 620	PRATHIPATI, LAKSHMI.....55	QUENZER, FAITH.....109, 1805, 1924
POMERANTZ, MICHAEL. 140, 142, 705	PRATT, STEVEN.....305, 340, 2556	QUEROL, CYRUS.....227, 521
PONCE, SONIA.104, 114, 115, 149, 1698, 1699	PRENDIVILLE, PAUL..... 352, 383	QUESNELL, TARA..... 95, 187
PONIACHIK, SAMUEL.723, 724, 1107, 1678, 1679, 1680	PRESKILL, CATALINA.....1616	QUEVEDO, JUAN..... 643, 644, 2210
PONS, MAURICIO.123, 157, 189, 653, 1158, 1159, 1227	PRESS, RAYMOND..... 696	QUICK, ELISABETH.....1172, 1643
PONSFORD, DIANA..... 56, 1359, 1360	PRESTERA, TORY..... 726, 2614	QUIJANO, GLENN.....668, 2311
POOR, PATRICK..... 219	PREVALLET, ALEXANDER..... 1543	QUILALANG, SUSAN.....1117, 1174
POP, SIMONA..... 83	PRICE, ERIN..... 700	QUINATA, FLORENCE.....514
POPPER, STEVEN..... 197	PRICE, KERRY..... 204	QUINN, CATHERINE.....633
PORAT, SHAROUN.....492	PRIEST, VIVIAN.....2310	QUINN, ERIN.....566
PORTER, EILEEN.....121, 122, 336	PRIESTLEY, ANGELIKA.....378	QUINN, MICHAEL..... 671
PORTER, TERRY..... 736	PRIJATEL, SABRINA..... 668	QUINONES-PEREZ, BIANCA.1878, 2022, 2088, 2275
PORTILLO, TANIA..... 109	PRINCE, RENEE..... 2322, 2496	QUINONEZ, JOSE..... 72
PORTOMADURSKI, KRISTINE.731, 1765	PRITZKER, JOELY.566, 771, 2073, 2404	QUINTANA, PAULINA..... 2256
POSADA, SEAN..... 729, 1485	PROHASKA, THOMAS.....607, 2110	QUINTERO, CAROLYN.726, 1687, 2386
POSADAS, EMERITO.1685, 1686, 2386	PROMER, KATHERINE..729, 730, 1733	QUINTO, CINDY.....1416, 1417
POSSAGNOLI, ISABELLA..... 34	PROPST, TOBE.....1486	QUIROZ, ELISA..... 112, 143, 1145
POST, LACEY..... 668	PROVIDENCE MISSION HOSPITAL. 13	QUISMORIO, DEMETRIO..... 521
POSTE, ALETHEA..... 81	PRUSS, ERIKA..... 2092, 2367	QURESHI, ALI..... 352
POSTLETHWAITE, ALEJANDRA.159, 586, 2447, 2451, 2477	PRZEKLASA AUTH, MELISSA.....416	QURESHI, SOFIA..... 729, 2391
POTOK, OLIVIA.....1939	PUCCINELLI, ALAYNA.....131	QURESHI, TAUSEEF..... 459, 482
POUNTNEY, MARLENE.726, 1108, 1681, 1682	PUCHAKAYALA, NANDITA.228, 229, 755, 789, 790	
POURADIB, AMIR..... 356, 392	PUDOL, CHRISTOPHER.....773	R
POURBABAK, SAM.....36, 41, 365, 369	PUGH, MATTHEW.....102	RABBAN, DIANA..... 640
	PUGMIRE, BRIAN.....312, 662	RACKHAM, KELLY.....1271, 1272
	PUIG LLANO, MANUEL.305, 653, 1957, 2237	RAD, SHERVIN..... 714
	PUTRUS, RAMIZ.....25, 1201, 1202	RADMAN, MIRKA.....106, 616
		RADOJEVIC, NATASHA..... 2322, 2496
		RADWAN, MOHAMED.....297, 320

E. Índice de proveedores

RADY CHILDRENS CONVALESCENT HOSPITAL.....	2433	RAMIREZ, NICOLE.291, 620, 1916, 2147	RAZZAQUE, SAQIB.....	633
RADY CHILDRENS HOSPITAL SAN DIEGO.....	2418	RAMIREZ, SARA.....	RCH MID CITY URGENT CARE.....	2644
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN.2621, 2622, 2623, 2624, 2625, 2626, 2627, 2628, 2629, 2630, 2631, 2632, 2633, 2634, 2635, 2636, 2637, 2638, 2639, 2640, 2641, 2642, 2643, 2644		RAMIREZSANCHEZ, CLAUDIA.77, 296, 635, 1740, 1935, 2182, 2392	READ, TRENTON.131, 193, 586, 1827, 1882, 2098	
RAFIZAD, AMIR.....	236	RAMONA REHAB AND POST ACUTE CTR.....	REAL, MARIA....151, 536, 616, 1186, 1303	
RAGHUWANSHI, NAISHADH.508, 735		RAMOS, CARLOS.....	REARDON, JACQUELINE.....	109, 1805
RAGUVEER, VISHAKA.....	1486, 1487	RAMOS, ELENA.....	REBELO, MARCIA.....	168
RAHIM, ARIANNA.....	98, 314, 586	RAMOS, JACQUELYN.....	RECALDE, FRANCISCO.64, 69, 632, 1521	
RAHIM, BASIT.....	462	RAMOS, JEFFREY.....	RECTO, MICHAEL.....	473
RAHIMI, MOHAMMAD.....	472, 473	RAMSEY, KAYLA.....	REDA, ZACHARIA.....	353
RAHIMI, NASSRIN.....	2413	RANA, DEBORAH.....	REDDY, ANANTHRAM.....	733
RAHIMI, SINA.....	644	RANASURIYA, DUNISHA....	REDDY, ARJUN.....	28, 1213
RAHMAN, HABIB.....	457	RANCHES, GREGORY.....	REDDY, DANA.....	138, 1178, 1664
RAHMAN, MAISARA.....	81	RANCHO VISTA.....	REDDY, JAGADEESH.....	459
RAHN, DOUGLAS.....	136, 175	RANDALL, JOSH.....	REDDY, JOSEPH....	630, 631, 2174, 2175
RAHNEMA, CYRUS.....	401	RANDLE, CARRIE.....	REDDY, MADHUMITHA.....	533
RAI, GEORGINA.....	668	RANJBARAN, ZIBA.....	REDDY, NAVYA.....	1864
RAISZADEH, RAMIN.....	177, 199, 705	RAO, AMOL.....	REDDY, PAVAN.....	149, 768
RAJ, ASHA.....	1136	RAO, APARNA.....	REDDY, PRIYA.....	151, 536, 616
RAJA, MANIKANDA.....	34	RAO, ROHIT.....	REDDY, REDDIWANDLA.333, 334, 2021	
RAJAEI, NILOUFAR.....	616, 2137	RAO, SOUMYA.....	REDDY, RYAN.....	258
RAJAGOPAL, AMUTHA.....	2182	RAO, USHA.....	REDDY, SAMATHHA.....	1741
RAJAIPOUR, NEGIN.....	76, 1721, 1722	RAO, VIKAS.....	REDDY, SMITHA.114, 138, 583, 587, 2099	
RAJAMANICKAM, ANITHA.....	564	RAPEPORT, KEVIN.....	REDDY, SUMANA.....	1114, 1179, 1698
RAJPOOT, DEEPAK.....	435	RAPOPORT, ZHANNA.....	REDFERN, CHARLES.....	633
RAJSBAUM, MARTIN.123, 190, 340, 544		RASCH, DAMIAN.....	REDIKER, DONALD.....	451
RAKOW-PENNER, REBECCA.323, 690, 691		RASH, DOMINIQUE.....	REDKAR, AVANTI.....	193
RALEIGH, DEBORAH.....	1911	RASHCOVSKY SCHIFF, KARIN.30, 1253, 1254	REDWOOD TERRACE.....	877
RALL, EMILY.....	668, 1643	RASHID, AHSAN.....	REED, BRENDYN.....	241
RAMAMOORTHY, SONIA.325, 698, 2009, 2353		RASHTIAN, AFSHIN.....	REED, KELLY.....	625
RAMASWAMY, DHARMARAJAN.230, 447, 759		RASI, ALFREDO.....	REED, KRISTIE.....	319, 1996, 2463
RAMBACHER, THOMAS.....	478, 479	RASMUSSEN, DALE.....	REED, SAVONNA.....	446
RAMERS, CHRISTIAN.....	1543, 1544	RASTOGI, ANIL.....	REEG, JESSICA.....	2505
RAMGREN, AILEEN.....	1380	RASTOGI, ANISHA.....	REGEV, SHANEE.....	616, 1186, 1187
RAMINENI, NEELAKANTAN.....	72	RASUL, LAILA.....	REGO KEARNEY, JENNIFER...317, 318	
RAMIREZ, ALFREDO.....	2019	RATAJCZAK, CELESTE.....	REID, CHRISTOPHER.1860, 2018, 2372, 2373	
RAMIREZ, CRISTHIAN.....	1487	RATHOD, RAJIV.....	REID, EMILY.....	1187, 1303, 1417
		RATTNER, ZACHARY.....	REIFENBERGER, JODY.....	1383
		RAVIKUMAR, ASHA.....	REIMERS, REBECCA.1811, 1867, 2024, 2037, 2078, 2176, 2197	
		RAY, ANNE.....	REINER, GAIL.....	616
		RAY, BROOKE.....	REISMAN, BRUCE.....	575
		RAYAN, SUNIL.....	RENDLER, NATHAN.....	1380
		RAYMOND, ALAIN.....		
		RAYNOWSKA, JENELLE.....		
		RAYTA, NICOLE.....		

E. Índice de proveedores

RENELLA, PIERANGELO.....	473	RING, ROBERT.....	575, 656, 2084	RODRIGUEZ, ALDO.1234, 1617, 1760,	
RENFROE, ILANA.....	289	RIOS, SIERRA.....	2452	2393	
RENZAS, JENNIFER.....	151, 536, 616	RISSE, JOSEPH. 1654, 1655, 2170, 2171		RODRIGUEZ, CASSANDRA.....	1177
REO VISTA HEALTHCARE CTR.879,		RITCHIE, DAVID... 323, 691, 2002, 2336		RODRIGUEZ, JAVIER.....	1617
2433		RITTER, AARON.....	266, 267	RODRIGUEZ, LOUIE.. 1202, 1488, 1489	
RESNICK, DONALD.....	323, 691	RITTER, STEVEN.....	1488, 1722, 1723	RODRIGUEZ, NATALIE.....	77, 110, 629
RESNIKOFF, PAMELA.....	680, 1544	RIVA, GREGORY.....	208, 217, 218	RODRIGUEZ, NITZA.....	351
RESTELLI, LYNDESEY.....	2022	RIVADENEYRA, ADAM.....	244	RODRIGUEZ, SEAN.....	64, 1488, 1489
RESTREPO, DALILAH.....	144	RIVAS, RENEE.....	1954, 1955, 2228	RODRIGUEZ-MINETTE, JESSICA..	784
REUTHER, MARSHA.....	171, 310	RIVERA, MARCELO.....	57, 58	ROESKE, RICHMOND.....	190, 305, 653
REVELES, DIANA.....	1172, 1173	RIVERA, TANIA.....	1544, 1545	ROGERS, MEGAN.....	110, 538
REXINGER, KENNETH.....	59	RIVERO, JORGE.....	39	ROGERS, TANYA.....	1417, 1418
REY, RODOLFO.....	426	RIZKALLAH, JEAN.....	20	ROGHANI, REZA.....	761, 765, 766
REYNAGA, JOSUE.....	1731, 1732	RIZNIS, TENGIS.....	365	ROJAS, RICHARD.....	1439
REYNOLDS, RICHARD.....	51	RIZVI, SYED.....	221, 441, 749	ROJAS, SARAH.110, 629, 729, 1723, 1724	
REYNOSO, ALFONSO.....	1121, 1122	ROADMAN, KEENE.....	291, 620	ROJAS, STEVEN.....	773, 1723
REZNICK, HARRELL.....	482	ROBERSON, ANDREA.....	59	ROKSHADFAR, SAGHI.....	42, 48
REZVAN, KAVEH.....	713, 715, 718	ROBERTS, AUDREY... 1989, 1990, 2311		ROLPH, KELLIE.....	289
RHA, JANICE.....	229, 791	ROBERTS, BENJAMIN.....	519	ROLTSCHE, IAN.....	757, 758
RHEE, KYUNG.....	2300	ROBERTS, JAMES.143, 146, 178, 331,		ROMA, ANDRES.....	1980, 2257
RHIANNON, JULIA.....	84	348, 711		ROMERO, CAMILA.....	671, 1656, 2315
RIADH, MAYSAM.....	73	ROBERTS, KENDALL.....	1277	ROMERO, DIANA.....	254
RIBEIRO CALDAS DOMINGUES,		ROBERTS, LISA.....	524	ROMERO, KENNETH.....	101
ISABEL.....	676, 2497	ROBERTS, POMAI.....	53, 1315, 2057	ROMO, JORGE.....	314, 1990
RICE, BRITTANY.....	671	ROBERTS, TODD.....	519	RONA, KAIS.....	401
RICE, ELIZABETH.....	91, 180, 1796	ROBERTSON, ASHA.....	86	RONAN, KEVIN.202, 575, 779, 1373,	
RICE, KRISTEN.....	633, 634	ROBERTSON, ELSIE.....	401, 486, 487	1374, 1794	
RICH, RYAN.....	426, 574, 575, 779	ROBERTSON, RACHAEL.....	617, 2138	RONQUILLO, RINA.....	1281
RICHARD, MARLA.....	2463, 2497	ROBICHAUD, FAITH.....	128	ROOHIAN, ARSHIA.....	266, 417
RICHARDSON, ALVIE.1811, 1848, 2024,		ROBINSON, COLE.....	179, 1861	ROSA, ADAM.....	2587
2078, 2197		ROBINSON, DAISY.....	202, 1274, 1890	ROSADO, IVAN.....	21, 64, 1490, 2171
RICHARDSON, ANGELIQUE.....	1933	ROBINSON, DEAN.213, 1245, 1246,		ROSANIO, SALVATORE.....	359, 360
RICHARDSON, DANIELLE.....	1314, 1315	2152		ROSCOE, SYDNEY.617, 728, 2138,	
RICHARDSON, HENRY.127, 192, 576,		ROBINSON, FANE.....	574, 653	2389	
603, 663, 1824, 1879, 2090, 2303		ROBINSON, JENELLE.....	129, 735	ROSE, BRENT.....	136, 175
RICHARDSON, JULIA.....	1821	ROBINSON, MATTHEW.....	765	ROSE, PATRICIA.....	1773, 1774
RICHLAND, BRANDON.....	562	ROBKER, JERRICK.....	705	ROSEN, JAY.....	99
RICHTER, ALEXANDER.....	765	ROBLEDO, DAMIAN.....	184, 746, 2452	ROSENBAUM, HERBERT....	1490, 1724
RICKARDS, ENASS.142, 347, 348, 701,		ROCHA, CLAUDIA.....	75	ROSENBERG, ERIK.....	622
705		ROCHE, CHELSEA.....	1911	ROSENBERG, GARY.....	766
RICKERTS, MATTHEW.....	2347	RODARTE, GABRIEL.195, 1254, 2452,		ROSENBLATT, EUGENE.....	1137
RIDGE, NEAL.....	24, 76, 1487	2455		ROSENBLATT, SHERILYN.158, 731,	
RIEDL, MARC.....	2101	RODDICK, JASON.....	227	733, 1238, 1841, 2394	
RIEGO, SUZANNE.....	2137	RODENMEYER, EVE.....	617, 2138	ROSENFELD, SAMUEL.....	475, 492
RIES, DAVID.....	2300	RODRIGUES, ANNETTE.1858, 1881,		ROSENFELD, ALAN.142, 705, 706, 732	
RIGGINS, NINA.....	645, 2217	2052, 2091, 2311		ROSENGARTEN, ARTHUR.....	148
RILEY, JESSICA.. 92, 164, 592, 593, 625		RODRIGUES, DANIALD.....	457	ROSHDIEH, BABAK.....	505, 555, 556

E. Índice de proveedores

ROISING, JAMES.....	562	RUTMAN, MICHAEL.....	85	SAKO, AARON.....	469	
ROSS, ANDREW.....	200, 567, 734, 741	RUTTEN, SONIA.....	47	SALAMANCA, OMAR.....	56, 2076	
ROSS, BRIDGET.....	771	RYAN, DANA.....	234, 1275, 1276, 1892	SALAMI, ALI.....	607, 639	
ROSS, COLLIN.....	1766	RYAN, DAVID.....	64	SALAS, ERNESTO.....	51	
ROSS, CRYSTAL.....	107, 617, 1118, 2139	RYAN, KYLE.....	1880, 2051, 2090, 2303	SALAS, JESSICA.....	2100	
ROSS, JENNY.....	695	RYAN, TYLER.....	158	SALAZAR, JUANITA.....	1168	
ROSSI, CATHERINE.....	289, 617, 1912, 2139	RYU, JULIE.....	2292	SALAZAR, SERGIO.....	732	
ROTHENBERG, EDWARD.....	691	S			SALCEDO, ALEXANDRA.....	175, 324, 694
ROUEL, LINDA.....	26, 1213	SAADAT, FARID.....	43	SALCEDO, CARLA.....	694	
ROUEL, WADI.....	28, 1213, 1214, 1322, 1323, 1545	SAAM, SHIDA.....	35	SALCIDO, CRAIG.....	466, 594	
ROUGH, STEVEN.....	104, 115, 535, 540, 1809, 2059, 2060	SAB, SHIV.....	160, 285	SALEH, ANDREW.....	64	
ROUGHLEY, MATTHEW.....	264	SABHA, MAHMOUD.....	1925, 2162	SALEH, FAREED.....	2277	
ROUHANI, BEHNAZ.....	384, 596, 597	SABIN, NANCY.....	617, 1418, 1419, 2140	SALEH, HANA.....	34, 205	
ROWAN, RYAN.....	754	SABIN, SCOTT.....	446, 526, 758	SALEHI, HAMID.....	87, 462	
ROWHANI, NAGHMEH.....	127, 1168, 1824	SABIR, SHARJEEL.....	691	SALEHI-HAD, HANI.....	384, 468, 597	
ROXAS, ROGER.....	109, 1806	SACAMAY, TAGUMPAY.....	541, 644	SALEK, MUNIF.....	523, 745	
ROY, KEVIN.....	282, 602	SACHDEV, NIDHEE.....	557	SALEM, CAROL.....	143, 146, 178, 331, 348, 711, 712, 732	
ROZO, JOSE.....	617, 2139	SACHELARIE, IRINA.....	557	SALEM, RAMSEY.....	26, 1202, 1724, 1725	
RUBENSTEIN, KELLY.....	694	SACHS, MELISSA.....	540, 640, 2466, 2497	SALEM, YASSER.....	205	
RUBENSTEIN, STUART.....	1618	SACKS, BRENT.....	291, 620, 1916, 2147	SALERNO, MARIANA.....	77, 1741	
RUBENSIK, TAMARA.....	167, 295, 634, 774, 1846, 1847, 1934, 2179, 2180, 2406	SADAT, SAYED.....	323, 691, 2002, 2336, 2337	SALGADO, MOSES.....	97	
RUBIO GARCIA, MANOLO.....	115, 155, 183, 638, 639, 724	SADDA, REEM.....	159, 2447	SALGUEROGALLAND, MARIOLUIS.....	600, 676, 677	
RUBIO, GLORIA.....	783	SADDEBACK MEMORIAL MED CTR.....	13	SALIB, GEORGE.....	384	
RUBIO, HALEY.....	2387	SADEGHI TARI, MAHYAR.....	41	SALIMI-TARI, PEYMAN.....	368	
RUBY, CHARLES.....	283	SADOFF, MARK.....	95, 301	SALINAS, NIECEL.....	289, 617	
RUDD, CHRISTOPHER.....	2006, 2347	SAEED, ODAY.....	335	SALL, EDWARD.....	660	
RUDOLF, FRANCES.....	1925, 2162	SAEZ, NEIL.....	126, 343, 1822, 2028	SALLOUM, ALEXANDER.....	140, 199, 701	
RUELAS, ROBERTO.....	1760, 1761	SAFAVI, MAHSA.....	59	SALMASI, AMIRALI.....	348	
RUETENIK, BRAD.....	172	SAFER, TERRA.....	560	SALO, CLINT.....	267	
RUFO, ROSAVIDA.....	617	SAFFARZADEH, AREO.....	494	SALO, STEPHANIE.....	2323, 2497	
RUIZ, MONICA.....	2276	SAFI, ROOZCHEHR.....	56	SALOTTI, JOANIE.....	617	
RUIZ-FLORES, ROSE.....	427, 521	SAHA, DEVJANI.....	282, 602	SAMADY, JOSEPH.....	200, 567, 568	
RULLAN, JENNIFER.....	107	SAHAGIAN, GREGORY.....	748	SAMANI, PARGOL.....	57, 564	
RULLAN, PETER.....	107	SAHAGIAN, MICHELLE.....	1850, 1870, 2038, 2080, 2220	SAMI, REMAN.....	1144, 1145, 1807, 2391	
RUMMANI, BENNY.....	167	SAHATDJIAN, EVA.....	346	SAMIMI, KIAN.....	528	
RUMMEL, LAURA.....	351	SAHMS, TIMOTHY.....	1761, 1762	SAMOORI, RAMA.....	47	
RUNGVIVATJARUS, TIRANUN.....	2300	SAID, ENGY.....	602	SAMPATH, SRIHARI.....	323, 691	
RUSSELL, SAMUEL.....	2088, 2276	SAID, MENA.....	343	SAMPATH, SRINATH.....	323, 691	
RUSSO, KRISTA.....	1113, 1376, 1377, 1383, 1384, 1692, 1693	SAIED, NAGI.....	214, 505, 742	SAMPATH, SRIVIDYA.....	1618	
RUSSO, MICHAEL.....	89	SAIKHON, TALIA.....	314, 1990	SAMPSON, ANDRIECE.....	1419, 1420	
RUSSO, ROBERT.....	285	SAINI, SURINDER.....	557	SAMUEL, MICHAEL.....	170, 305, 340, 443, 2536, 2545, 2571	
		SAINT, MEAGHAN.....	314	SAN DIEGO AMERICAN INDIAN HEALTH CENTER.....	971, 1049	
		SAJADI, ALISA.....	241, 361			
		SAJTI, ENIKO.....	1947, 2207			

E. Índice de proveedores

SAN DIEGO AMERICAN INDIAN HEALTH CENTER, 67, 1514	SAN YSIDRO HEALTH NATIONAL CITY, 949, 950, 951, 952, 959	SANDLER, BRYAN..... 700, 2359
SAN DIEGO FAMILY CARE.1020, 1021, 1023, 1047	SAN YSIDRO HEALTH NATIONAL CITY, .....53, 1319	SANDLER, JEFFREY.....628
SAN DIEGO FAMILY CARE, .68, 1514, 1515	SAN YSIDRO HEALTH PARADISE HILLS, .....950, 951, 952, 953, 958	SANDOC, EMILY..... 2609
SAN DIEGO FAMILY CIRCLE ADULT DAY HEALTH CARE..... 2441	SAN YSIDRO HEALTH PARADISE HILLS, 53, 1320	SANGODKAR, SANDEEP.200, 201, 218, 425, 738
SAN DIEGO POST ACUTE CENTER. 876, 2424	SAN YSIDRO HEALTH PRECISION PARK.....1051	SANICOLAS, MARIA THERESA.....546
SAN JACINTO HEALTHCARE.....877	SAN YSIDRO HEALTH PRECISION PARK, 68, 1516	SANTANGELO, JOANNE.617, 1420, 1421, 2140, 2141
SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE.989, 990, 991, 1053	SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER.1065, 1066, 1067, 1068, 1069, 1070, 1071, 1072, 1073, 1074, 1075, 1076, 1081, 1082, 1083, 1084	SANTIAGO, AMANDA.....566, 2074
SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE, 68, 1515	SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER, 77, 1730, 1731	SANTIAGO, ROXANE.....1169
SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE..... 881, 882, 883	SAN YSIDRO HEALTH SOUTH BAY. ....953, 954, 958	SANTILLAN, CYNTHIA..... 324, 691
SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE, .....17, 1103, 1104	SAN YSIDRO HEALTH SOUTH BAY LATINO RESEARCH CENTER, .....21	SANTOMAURO, MICHAEL. 143, 712
SAN YSIDRO HEALTH CHC - OCEAN VIEW.....982, 983, 991, 992, 1054	SAN YSIDRO HEALTH SOUTH BAY PEDIATRICS..... 904	SANTORELLI, JARRETT..... 2011, 2359
SAN YSIDRO HEALTH CHC - OCEAN VIEW, 68, 1515	SAN YSIDRO HEALTH SOUTH BAY PEDIATRICS, 21, 1144	SANTOS CAVAIOLA, TRICIA.1928, 2165
SAN YSIDRO HEALTH CHULA VISTA. 887, 888, 889, 890, 891, 892, 893, 894, 897, 898, 903	SAN YSIDRO HEALTH SOUTH BAY, 54, 1320	SANUCCI, SHAUN..... 57
SAN YSIDRO HEALTH CHULA VISTA, 21, 1143	SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS.1061, 1062, 1063, 1064, 1065, 1084	SAPRA, SONIA.1154, 1155, 1222, 1223, 1295, 1584, 1585, 1586, 1780
SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED.1025, 1026, 1027, 1048	SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS, 77, 1731	SARABI, DENNIS..... 557
SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED, 68, 1516	SANACORA, RACHEL..... 2074, 2140	SARAFIAN, FARJAD.....249
SAN YSIDRO HEALTH EL CAJON.919, 920, 921, 922, 923	SANADA, VIVIANE..... 617	SARCON, ANNAHITA 357
SAN YSIDRO HEALTH EL CAJON, .27, 1206	SANCHEZ, ADRIANA.572, 776, 2474, 2514	SARNOFF, ROBERT. 173, 174, 782
SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE.933, 934, 935, 936	SANCHEZ, EMILY.....446	SARSAM, LUAY... 105, 149, 179, 607, 721
SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE, .....31, 1259	SANCHEZ, LUIS.....135, 730	SARSAM, SINAN..... 735, 738
SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR.1076, 1077, 1078, 1079, 1080, 1081, 1084	SANCHEZ, MICHAEL..... 1990	SARWARI, NAWID.....216, 510, 634, 774
SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR, .....77, 1730	SANCHEZ, MYRNA..... 728, 1704	SASSANI, PATRICK... 123, 190, 340, 544
	SANCHEZ, YAHAIRA..... 211, 212	SASSIC, JESSICA..... 1546
	SAND CANYON URGENT CARE MED CTR..... 16	SATEESH, BROOKE. 153, 538, 582, 625
	SANDERS, JESSICA..... 89, 1099	SATTAR, SHIFTEH..... 646
	SANDHU, AJAY PAL. ....175, 682	SATTERFIELD, KELLIE.305, 654, 750, 1958, 2237
	SANDHU, BASANT.....33, 45, 1254, 1255	SATTERWHITE, MAURINE.617, 1421, 1422, 1423, 2141
		SAUER, CHARLES.662, 1849, 1868, 1948, 2096, 2207
		SAUNDERS, ANGELA..... 743
		SAUNDERS, PHILLIP.113, 216, 510, 634, 743, 774
		SAUNDERS, SARA.....314
		SAVA HOME..... 2436
		SAVANI, AMAN..... 92, 95, 187, 584
		SAVAR, AARON..... 750
		SAVAR, LOUIS..... 750
		SAVILLE, EDITH..... 1423
		SAWHNEY, NAVINDER.....179, 1866
		SAWHNEY, SAJEET.....256
		SAWYER, CAROLYN.....2498
		SAYEGH, ELI..... 531

E. Índice de proveedores

SAZEGAR, PAYAM.....	26, 53, 64	SCHUMAKER, EDWARD.1203, 1315,	SEIDEN, GRANT.....	579
SBIROLI, EMILY.....	109	1316, 1490, 1491	SEIDER, TALIA.....	717
SCHACHTER, JESSICA.....	251	SCHWAB, GARY.....	656, 2239, 2240	SEILNACHT-BERNARD, KAREN.181,
SCHAEFFER, CYNTHIA.....	154, 631	SCHWARTZ, MARISSA.....	559	1863
SCHAEPE, RHODORA.....	771	SCHWARTZEL, KEVIN.....	1990	SEITZ, GRETCHEN.....
SCHALCH LEPE, PAUL.126, 310, 343,	660	SCHWARTZMAN, BENJAMIN.....	640	608, 2114
SCHAUT, ELIZABETH.....	129	SCHWARZ, ERNST.....	502, 512	SEKO, KYLE.....
SHELLIE, SCOTT.....	1644	SCHWARZ, KATHLEEN.....	2284	264
SHELLINGER, KRISTON.2323, 2498,	2499	SCHWEIKERT, SUZANNE.....	573	SELBY, BLAKE.....
SCHENEMAN, KELLY.....	242	SCHWENDEMANN, WADE.2025,	2078, 2198	2141, 2142
SCHER, BARRY.....	123, 340	SCHWERKOSKE, JOHN.113, 216, 510,	634, 743, 774	SELECT SPECIALTY HOSPITAL SAN
SCHIEDERMAYER, BENJAMIN.325,	698, 2008, 2351	SCHWINDT, CHRISTINA.....	548	DIEGO.....
SCHIFFMAN, GEORGE..	459, 460, 482	SCLAR, CRAIG.....	639	13, 2419
SCHIM, JACK.....	96, 301	SCOGGIN, MERLYN.....	479, 480	SELIGSOHN, BRUCE.....
SCHLECHTER, JOHN.....	475, 492	SCOTT, EMILY.....	639	48
SCHLOSSER, TARA.....	640, 2499	SCOTT, JEFFREY.191, 519, 2530, 2571,	2584	SELLERS, JAIME.....
SCHMALHAUS, MONTE.....	479	SCOTT, KELLY.....	617	1619, 1620
SCHMIDT, BRYAN.....	1662	SCOTT, LAGINA.....	64, 1491, 2171	SELTZER, JUSTIN.....
SCHMIEDECKE, RUDY.....	625	SCOTT, ROBERT.....	664	292, 1925
SCHMITT, EVA.....	2311	SCOTT, RYLEE.....	1491, 1492	SENA, TIFFANY.....
SCHNEEBERGER, ANDRES..	317, 2463	SCOTT, SUSAN.....	522	2142
SCHNEIDER, DARIUS.....	293, 583	SCOTT-WYARD, PHOEBE..	2051, 2303	SEO, CHANMEE.....
SCHNEIDER, SARAH.1173, 1174, 1651,	1652	SCOVILL, ALEXANDRA.125, 1821, 2523	SCRIPPS GREEN HOSPITAL.....	731
SCHNEIDER-MUNOZ, MARGARITA.	77, 1742	SCRIPPS MEMORIAL HOSPITAL.13,	2418	SERAG, RANDA.....
SCHNICKEL, GABRIEL.....	2375	SCRIPPS MEMORIAL HOSPITAL	ENCINITAS.....	36
SCHOELLER, BIANCA.....	668	13, 2418	SCRIPPS MERCY HOSPITAL.....	36
SCHONBACH, ETIENNE.....	306, 1958	13, 2419	SCRIPPS MERCY HOSPITAL CHULA	SERAILE, KIRSTEN.....
SCHOONMAKER, JOHN.....	79	VISTA.....	13, 2419	437
SCHORR, EMILY....	169, 645, 1850, 2218	SCUDDAY, TRAVIS.....	275	SERENO, EMILY.....
SCHRIEFER, NOAH.....	581	SEAMAN, CHRISTOPHER.....	745	91, 101, 603
SCHROEDER, JENNIFER.....	2311, 2312	SEAMAN, MARY.....	1423, 1424	SERGEYEVA, YELENA.....
SCHROTER, STEPHANIE.....	2047, 2277	SEARLEMAN, ADAM.324, 692, 2002,	2337, 2338	48, 49
SCHUETZ, HESTON.....	295	SEARS-WILEY, ELIZABETH.	617, 2141	SERIO, TAYLOR.....
SCHULTE, JESSICA.....	301, 645, 1950	SEBASKY, MEGHAN.....	1939, 2188	2499
SCHULTZ, HEATHER.....	2002, 2337	SEBIANE, MARIA.....	1687, 1688	SERNA, SANDY.....
SCHULTZ, JAMES.30, 81, 82, 182, 768,	1255, 1256, 1785, 1786	SEBRING, JAN.....	1424, 1425	74
SCHULTZ, JEFFREY.....	706	SEBSO, JODI.....	1618, 1619	SERPAS, SHAILA.....
SCHULTZEL, MARK.....	177, 706, 766	SEERY, TARA.....	248, 249	1137
SCHULTZEL, MATTHEW.175, 176, 325,	326	SEFA-BOAKYE, KOFI.....	145, 1155, 1753	SETHI, SUPREET.....
SCHULZ, STEFAN.....	2312	SEIBERT, TYLER.....	175	644
				SETIAWAN, EUGENIE.....
				289
				SEVILLA, CLAUDIA.....
				144
				SEXTON, PERRY.....
				28
				SEYED, KAZEM.....
				34, 214, 225
				SEYFZADEH, MANOUCHEHR.....
				214
				SHABAIK, AHMED.....
				1980, 2257
				SHABANIAN, LEILA.85, 571, 774, 2077,
				2407
				SHAD, JAVAID.....
				570
				SHAFFER, KATHERINE.154, 631, 1806,
				2175
				SHAFT, ALEXANDER..
				110, 144, 153, 182
				SHAH, ABHISHEK.102, 105, 148, 150,
				179, 180, 604, 607, 720, 721
				SHAH, KALPIT.....
				706
				SHAH, KETAN.....
				366
				SHAH, KULIN.105, 115, 150, 155, 180,
				183, 607, 639, 721, 724
				SHAH, MITA.....
				2211
				SHAH, NANDI.....
				164, 293, 628
				SHAH, NEMI.....
				514, 533, 534
				SHAH, SALMA.....
				254
				SHAH, SAURABH.....
				191
				SHAH, SHAILJA.....
				294, 631, 1930, 2175
				SHAH, SHEENA.....
				129, 545

E. Índice de proveedores

SHAHAMIRI, SEAN.....	250	SHASTA HOME.....	2428	SHIM, MICHAEL.....	570
SHAHAN, FRED.....	625	SHAUF, JOANN.....	1769, 2393	SHIMIZU, KELSIE.....	1799
SHAHBAZ, LINNAE.....	566, 771	SHAUL, SHERA.....	1991, 2312	SHIN, CHRISTOPHER.....	522
SHAHBAZ, MAJID.....	37, 344	SHAVER, JOHN.....	271, 402, 487	SHIN, STEPHANIE.....	168, 174, 782
SHAHBAZIAN, MICHAEL.....	356, 357, 450, 591	SHAW, BLAKE.....	1594, 1595	SHINDO, YURI.....	295, 634
SHAHIDYAZDANI, TINA.....	1762	SHAW, BRIAN.....	366	SHIRAKI, JEAN.....	1493
SHAHIM, ZAHRA.....	415	SHAW, MARILYNN.....	107, 151, 618	SHIRAZI, REZA.....	197, 682
SHAHINIAN, GEORGE.....	88, 89, 353, 396	SHAW, SUSANNA.....	1898, 2105	SHIVELY, JEANNINE.....	668
SHAHTAJI, ALAN.....	729, 1138, 1725	SHE, WU.....	360	SHOAPOUR, CAMELLIA.....	47
SHAIKH, ANWER.....	219, 512, 634, 641, 746	SHEETS, ROBERT.....	2293	SHOJI, MARISSA.....	306, 654
SHAJAN, JOSHAN.....	73	SHEETZ, TYLER.....	331, 712	SHOKOUHI, SARA.....	59
SHAKYA, KELLY.....	107	SHEHATA, HANNAH.....	514	SHORES, CLORINDA.....	227
SHALABY, MOHSEN.....	34	SHEIKH MOHAMED, AMIRA.....	1742	SHORT, ABIADE.....	121, 1156, 1754
SHALI, REYZAN.....	85	SHEIKH, SARAH.....	212, 504	SHORT, RICHARD.....	1281
SHAMANI, AZAM.....	64	SHEIKH, ZARA.....	1492, 1493	SHOURESHI, POONE.....	244, 279, 280, 365, 366, 411, 412, 498
SHAMSINEJAD BABAKI, ARASH.....	73, 1546, 2188	SHEIKH-MOHAMED, HALA.....	1214, 1215	SHPANER, ALEXANDER.....	631
SHANNON, KELLI.....	2198	SHEILS, CATHERINE.....	190, 306, 574, 654, 750, 1873, 1958, 1959, 2082, 2237, 2238	SHREIBA, MOHAMMED.....	480
SHAPER, EMANUEL.....	326, 327, 761, 767	SHEKER-DICKSON, KIMBERLY.....	629	SHRESTHA, ALINA.....	74
SHAPIRO, HILARY.....	285, 1901	SHEN, HONGGANG.....	626	SHREY, DANIEL.....	464
SHAPIRO, ROBERT.....	580	SHEN, MICHAEL.....	375	SHRIVASTAVA, VINEET.....	254, 374
SHAPIRO, STEVEN.....	506, 742	SHENOY, ASHVIN.....	1620	SHU, I WEI.....	2499
SHARABI, ANDREW.....	175, 682	SHENOY, CASIE.....	634, 641	SHULKIN, MITCHELL.....	2609
SHARAF, KAREEM.....	314, 393	SHERER, KIMBERLY.....	2277	SHUM, MERRILL.....	216, 510
SHARF, ALBERT.....	105, 150, 536	SHEREV, DIMITRI.....	105, 115, 116, 150, 155, 160, 285, 332, 536, 564, 582, 607, 639, 1810, 1839, 2021, 2110, 2192	SHUMILAK, KAILI.....	1493
SHARIF TABRIZI, AHMAD.....	302, 646	SHERIDAN, SHANE.....	200, 438	SHUNE, HONG.....	36, 250
SHARMA, KUSUM.....	100, 282, 601	SHERMAN HEIGHTS FAMILY HLTH CTRS INC.....	987, 988, 989, 990, 1053	SIAVOSHI, SARA.....	646
SHARMA, POOJA.....	254	SHERMAN HEIGHTS FAMILY HLTH CTRS INC.....	68, 1517	SICKELS, JENNIFER.....	504
SHARMA, RAHUL.....	401, 402, 403, 404	SHERMAN, MARK.....	327	SICKLES, MAGGIE.....	107, 1118
SHARMA, RAKHI.....	618	SHETABI, KAMBIZ.....	116, 540, 1552	SIDDIQUI, FARYAL.....	292
SHARMA, SURENDRA.....	231	SHETH, HASMUKH.....	1169, 1620, 1621	SIEGFRIED, TRACY.....	43
SHARP CHULA VISTA MED CTR.....	2419	SHETH, SARIKA.....	2047, 2277	SIEN, STEFAN.....	523
SHARP CORONADO HOSP AND HEALTHCARE CTR.....	2419	SHI, RONG.....	73	SIERRAS, KELLI.....	439, 440
SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS.....	2420	SHI, RUJING.....	1547	SIETSMA, ALEXANDRA.....	618
SHARP MEMORIAL HOSPITAL.....	2420	SHI, VERONICA.....	2154, 2155	SILVASEPULVEDA, JOSE.....	1856, 1876, 2044, 2263
SHARP, LORRA.....	199, 1887	SHIAU, NANCY.....	1621	SILVER, BRENT.....	120, 726, 748
SHARP, SIMPSON.....	324	SHIEH, MARIE.....	634	SILVESTRI, NICOLE.....	289
SHARPE, NORMA.....	668, 1105, 1267, 1645, 1766	SHIELDS, SEBASTIAN.....	116, 2444	SILVEY, CHRISTOPHER.....	2466, 2500
SHARTZER, ANNA KARENINA.....	212	SHIELL, RONALD.....	556, 589, 593, 625	SIMMONS, PAMELA.....	81
SHASKY, GARY.....	148, 332, 603	SHIH, LU-HSUN.....	212, 735	SIMMONS, ROBERT.....	2466
		SHIH, LYNN.....	336	SIMON, SCOTT.....	331
		SHILLITO, MATTHEW.....	701, 706	SIMPSON, DANIEL.....	175, 682
				SIMPSON, ERIC.....	2388
				SIMPSON, NEAL.....	81
				SINCLAIR, JAMES.....	295
				SINGH, DEEPTOT.....	368

E. Índice de proveedores

SINGH, GAURAV.....2155	SMITH, KRISTIN.....344	SOSA, DAVID.....1192, 1193, 1440
SINGH, HARDEEP.....247	SMITH, LINDA.....202, 1890	SOTIS, JAMES.....50
SINGH, HIMANI.....570	SMITH, MARK.....574, 654	SOTO, GILBERTO.....291
SINGH, JOGENDRA.....212	SMITH, PAIGE.....740	SOUDER, CHRISTOPHER.2047, 2277, 2278
SINGH, KARAN.....280, 412, 498, 600	SMITH, SHARON. 1187, 1188, 1285, 1286	SOUMEKH, MASSOUD.....2362
SINGH, MARVIN.....166	SMITH, SONYA.572, 776, 2475, 2476, 2515	SOUTH BAY POST ACUTE CARE.876, 2422
SINGH, PUJA.....2048, 2282	SMITH, STEPHANIE.....90	SOUTHBAY URGENT CARE INC.16, 2644
SINGH, SAMARJIT.....396	SMITH, WILLIAM.....654, 750	SOUVOROVA, JULIA.....131
SINGH, SIMRANJIT.....484	SMOOT, CHARLES.....1494	SPAETH, JOHN.....146
SINGHVI, AJEET.....215	SNODGRASS, JULIE.....291, 620	SPAK, DARYL.....110
SIRICHOTIRATANA, MELISSA.200, 506, 568, 625, 723, 734	SNOOK, BRIAN.....539, 1316	SPANGGORD, HOLLY.....352, 384
SIRLEAF, MASSANU.....151	SNOWDEN, KELLY.....314	SPARKS, TODD.137, 1831, 1832, 1894, 2065
SIROTA, MICHAEL.....328, 706	SNYDER, AMANDA.....668	SPAULDING, ENJOLI.....107, 180, 618
SISE, MICHAEL.....700, 701	SNYDER, CHRISTOPHER.30, 65, 77, 1495, 1725, 1726	SPECKART, PAUL.....73
SIU, CURTIS.....41	SNYDER, KIRSTIN.....618	SPEH, BRIAN.....314, 668, 1991, 2312
SIVA, ANDREW.....758	SNYDER, MICHELLE.....2035	SPENCE, JAMIE.....1694, 1695
SIVA, TENAYA.....30, 65	SNYDER, OLE.....569, 773	SPENCER, ROBERT.....351
SKAF, AYHAM.123, 124, 157, 190, 340, 544, 1159, 1227, 1228, 1754	SOBHANIAN, SHAHAB...264, 393, 477	SPENGLER, NATHAN.324, 692, 2003, 2338, 2339
SKALSKY, ANDREW.....2051, 2303	SOCHA, TRACI.....1688	SPEZIALE, MARK.....1813, 2208
SKAY, RICHARD.....2614	SODHI, SANDEEP.....556	SPITZ, AARON.280, 281, 412, 413, 498, 499, 600
SKELTON, SEAN.....343	SOHN, ROGER.....719, 720	SPITZ, BRADLEY.....680
SKEOCH, GORDON.....81	SOLAR, SARA.....266	SPITZER, BLAKE.....139
SKINNER, ANTHONY.....223, 443, 750	SOLIC, DIANE.....91	SPITZER, MARSHA.....1621, 1622
SKINNER, NICOLE.....2006, 2347	SOLIS, KEVIN.....170, 2524, 2617	SPOKOYNY, ELEONORA.....462, 463
SKULSKY, EVA.....576	SOLOMON, AMANDA.....289, 618	SPRIGGS, MEGHAN.....283
SKVARNA, KAREN.....388	SOLORIO JR, ROBERTO...2500, 2505	SPRING-ROBINSON, CHANDRA.169, 302, 303
SLATER, JERRY...324, 692, 2002, 2338	SOLTERO, RICARDO.....114, 118, 730	SPRINGER, DEWAIN.....577
SLEIMAN, JOSEPH.....1298	SOMERSET SUBACUTE AND CARE. .....876, 2424	SPRINGSTUBB, ADITI.....55
SLOAN, CRISTINA.776, 2474, 2475, 2514, 2515	SONG, CAROL.....769, 2397	SPURRELL, KATHRYN.....728
SLOAN, ERICA.....150	SONG, DELU.306, 574, 654, 655, 1959, 2082, 2238	SREJIC, UNA.....2106
SLOANE, CHRISTIAN.....2162	SONG, JOYCE.....1265	SRIDHAR, SUNITA.....2287
SMILDE, RENEE.....1547	SONG, RICHARD.....662, 2208, 2301	SRILASAK, MICHELE.162, 289, 771, 1845, 1912, 2404
SMITAMAN, EDWARD.....324, 692	SONG, WEI.....661, 2257	ST JULES, JESSICA.....521
SMITH, ALLISON.....171, 668	SONI, NISHANT.....750, 751	ST PAULS HEALTH CARE CENTER. .....879, 2433
SMITH, ANTHONY.....227	SOON, SEAVER.....625	ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER.1031, 1032, 1040, 1041, 1042, 1051
SMITH, CASEY.....292, 1925	SOONG, YEN-HUI.369, 396, 715, 718, 719	
SMITH, CHELSEY.....1939, 2188	SOPHY, ELIZABETH.....629, 1495	
SMITH, COLLIN.....131, 193, 586	SORENSEN, ROBERT.....223, 518, 751	
SMITH, DIANNE.....229	SORIA, CLAIRE.....1898, 2105	
SMITH, DOUGLAS.....731, 1767	SORIALOPEZ, JOSE.120, 726, 748, 1817, 2385	
SMITH, EMILY.....1956	SOROKIN, LISA.....1957	
SMITH, GREGORY.....83		
SMITH, JENNIFER.....618		
SMITH, KELLI.....1890, 2033		

E. Índice de proveedores

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER, 68, 1517	STONE, MICHELLE.....265	SUNTAY, BERK.....573, 777
STABEN, REBECCA.1156, 1223, 1295, 1296, 1586, 1587, 1588, 1780	STONES, RACHEL.26, 53, 65, 1316, 1317	SUOZZO, JOSEPH. 196, 1883, 2453
STADLER, EDWARD..... 466	STOTLER, APRIL..... 442, 515	SUPAT, BENJAMIN..... 292, 1925
STAHL, KEVIN..... 137, 1832	STOVER, LAURIE..... 2301	SUPERNAW, AMY..... 669
STAHL, STEPHANIE..... 618	STRAHM, LISA..... 628	SURI, RAJAT..... 523, 790, 2052, 2416
STAINER, GREGORY..... 124	STRAKA, CHRISTOPHER.136, 175, 682, 683, 692, 2339	SUSAN PARHAM HOUSING CORPORATION..... 2437
STALEY, MICHAELA..... 77, 729, 1726	STRAUSS, JOANNA..... 621	SUTTLE, CAROLYN..... 641
STALLINGS, ANDREA..... 2312	STRAZICICH, KARLA..... 31, 1266	SUTTNER, DENISE.663, 1868, 2208, 2301
STANDEL, SARAH..... 561	STREET, KYLE..... 2452, 2477	SUTTON, BRIAN..... 1858
STANFORD COURT SKILLED NURSING AND REHAB CENTER.879, 2434	STRUTZ, PETER..... 32	SUYAMA, JULIE..... 1955, 2228, 2229
STANFORD, DAVID..... 79	STUBBE, AMANDA..... 162	SUYDAM, STEVEN.282, 602, 1898, 2106
STARICKA, MELISSA..... 200	STUMP, CHARI..... 1623	SWADENER, NINA..... 49
STARK, ERIK..... 569, 580	SU, DANIEL..... 281, 413, 414, 499, 600	SWAN, MELANIE..... 1188, 1189
STAUNTON, MICHELE..... 49	SU, DERRICK..... 368	SWARTZ, ERIN..... 2142
STEADMAN, MICHAEL..... 168	SUAREZ, ROBERTO..... 2500	SWARTZ, JOHN.21, 1138, 1139, 1496, 1497
STEER, DYLAN..... 169, 299, 300, 644	SUBRAMANIAN, RAMA..... 1623	SWEAT, MARIE..... 2218
STEFANIDIS, NICOLETTA..... 598	SUBRAMANIAN, RUPA..... 774	SWEENEY, NATHALY..... 1868, 2209
STEFFENSMEIER, CHRISTA..... 618	SUDHAKAR, DEEPTHI.105, 116, 150, 155, 180, 184, 607, 639, 721, 724, 1810, 1840, 1866, 2192, 2193, 2383	SWEENEY, ZSAZSA..... 536, 618
STEIN, ALEXANDER..... 107, 625, 773	SUGGS, SARAH...234, 548, 1894, 2066	SWEET, JASON..... 692, 2339
STEINBERG, LEONARD..... 2263	SUGIHARA, CORINNE..... 557	SWEET, PATRICK..... 111, 1726, 1727
STEINBERGER, AMANDA..... 324, 783	SUH, DAVID..... 528	SWEIGERT, JAMIE..... 2500
STENSMAN, LARS..... 1104	SUHIR, ERIN..... 618	SWENSON, FRANK..... 328
STEPENOSKY, JAMES.324, 692, 2003, 2339	SUK, DAVID..... 460	SWORDS, KELLY..... 2376
STEPHANY, HEIDI..... 499	SUK, KEVIN..... 306	SY, JOAN..... 39
STEPHENS, BENJAMIN..... 778	SULEIMAN QAFITI, KHAWLA..... 1623	SY, RAMON..... 1743
STEPHENS, LAURA..... 661, 2257	SULIMAN, ASHRAF..... 73	SY, THEODORE..... 366
STEPHENSON, ROBERT..... 29	SULLIVAN, ELISSA..... 1762, 1763	SYAL, GAURAV..... 294, 631
STEPHENSON, SAMUEL..... 327, 701	SULLIVAN, JESSICA.166, 295, 634, 723	SYCHANGCO, PAUL..... 250
STERN, ANNA..... 315, 671	SULLIVAN, LAUREN..... 298, 638	SYED, SAMEENA..... 55
STERN, MARK..... 199, 784	SULLIVAN, THOMAS.706, 2017, 2367, 2368	SYED-UDDIN, SUMIYAH..... 2035
STERN, MARLEIGH..... 625, 2155	SUMMERS, STEPHEN..... 140	SYMANSKI, ELIZABETH..... 91, 162
STERNFELD, DANIEL..... 259, 378	SUMMERS-DAY, COURTNEY.234, 629, 1496, 1892, 2171	SYN, GENE..... 399
STERNS, DANIEL..... 41	SUN CITY CONVALESCENT CENTER..... 880	SZABO, HAYLIE..... 147, 315
STEVENS, KENNETH..... 297	SUN, JASON..... 791	SZCZESIK, KRYSZTIAN..... 227
STEVENSON, REHEIA..... 1912, 2035	SUN, JOHN..... 262, 263, 389, 390	SZMIDT, MARIA..... 65, 73
STEWART, TYLER..... 1933	SUN, MICHAEL..... 706	SZPUNAR, MERCEDES..... 267
STIFF, TYLER..... 129, 668	SUN, PAUL..... 262, 263, 389, 390	SZU, ERIC..... 432
STIGEN, THERESA..... 201	SUN, STEVEN..... 263	SZYMANSKI, JARED..... 37
STILLWELL, CARLA..... 21, 53	SUN, YEMING..... 36	
STIPHO, SALLY..... 631, 1519	SUNA-SITTO, MOHEEN..... 731, 1767	T
STOJANOVSKA, JOVANA..... 1889	SUNDER, RAJAGOPAL..... 445	TA, MINI..... 2614
STONE, CALVIN..... 2452		TA, TRANG..... 2609
		TABARANZA, PHOEBE..... 771
		TABIL-GALAPON, BERNICE. 219, 440

E. Índice de proveedores

TABILA, BRIAN.....	538, 539	TANG, NIKKI.....	506	TERRY, AMANDA.....	1243
TABRIZI, SYAMAK.....	640	TANG, TAYLOR.....	494	TESFAI, HELEN.....	1991, 2313
TADDONIO, MICHAEL.....	2003, 2340	TANG-RITCHIE, LENG.160, 285, 608,		TESSIER, ADLA.....	73
TADROS, ANTHONY.....	2003, 2341	609		TEW, JOHN.....	2548
TADROS, EMAD.....	677	TANKSLEY, SIMON.....	57	TEYMOORIAN, ARIAN....	508, 509, 743
TADROS, JESSICA.....	225	TANNOUS, PETER.....	618	TEYMOORIAN, SAVAK.....	385, 597
TAECHARVONGPHAIRAJ,		TANTISIRA, KELAN.....	2292	THACH, QUEEN.....	125, 158, 191, 545
VEERAVAT.....	217	TANTISIRA, LALITA.628, 637, 2165,		THACH, TERILYN.....	2545
TAFRESHI, GILDA.....	1554, 1555	2188		THAI, AMANDA.....	2615
TAGDIRI, KEVEN.....	29	TANTOD, KULIN.....	1256	THAI, JUSTIN.....	1497, 1498
TAGHIZADEH, BEHZAD.....	334, 2023	TANUS, DEBORAH.....	773	THAKKAR, SANDEEP.....	257
TAGHIZADEH, MAJID.....	1441	TARLE, STEPHANIE.319, 679, 1997,		THANGARAJAH, HARIHARAN.2054,	
TAGHVA, ALEXANDER.....	488	2324, 2464, 2500		2370, 2371	
TAHAEI, SEYED....	97, 127, 192, 585, 664	TARVER, LESLIE.....	317, 2464	THAPER, MOHINDERPAL...583, 2096	
TAHERI, DANIEL.....	506	TASTO, JAMES.....	707	THAYER, KARISA.....	539
TAHERI, NIMA.....	250	TAUB, PAM.....	1942	THE COVE AT LA JOLLA.....	877, 2427
TAHRIRI, BAHAREH.....	1695, 1696	TAUNTON, PHILIP.....	191, 307, 656	THE DORTHY AND JOSEPH	
TAI, AUDREY.....	384, 468, 597	TAYAG, DYLAN.....	155	GOLGBERG HEALTHCARE CENTER.	
TAI, KUANGKAI.....	1380	TAYANI, RAMIN.260, 384, 385, 468,		.....	2425
TAING, JENNIFER.....	2142	469, 597		THE PAVILION AT OCEAN POINT.	
TAJIRAN, DEENA.....	156, 649	TAYLOR, CHRISTOPHER.1347, 1348,		.....	2433
TAKESITA, KEN.....	281, 534	1349, 1889, 2074, 2075, 2404		THE SHORES POST ACUTE.....	879
TAKHAR, JASMINE.....	714	TAYLOR, DAVID.....	1940, 2189	THE SPRINGS AT PACIFIC REGENT.	
TALANKI, VARUN.441, 512, 534, 748,		TAYLOR, ERIC.....	477	.....	879, 2433
767		TAYLOR, INGE.....	621	THE VILLAGE HEALTHCARE	
TALAVERA, GREGORY.21, 77, 1139, 1727		TAYLOR, ISHA.....	521, 522	CENTER.....	877
TALBOT, ADRIANNE.....	2143	TAYLOR, KAYLA.....	1425, 1426	THE VILLAS AT POWAY.....	878, 2431
TALEBZADEH, NOJAN.....	140	TAYLOR, MISTY.....	155	THIBAUT, WILLIAM.....	494
TAM, EMILY.426, 575, 779, 2033, 2084,		TAYLOR, RYAN.....	129, 344, 669	THIELE, JENS.....	506, 568, 734
2411, 2412		TAYLOR, TASHA.....	731, 1763, 2393	THIERMANN, PAIGE.....	153
TAM, MAY.....	2609, 2610	TAYYAB, NEIL.....	142, 348, 707	THODE, LAURA.....	755
TAMAS, VANESSA.....	2278	TCHAKMAKJIAN, LEVON.....	1215	THOLCKE, LOREN.....	766
TAMAYO, MAITHE.....	1624	TEACHER, THEODORE.....	461, 463	THOMAS, CARLTON.....	111, 154, 631
TAMAYO, SYDNIE.....	100, 175, 578, 783	TEBYANI, NEYSSAN.281, 414, 499,		THOMAS, CHERYL.....	47
TAMAYO-MURILLO, DORATHY.324,		500, 600		THOMAS, JULIAN.....	464
692		TEE, ALEXANDRA.....	1139	THOMAS, KAITLIN.....	137, 346
TAMMELIN, BRUCE.....	482	TEETER-WITT, ALYSSA.....	1883, 2453	THOMAS, KELSEY.....	319, 1997, 2464
TAN, CONNIE.....	171	TEGUH, COLLIN.....	65	THOMAS, KIMBERLY.....	129, 731
TAN, LO FU.....	1727, 1728	TEJADA BRAS, SANDY.....	618	THOMAS, PAULA.....	184, 746, 2453
TANAKA, HIDEAKI.....	2162	TEJEDA, FRANCISCO.....	1732	THOMAS, ROBERT.....	2189
TANAKA, MARY.....	1110	TELLECHEA-SANCHEZ, SELMIRA.		THOMAS, ROGER.....	576
TANAKA, SCOTT.....	707	.....	1266	THOMAS, SEAN.....	17
TANAMAI, VAYA.....	259, 378	TEMECULA HEALTHCARE CENTER.		THOMAS, THEODORE.....	644
TANG, ANDREW.....	2048, 2278	.....	880	THOMAS, ZACHARY.....	1498
TANG, ASHLEY.....	779	TENG, WANG.....	402, 404, 407, 408	THOMASII, STEPHEN.....	740, 785
TANG, KIM.....	429, 430	TERADA, SEIJU.....	388, 598	THOMPSON, CHERYL.....	1256, 1257
TANG, MICHAEL.....	296, 1935	TERRERI, NATALIE.....	477	THOMPSON, CHRISTOPHER. 263, 471	

E. Índice de proveedores

THOMPSON, DANIELLE.	325, 698	TON-NU, MY LINH.2519, 2530, 2536,	TRAN, STEVE.	461, 462	
THOMPSON, JOHN.	335	2545, 2556, 2572, 2584, 2610, 2611	TRAN, THAO.....	2618	
THOMPSON, RUSSELL.	591	TONG, ALEXANDER.	295, 635	TRAN, THERESA.....	514, 2048, 2279
THOMPSON, SANDRA.	603	TONG, GARRICK.	2505	TRAN, TIFFANY.	466
THOMSON, EMILY.....	514	TONNU, ANH.191, 341, 656, 2530,	TRAN, TONNIA.	1498	
THOMSON, SAMANTHA.303, 649,		2556, 2572, 2611	TRAN, TRAN.....	289	
1955, 2229		TOOMA, GHASSAN.....	531	TRAN, TU-UYEN.....	1783
THUNDER, RICHARD.....	148, 328	TOOSIE, KATAYOUN.	176	TRAN, TUAN.....	763
THYGERSEN, ALAYSA.	1891	TOPIK, AMANDA.....	619	TRAN, UYEN THAO.	1499
TIAN, QING.	97, 519	TOPILOW, NICOLE.....	306, 1959	TRANG, CHAU.	2611
TIANGCO, IRINEO.....	55	TOPPEN, LAURA.	1912, 1913, 2143	TRANSFIGURACION SHIN,	
TIEN, AUDRIS.	266	TOPPEN, WILLIAM.....	297, 637	CHRISTIANNE.	522
TILLEY, MONICA.....	618	TORCHINSKY, CYRUS.....	660	TRAUT, JOEL.....	2279
TILLMAN, SYLVIA.	2572, 2610	TOROSIAN, KARO.	297, 300	TREJO, ANA...289, 290, 619, 1913, 2143	
TILTON, PETER.....	2500	TORRES, HECTOR.....	2388, 2505	TREJO, RAUL.	21, 1140, 1141, 1728
TIMBOE, JENNA.	350	TORRES, RANDALL.....	90, 1796, 2442	TRESENITTER, MEGAN.	109
TING, JAMES.....	275	TORRES, REBECCA.	43	TREUNER, JULIE.	1646
TINT, DERRICK.....	753	TORREY PINES SENIOR LIVING...879		TRI CITY MEDICAL CTR.....	13, 2420
TIONGSON, JAY.....	450	TORREY, ROBERT.....	281	TRIMLETT, COLLEEN.....	669
TIRAKITSOONTORN, PORNCHEI. 474		TOTH, JESSICA.....	1286	TRIMM, CASSIDY.	2007
TITH, JENNY.....	695	TOUBIA, ELIAS.	2524, 2584, 2617	TRING, ELEANOR.	168
TITOVA, ANASTASIA.	640	TOUMA, ELIE.	131, 193, 194, 671	TRINGALE, KATHRYN.....	321, 2328
TIU, BRIAN.231, 232, 761, 762, 763, 796,		TOVAR, JUAN.....	109	TRINH, BRIAN.	692
797		TOVARPADUA, LEIDY.....	2182, 2183	TRINH, MIMI.....	74
TIWARI, RATAN.	437	TOWNE, BROOKE.....	563, 564	TRIVEDI, JANKI.....	447, 759
TIZNADO, ERNESTO.	127	TOWNS, ARTA.	619	TRIVEDI, MEHUL.	298, 637
TIZNADO, MONICA.....	185	TRABUCO HILLS POST ACUTE.....	878	TRIVEDI, NAYANA.....	298
TO, BRITTANY.	444	TRADONSKY, STEVEN.	707	TRIVEDI, SURAJ.	1898, 2106
TO, TUAN.	2324, 2501	TRAINER, JASON.	163, 567, 581, 722	TROYER, CORY.....	324
TOCCI, STEPHEN.....	422, 493	TRAN, ALEXANDER.	2545, 2611	TROYER, EMILY..133, 2444, 2501, 2502	
TODD, CHRISTINE.	514	TRAN, AMY.....	168	TRUECARE.883, 884, 924, 925, 961,	
TODD, MIKAYLA.....	1100, 1245, 1426	TRAN, BRYAN.....	466	962, 963, 964, 965, 967, 968, 970,	
TODD, RACHEL.	129	TRAN, CECILIA.	41	1054, 1055, 1056, 1057, 1058, 1059,	
TODD, SARAH.	1878, 2089, 2278	TRAN, DAO.	83, 773	1060, 1061	
TOLBA, KAMEI.	1243	TRAN, DAPHNE.....	619	TRUECARE VISTA WAY HEALTH	
TOLEDO-NADER, CAROLL. ....22, 1140		TRAN, HENRY.	2572	CENTER STE G,	56
TOLENTINO, ARTURO.	75, 2382	TRAN, JESSICA.779, 1821, 2084, 2085,		TRUECARE, .17, 56, 58, 75, 1106, 1361,	
TOLIVER, KEVIN.....	602	2412, 2413		1381, 1382, 1675, 1676, 1677	
TOLMIE, SIMONE.	1433	TRAN, KELLY.	1427	TRUJILLO, DALE.....	290, 1913
TOMAN, JEFFREY.....	698	TRAN, KIM.	729	TRUJILLO, JENNIFER.649, 1157, 1588,	
TOMASZEWSKI, DEBRA.	1645, 1646	TRAN, LILIAN.....	59	2229	
TOMICICH, STEPHANIE.107, 144, 162,		TRAN, MICHAEL.....	528, 2615	TRUJILLO, MIGUEL.....	731, 1767, 1768
289, 332, 618, 619		TRAN, NEIL.....	365, 454	TRUONG, ANDREW.....	49
TOMLIN, JEFFREY.....	2363	TRAN, PHI.....	297, 298	TRUONG, MICHAEL.....	454, 455
TOMPKINS, BRETT.....	385	TRAN, RICHARD.....	289	TRUONG, NHA.....	1499
TOMPKINS, STACY.107, 108, 164, 625,		TRAN, SHERI.....	168, 174, 782	TRUONG, VENNES.....	622, 1441
626		TRAN, STEPHANIE.....	261, 428	TSAI, CHIAHONG.	427, 791

E. Índice de proveedores

TSAI, CINDY.....	695	ULRICH, STACEY.....	2279	VALENZUELA, TRICIA.....	1500
TSAI, GRACE.....	131, 345, 546	UMANSKY, JEFFREY.....	329	VALK, JOSIAH.....	707
TSAI, JAMES.....	216	UNDERWOOD JOLLY, AMY.....	59	VALLE VISTA POST ACUTE..	877, 2426
TSAI, MATTHEW.....	1931, 2176	UNGER, ARLENE.....	146, 147	VALLEZ-BARLAM, ANDREA.	196, 587,
TSAI, MON TA.....	49	UNGER, LINDSEY.....	2008, 2351	1883, 2099, 2453, 2454,	2477
TSANG, JOYCE.....	283, 604	UNIVERSITY CARE CENTER.	879, 2433	VALLONE, ROBERT.....	671
TSANG, WALTER.....	216, 510	UNKART, JONATHAN.....	140	VAN DEN HEUVEL, KELLY.....	649
TSE, YARDY.....	568, 626, 734	UNSDORFER, KYLE.	324, 692, 2003,	VAN DER REIS, WILLIAM.....	599
TSI, SY.....	534	2341		VAN DYKE, JASON.....	1662, 1663
TSIMPAS, ASTERIOS.....	488, 489	UNTERBERG, STEPHEN.	712, 2376,	VAN HOOSE, MARC.....	2612
TSUCHIYA, KIMIKO.....	1500	2377		VAN PRATT LEVIN, BENJAMIN.....	2171
TSUDA, PAIGE.....	1899, 2106	UPASANI, VIDYADHAR.	2054, 2092,	VAN, HOHAI.....	360, 371, 594
TSUI, NANCY.....	2573	2368		VANDEWIELE, EMILY.....	695, 2348
TU, BEVERLY.....	2573	UPPAL, GURVINDER.....	766	VANE, JACKSON.....	2280
TUCKER, LANIKA..	290, 619, 1914, 2143	URBAND, LINDSEY.....	707	VANETSKY, GARY.....	171, 1858
TUEROS, VICTORIA.....	1427	URBANIC, JAMES.....	578	VANFOSEN, BRIAN.....	679
TULLY, JEFFREY..	282, 602, 1899, 2107	URIAS, DANIEL.....	766	VANHOLLEBEKE, RACHEL.	89, 1103,
TUNG, CHESTER.....	86	URIBE-BRUCE, LILIANA.....	1548	1729	
TUNG, SHAWNDEEP.....	402	URSO, MARY JO.....	221, 222, 441	VANICHSARN, CHRISTOPHER.	184,
TUNG, VIVIAN.....	1278	USMANI, AMENA.....	661	583	
TUREK, PAUL.....	203	UTZ, JACK.....	1728, 1729	VANNOORD, BRANDON.....	602, 603
TURIY, YULIYA.....	371	UWEDJOJEVWE, LETICIA.....	24, 1148	VANOCKER, KARI.....	669
TURNER, ERIC.....	1238, 1783, 1784	UY, ASHLEY.....	1193	VANVRANKEN, BRUCE.....	42
TURNER, SHEREENA.	1238, 1239, 1646,	UY, CARMELITA.....	1328	VANWOY, LAUREN.....	2280
1647				VAPNEK, EVAN.	144, 146, 178, 331, 349,
TWAMLEY, ELIZABETH.....	2324, 2502	V			712, 713
TYAGI, ABHILASHA.	153, 538, 583, 626	VADAPARAMPIL, JANET.....	426	VAQUERA, JACQUELINE.....	669
TYE, KAREN.....	175, 321, 683	VAHABZADEH-HAGH, ANDREW.	311,	VAQUERO, JUANA.....	1884, 2454
TYNER, JOHN.....	329	660, 1973, 1974, 2252, 2253		VARGAS, CHRISTOPHER.	129, 1825,
TZENG, ERIC.....	282, 602, 1899, 2107	VAHDAT, NOUSHIN.	324, 692, 693,	1826	
U		2004, 2341		VARGAS, JACLYN.	2029, 2089, 2280,
U, HOI.....	2014, 2363	VAHDAT, VALERIE.	437, 722, 740,	2281	
UC SAN DIEGO HEALTH - EAST		2033, 2381, 2395		VARGAS, ROBERT.....	1647
CAMPUS MEDICAL CENTER.	13, 14,	VAIDYA, KAMALA.	1823, 1878, 2089,	VARGASTRUJILLO, MARCELA.	2050,
2420		2279, 2280		2283	
UCSD LA JOLLA JOHN SALLY		VAIDYA, NADEEM.....	260	VARGHESE, ROSHAN.....	427, 791
THORNTON.....	14, 2421	VAKILIAN, SIAVOSH.	198, 683, 693,	VASANI, DHWANISHIVA.....	73
UCSD MEDICAL CTR.....	14, 2421	1885, 2342		VASQUEZ, BENJAMIN.	695, 2007,
UDANI, VIKRAM.....	702	VALADEZ, JESUS.....	32	2348	
UDDIN, MOHAMMAD.....	201, 512, 513	VALDEVERONA, KATHY.....	212	VAUGHN, DOUGLAS.....	282, 602
UDOH, EKAETE.....	545, 1647	VALDEZ, KELLY.....	694	VAUGHN, GABRIELLE.....	2264
UDOWENKO, MARINA.....	629	VALDEZ, KRYSTAL ANGELI.	538, 1548,	VAVINSKAYA, VERA.....	1980, 2257
UEBELHOER, NATHAN.	153, 538, 583,	2165, 2166		VAYNGORTIN, TATYANA.....	2281
626		VALDEZ-HERNANDEZ, ISRAEL.	219,	VAZQUEZ-BOJORQUEZ,	
UHL, BARRY.....	136	746		ALEJANDRA.....	21, 37, 65
ULANER, GARY.....	270	VALENCIA, JESUS.....	669	VAZQUEZ-ERLBECK, MARTHA.	107,
ULIBARRI, MATTHEW.....	225, 444, 752	VALENCIA, MARILES.....	1170, 1328	729, 1704	
		VALENZUELA, CANDACE.....	424		

E. Índice de proveedores

VCC DURIAN.....	1097, 1098	VIJAYASARATHI, KRISHNA.....	147, 148	VISTA KNOLL SPECIALIZED CARE	
VCC DURIAN, .	83, 1790	VILCHIS, CAROLINE.....	580	FACILITY.....	880, 2437
VEGA, CAROLINA.....	2048	VILLA CORONADO CONVALESCENT.		VISTA VIEW POST ACUTE.....	880
VEGA, FRANCISCO.....	528	.....	2422	VIVALDA, JULIE.....	361, 362
VEGA, RICARDO.....	523, 745, 756	VILLA LAS PALMAS HEALTHCARE		VIVIRITO, MARY.2519, 2536, 2546,	
VEGA, TERESA.....	1118, 1119, 1428	CTR.....	876, 2425	2557, 2574, 2585, 2612	
VELASQUEZ, FERNANDO. 1428, 1429		VILLA MONTE VISTA.....	878	VIZCARRA, DAVID.....	758
VELASQUEZ, SHARON.53, 1141, 1317,		VILLA RANCHO BERNARDO CARE		VO, ANDREW.....	1961, 2240
1729, 1730, 1806		CENTER.....	879, 2434	VO, ANDREW MINH.....	2557, 2612
VELAZQUEZ CAMARENA, MARIA.		VILLA, ANGEL.....	158	VO, BRYAN.....	396, 397
.....	1148, 1743, 1744	VILLA, ANGELICA.....	2524	VO, PHULUONG.....	65, 66, 2172
VELLOREGOVARDHAN, SHILPA.2264		VILLA, MARIA.....	65, 73, 1501	VO, QUANG.....	531
VEMULAPALLI, SREENIVAS.....	534	VILLAGOMEZ, JOSHUA.....	641	VOLLER, STEPHANNIE.....	2209
VENEZIANO, CHRISTOPHER.275, 417,		VILLALOBOS, REBECA.....	1429	VOLPP, HEATHER.....	768
422, 423		VILLANUEVA, GIOVANNI.234, 1832,		VOLPP, PAUL.136, 198, 346, 683, 1829,	
VENKAT, ARUN.182, 200, 506, 568,		1894, 2066		1884, 2031, 2328	
626, 723, 734		VILLANUEVADEGUTIE, BERENICE.		VORA, RONAK.....	463
VENKAT, GEETA.....	236, 449	.....	536, 619, 1189, 1190, 1304	VOSSLER, JOHN.....	2374
VENKATESH, VIJAY.....	346, 733	VINCENT, BERLIN.....	620, 2147	VOURLITIS, MELISSA.17, 21, 26, 30, 50,	
VENKATESWARAN, APARAJIT.295,		VINCENT, EBONIE.....	266	66, 78	
634		VINCENT, LAUREN.....	110, 1123	VOVAN, THOMAS.....	369, 397
VENNAM, VAMSIKRISHNA.....	2454	VINCENT, WILLIAM.....	81	VU HILL, ERICA.....	621
VENTRO, GEORGE.....	326, 699	VINH, JOHN.341, 545, 656, 2530, 2536,		VU, BAO-KHOI.....	204, 433
VENTURA, ALEXIS.....	212	2557, 2573, 2585		VU, COLLIN.....	368, 374
VERCHER, ROSHON.....	184	VISEROI, MARIUS.....	578	VU, LAC.....	649
VERDOLIN, MICHAEL.....	101, 331	VISHEH, PARYA.....	203	VU, PETER.....	1934, 2179
VERDUZCO GONZALEZ, AURORA.		VISTA COMMUNITY CLINIC.937, 938,		VU, STEVE.....	762, 766
.....	1189, 1304	939, 940, 959, 960, 961, 965, 966, 967,		VYAS, URVI.....	243
VERGARA RODRIGUEZ, DIANA... 694		1091, 1092, 1093, 1094, 1095, 1096, 1097			
VERRET, ERIC.....	2546	VISTA COMMUNITY CLINIC			
VETTICADEN, SANTOSH.....	1261	GRAPEVINE.....	1090, 1091, 1098		
VIA RIO HOUSE.....	2426	VISTA COMMUNITY CLINIC			
VIBAL-POASTER, MARIA.....	2144	GRAPEVINE,.....	83, 1790, 1791		
VICENS-VILLAFANA, JOSE.....	378	VISTA COMMUNITY CLINIC HORNE			
VICK, ALINA.....	722	STREET.....	960, 962, 967		
VICTORIA POST ACUTE CARE.876,		VISTA COMMUNITY CLINIC HORNE			
2424		STREET,.....	56, 1363		
VICTORIA SPECIAL CARE CTR.....	876	VISTA COMMUNITY CLINIC PIER			
VIDAL, ALYSSA.....	212	VIEW WAY.....	960, 961, 968		
VIDAL, MONICA.....	569, 773, 1360, 1361	VISTA COMMUNITY CLINIC PIER			
VIDAURRAZAGA, MONICA.....	1549	VIEW WAY,.....	56, 1364		
VIDEEN, JOHN.....	118, 119, 1815	VISTA COMMUNITY CLINIC, .31, 56,			
VIDOR, IRA.....	223, 518	1272, 1273, 1362, 1363			
VIECHNICKI, TARA.....	170	VISTA HEALTHCARE CENTER.880,			
VIERA, LIANA.....	438, 504	2437			
VIERNES, MATTHEW.....	570	VISTA HOUSE.....	2437		
VIERRA, ERIN.....	290				

W

WACHHOLZ, PAMELA.....	213
WACHNER, KRISTELYN.....	200, 738
WADELL, CHAD.....	49
WADHWA, MANISH.....	604
WAGNER, EDWARD.....	415
WAGNER, PAUL.....	73
WAGNER, TASIA.566, 771, 772, 1349,	
1350	
WAHLIN, TAMARA.315, 669, 1991,	
1992, 2313	
WAINWRIGHT, MITCHELL.....	37, 350
WAKILY, HUSSNA.....	176, 579
WALDRUP, LARHONDA.....	1863, 2144
WALKER, BRADLEY.....	781
WALKER, JULIE.....	2348
WALLA, MEGAN.....	162
WALLACE, PATRICIA.....	432, 458
WALLACE, STEPHANIE.576, 780, 2413	

E. Índice de proveedores

WALLACE, WILLIAM.....	402, 404	WAYNE, DIANE.....	524	WHITE, KYLE.....	129, 344, 2030
WALLACH, SABINA.....	295	WAYNE, EDGAR.....	459	WHITE, XUANHA.....	744
WALSH, ERIN.....	698	WEATHERLY, JACOB.....	1625	WHITEAKER, ARIKA.....	669
WALSH, HEATHER.....	669	WEAVER, AMANDA.....	2447	WHITEHURST, UNIQUE.....	619, 2144
WALSH, JOHN.....	1881	WEAVER, APRIL.....	1794, 1795	WHITLEY, NICHOLAS.....	21, 109, 1141, 1142
WALTER, ROME.....	50	WEBB, SHANNON.....	586, 669, 2313	WHITMAN, GREGORY.....	257
WALTERS, DANIEL.....	371, 372	WEBSTER, LUKE.....	2190	WHITNEY, LESLIE.....	433
WANG, ALICE.....	598	WEDDLE, DIRK.....	242	WHITWAM, WAYNE.....	159, 168, 284, 298
WANG, AMY.....	510, 511	WEICKERT, MARIA.....	1430	WIAN, DEBORAH.....	283
WANG, ANCHI.....	96, 187, 301, 585	WEIDNER, ANNE.....	290	WICKWARE, TRACY.....	192, 193, 768
WANG, ANGELA.....	1940, 2189	WEINER, KEITH.....	473	WIEGAND, SARAH.....	301, 646
WANG, CHUNYANG.....	96, 187, 301, 584, 585	WEINERT, CARL.....	475, 493	WIENER, GREGORY.....	111, 112, 1807
WANG, DEHUA.....	2258	WEIR, JACQUELINE.....	315, 669, 1992, 2314	WIETZKE, MATTHEW.....	619
WANG, GEORGE.....	192	WEISS, KATHERINE.....	663, 2037, 2210, 2302	WIJAYARATNE, IMANIE.....	135, 1828, 2444
WANG, JAMES.....	589	WEISSBROD, PHILIP.....	311, 661, 1975, 1976, 2254	WILAND, WINONA.....	129, 669, 1799
WANG, LILLIAN.....	393	WEISSMAN, CORY.....	677, 2502	WILCOX, WENONAH.....	105, 1801
WANG, LUKE.....	331, 713, 2020, 2377	WELLS, JOSEPH.....	523	WILLET, MATTHEW.....	506
WANG, MATTHEW.....	146, 261	WELLS, MARY.....	433	WILLEY, MARTI.....	162, 290, 504, 619, 722
WANG, MICHAEL.....	473	WELLS, PHILLIP.....	598	WILLGING, STEFAN.....	73
WANG, MICHELLE.....	283, 1899	WELLS, TODD.....	588, 2101	WILLIAM, PHEBEE.....	212
WANG, NAN.....	762, 767	WELSH, BRITT.....	155	WILLIAMS, ALICIA.....	283, 604
WANG, REGINA.....	1501	WEN, AKI YEN CHANG.....	77, 1148, 1149, 1744	WILLIAMS, ALISA.....	632, 649
WANG, SHIN CHERN.....	528	WENDEL, TREVOR.....	107	WILLIAMS, BRANDON.....	296
WANG, STEVEN.....	242, 261	WEON, SUK KYENG.....	427	WILLIAMS, BREAUNA.....	151, 536, 619, 1190, 1305, 1430
WANG, THOMAS.....	271	WERHO, DAVID.....	2264	WILLIAMS, HOWARD.....	73
WANG, VINCENT.....	2281	WERNER, KRISTINE.....	755	WILLIAMS, JEFFREY.....	607
WANG, WENG-LIH.....	785, 788	WERNER, R AARON.....	2531	WILLIAMS, JESSICA.....	1665
WANG, WILLIAM.....	275, 276, 329, 493	WERNER, REX.....	2530	WILLIAMS, JINA.....	772, 1788
WANG, XIUJIE.....	231, 232, 762, 763, 796, 797	WERTMAN, BRETT.....	238, 251, 349, 350	WILLIAMS, KRISTIN.....	2025, 2079, 2200
WANG, YE.....	385, 597	WEST, JULIE.....	2038, 2097, 2210	WILLIAMS, MARK.....	386, 716
WANG, YVETTE.....	2281	WESTEREN, ALAN.....	306	WILLIAMS, MATTHEW.....	2044, 2264
WARD, KATHERINE.....	1278	WESTERMANN, MELISSA.....	1812, 2078, 2199	WILLIAMS, SHANTRICE.....	151, 582, 1837
WARD, NICHOLAS.....	742	WESTERN ADHC.....	2439	WILLIAMS, STACY.....	2007, 2348, 2349
WARLEN, MARK.....	655	WETTERSTEN, NICHOLAS.....	1942, 2036	WILLIAMS, TAKISHA.....	1119, 1190, 1191, 1287, 1431, 1771, 1772
WARNER, MICHAEL.....	223, 751	WHEATLEY, BENJAMIN.....	328, 707	WILLIE, KADEN.....	29, 75
WARRIER, NIKHIL.....	237, 238	WHEELER, KIM.....	1842, 2447	WILLNER, AYAL.....	559, 560
WASHBURN, NEAL.....	476	WHITE, ALAN.....	368	WILSON, CARLENE.....	572, 776, 2476, 2515
WASSON, MINA.....	1625	WHITE, DANIEL.....	140, 141	WILSON, JENNIFER.....	578, 783
WASTILA, LISA.....	1549	WHITE, EVAN.....	136, 175, 683	WILSON, MATTHEW.....	671
WATANABE, BRIAN.....	403	WHITE, JON.....	276	WILTCHIK, ERIN.....	320
WATERS, ELIZABETH.....	1625	WHITE, KATHERINE.....	1501, 1502	WINDHAM, SUZONNE.....	566, 772
WATSON, DEBORAH.....	311, 660, 661, 1974, 1975, 2253	WHITE, KERI.....	583, 2095	WINDSOR GARDENS CONV AND REHAB OF GOLDEN HILL.....	879, 2434
WATTANAMANO, PORNTHEP.....	1550				
WATTS, ELI.....	73, 1551				

E. Índice de proveedores

WINDSOR GARDENS CONV CTR OF SAN DIEGO.....	878, 2429	WRIGHT, DEREK.129, 193, 576, 670, 1826, 1881, 2091, 2314	YAZDANSHENAS, MARYAM.....	47
WINESBURG, JENNIFER.1223, 1224, 1296, 1589, 1781, 2061		WRIGHT, KIMBERLY.....	YAZDI, JANET.....	49
WINKELMANN, RICHARD.....	506, 742	WRIGHT, STEPHANIE.....	YCASAS, EMILY.....	722, 772, 2381, 2405
WINKLER, GARRET.....	1926	WRITER, NICOLE.....	YEAM, INCHEL.....	719
WINTER, JENNIFER.....	129	WU, DARRELL.....	YEANG, CALVIN.....	2111
WINTER, MARC.....	378	WU, EVA.....	YELLEN, LAURENCE.....	334, 2023
WIRTH, LAURA.....	759, 791	WU, JENNIFER.....	YEO, ALEXANDRIA.162, 290, 1846, 1914	
WISE, DOUGLAS.....	81	WU, JENNY.....	YETTER, MARCUS.....	353, 394
WISHNEK, HANNAH.....	298, 2464	WU, MELANIE.....	YIAN, CHRISTOPHER.....	263, 390, 391
WITCZAK, IZABELA.....	75, 1677, 1678	WU, MICHELLE.....	YIDI, DIANA.....	2503
WOELKERS, DOUGLAS.....	1848, 1944	WU, VANNA.....	YIM, EUGENE.....	563
WOLF, CELIA.....	1431, 1432	WYLIE, BLAKE.....	YODER, ANDREA.....	1900, 2107
WOLF, ELI.....	181	WYSOCZANSKI, MARIUSZ.105, 116, 536, 540	YOO, FRANK.....	327
WOLF, RICHARD.....	1849, 1945, 2200		YOO, HEATHER.....	160
WOLF, RONALD.....	271	X	YOON, RYAN.....	1142
WOLFE, AMANDA.....	2094	XU, DIXON.....	YOON, TAE.....	1215, 1216
WON, EUGENE.....	494, 495		YORK, JOHN.....	136, 321, 683, 693
WONG, ANDREW.....	234	Y	YORK, VINCENT.324, 693, 2004, 2342	
WONG, CALVIN.....	66	YACOOB, MARLENE.....	YOSHII, DENIS.....	202
WONG, DARRYL.....	200, 568	YADLAPATI, RENA.....	YOSHII-CONTRERAS, JUNE... 96, 1797	
WONG, FELIX.....	693	YAGUDAYEVA, RAISA.....	YOU, ALAN.....	1926, 2162
WONG, GORDON.....	2612	YALDO, ATHMAR.....	YOU, TIMOTHY.....	386
WONG, JASON.....	403	YALVAC, ETHAN.....	YOUDEIRIAN, ARI.....	276, 423
WONG, JEFFREY.....	276, 423	YAMADA, KENTARO.....	YOUNAN, LAWRENCE.....	1900, 2107
WONG, JENNIFER.....	239	YAMANAKA, MARK.....	YOUNES, BASSAM.....	473
WONG, KRYSTLE.....	86, 591	YAN, CAROL.311, 661, 1976, 1977, 2254, 2255	YOUNG, ALLA.....	2525, 2574
WONG, MAYBELLE.....	619, 620	YAN, ERIC.....	YOUNG, CAROLYN.....	483
WONG, POLLYANNA.....	265	YANG, ANDREW.....	YOUNG, JENNIFER.....	1105, 1106
WONG, RANDALL.....	469	YANG, BENJAMIN.....	YOUNG, JOCELYN.....	1856, 2284
WONG, SHARON.....	2574	YANG, CHARLES.....	YOUNG-PEN, TONI.....	1648, 1649
WONG, STEVEN.....	680	YANG, DAVID.....	YOUNGBLOOD, SCOT.....	142, 707, 708
WONG, VICTOR.....	2287	YANG, DAVID.....	YOUNOSZAI, ADEL.....	2265
WONG, YOLANDA.....	1625, 1626	YANG, JENNIFER.....	YOUSEF, ANDREW.....	1596
WOO, ANDY.....	620, 2144	YANG, JENNY.....	YOUSSEF, AMR.....	221, 441
WOO, LINDA.....	126, 311	YANG, PHILIP.....	YOUSSEF, FADY.....	294, 631, 1931, 2176
WOOD, YELENA.....	59	YANG, TAE.....	YU, AUDRINE.....	2008
WOODALL, GARY.....	73	YANG, YIFAN.....	YU, CAROL.307, 656, 657, 1961, 2240, 2241, 2558, 2613	
WOODRUFF, WHITNEY.....	162	YANNI, ELIZABETH.....	YU, ELAINE.292, 293, 627, 1926, 1927, 2163	
WOODWARD, STEPHANIE.....	700	YAO, CATHERINE.....	YU, FANG.....	247
WOODWORTH, JENNIFER.196, 197, 755, 1884, 2395, 2454		YAP, KONG PENG.....	YU, HELENA.....	2287
WOOLEY, LAURA.....	522	YAP, MICHAEL.....	YU, JENNIFER.....	2287
WORSEY, MICHAEL.....	325	YAPHOCKUN, KARENKIM.....	YU, JERRY.424, 425, 744, 745, 785, 786, 788	
WRIGHT, BRENTON.....	96	YARTSEVA, YULIYA.....	YU, JUDITH.....	522
		YASHAR, CATHERYN.....		
		YASSIN, HAZEM.....		
		YAU, STEPHEN.....		

E. Índice de proveedores

YU, MIAO.....	378	ZEBARJADI, OMID.....	81
YU, PETER.....	484	ZEBRACK, DAVID.....	81
YU, VICTOR.....	204, 247, 248, 457	ZECHA, RICHARD.....	442, 515
YUAN, HENRY.....	119, 1815	ZECHA, RONALD.....	151, 181, 436, 1246
YUEN, SELENE.....	66	ZELEDON, JAIME.....	213, 740
YUN, EDWARD.....	534, 535	ZETTNER, ERIKA.....	283
YUN, JONATHAN.....	33, 50	ZHAN, FRANK.....	453
YUNG, AARON.....	564	ZHANG, HAIYAN.....	1981
YUNG, DORIS.....	58, 588, 1382	ZHANG, JOANNE.....	276
YUNG, EDWARD.....	751	ZHANG, MICHELLE.....	168, 174, 783
YUNG, STEVEN.....	1551	ZHANG, SHERRY.....	1941, 2190
Z			
ZABANEH, ALEXANDER.....	124, 170, 340, 544, 655	ZHAO, HANSON.....	282
ZABIHI, RAMIN.....	457	ZHAO, TAILUN.....	157, 170, 190, 306, 655, 2531, 2537, 2546, 2558, 2613
ZABLIT, KARIM.....	1595	ZHENG, VINCENT.....	74
ZACHARIAH, MARCUS.....	347, 702	ZHONG, QIU.....	471
ZACHRY, ALISON.....	1111, 1375, 1382	ZHONG, YAN.....	300, 644, 2211
ZAGE, PETER.....	2287	ZHOU, JENNY.....	2179
ZAHED, SHAHAB.....	250	ZHOU, SIWEI.....	202, 443, 751
ZAHEDI, MARCO.....	35	ZIEG, ALAN.....	1157, 1158, 1224, 1296, 1297, 1590, 1591, 1592, 1593, 1781, 1782
ZAHEER, AARON.....	663, 1627	ZIERING, ROBERT.....	768
ZAHLER, MARVIN.....	1502, 1503	ZIMBRIC, MICHAEL.....	1869, 2219
ZAIDI, NOORINA.....	171, 191, 2520, 2531, 2546, 2558, 2574, 2575, 2586, 2613	ZIMMERMAN, DAVID.....	773
ZAKI, MICHELLE.....	24	ZIMMERMAN, JENNIFER.....	2503
ZAKKO, MARAM.....	583	ZIMMERMANN, ANDRES.....	57
ZAKOV, KAMEN.....	582	ZINK, IRENE.....	66, 1503
ZALESKI-LARSEN, LISA.....	108, 626	ZINK-BRODY, GORDON.....	693
ZAMAN, RUMINA.....	473	ZLATAR, ZVINKA.....	1997, 2464
ZAMANI, MAZIAR.....	41	ZORN, GEORGE.....	700
ZAMORA-FLYR, MARIA.....	566, 567, 772	ZU, KAI.....	333
ZAND, FARIBA.....	1266, 1628	ZUBAIR, RAHEEL.....	92, 626, 1797, 2155
ZANDER, ASHLEY.....	329, 2019, 2020	ZUBER, SAMUEL.....	327, 548
ZANGEN, ROCHELLE.....	1384	ZUCKERMAN, KENNETH.....	263
ZAPALA, MATTHEW.....	324, 693, 2004, 2343	ZUNIGA, VANIA.....	290
ZAPPONE, ALIDA.....	572, 776	ZURITA, DANIELA.....	45, 81, 439, 742
ZARE, SOMAYE.....	1980, 1981	ZVANUT, DONALD.....	90, 158, 191, 341, 657, 2531, 2537, 2546, 2558, 2575, 2586
ZAREMBA, MARK.....	42, 360		
ZARGAR, SHABNAM.....	1170		
ZARGARBASHI, STEFANIE.....	372		
ZAVARO, SUHAIL.....	105, 150, 607		
ZAVERI, MAULIK.....	778		
ZAYAS, MARIO.....	641, 2503		
ZAYAT, DINA.....	482		
ZAYED, AHMAD.....	28		

This page left intentionally blank.



NONDISCRIMINATION NOTICE

Discrimination is against the law. Blue Shield of California complies with applicable state laws and federal civil rights laws and does not discriminate on the basis of race, color, national origin, ancestry, religion, sex, marital status, gender, gender identity, sexual orientation, age or disability. Blue Shield of California does not exclude people or treat them differently because of race, color, national origin, ancestry, religion, sex, marital status, gender, gender identity, sexual orientation, age or disability.

Blue Shield of California provides:

- Aids and services at no cost to people with disabilities to communicate effectively with us, such as:
 - Qualified sign language interpreters
 - Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Language services to people whose primary language is not English, such as:
 - Qualified interpreters
 - Information written in other languages

If you need these services, contact the Blue Shield of California Civil Rights Coordinator.

If you believe that Blue Shield of California has failed to provide these services or discriminated in another way on the basis of race, color, national origin, ancestry, religion, sex, marital status, gender, gender identity, sexual orientation, age or disability, you can file a grievance with:

Blue Shield of California
Civil Rights Coordinator
P.O. Box 629007
El Dorado Hills, CA 95762-9007
Phone: (844) 831-4133 (TTY: 711)
Fax: (844) 696-6070
Email: BlueShieldCivilRightsCoordinator@blueshieldca.com

You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, the Civil Rights Coordinator is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at:

U.S. Department of Health and Human Services
200 Independence Avenue, SW
Room 509F, HHH Building
Washington, D.C. 20201
1-800-368-1019, 800-537-7697 (TDD)

Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.

Multi-Language Insert Multi-Language Interpreter Services

English We have free interpreter services to answer any questions you may have about our health or drug plan. To get an interpreter, just call us at 1-800-452-4413. Someone who speaks English can help you. This is a free service.

Spanish Tenemos servicios de intérprete sin costo alguno para responder cualquier pregunta que pueda tener sobre nuestro plan de salud o medicamentos. Para hablar con un intérprete, por favor llame al 1-800-452-4413. Alguien que hable español le podrá ayudar. Este es un servicio gratuito.

Chinese Mandarin 我们提供免费的翻译服务，帮助您解答关于健康或药物保险的任何疑问。如果您需要此翻译服务，请致电 1-800-452-4413。我们的中文工作人员很乐意帮助您。这是一项免费服务。

Chinese Cantonese 您對我們的健康或藥物保險可能存有疑問，為此我們提供免費的翻譯服務。如需翻譯服務，請致電 1-800-452-4413。我們講中文的人員將樂意為您提供幫助。這是一項免費服務。

Tagalog Mayroon kaming libreng serbisyo sa pagsasalang-wika upang masagot ang anumang mga katanungan ninyo hinggil sa aming planong pangkalusugan o panggamot. Upang makakuha ng tagasalang-wika, tawagan lamang kami sa 1-800-452-4413. Maaari kayong tulungan ng isang nakakapagsalita ng Tagalog. Ito ay libreng serbisyo.

French Nous proposons des services gratuits d'interprétation pour répondre à toutes vos questions relatives à notre régime de santé ou d'assurance-médicaments. Pour accéder au service d'interprétation, il vous suffit de nous appeler au 1-800-452-4413. Un interlocuteur parlant Français pourra vous aider. Ce service est gratuit.

Vietnamese Chúng tôi có dịch vụ thông dịch miễn phí để trả lời các câu hỏi về chương sức khỏe và chương trình thuốc men. Nếu quý vị cần thông dịch viên xin gọi 1-800-452-4413 sẽ có nhân viên nói tiếng Việt giúp đỡ quý vị. Đây là dịch vụ miễn phí.

German Unser kostenloser Dolmetscherservice beantwortet Ihren Fragen zu unserem Gesundheits- und Arzneimittelplan. Unsere Dolmetscher erreichen Sie unter 1-800-452-4413. Man wird Ihnen dort auf Deutsch weiterhelfen. Dieser Service ist kostenlos.

Korean 당사는 의료 보험 또는 약품 보험에 관한 질문에 답해 드리고자 무료 통역 서비스를 제공하고 있습니다. 통역 서비스를 이용하려면 전화 1-800-452-4413 번으로 문의해 주십시오. 한국어를 하는 담당자가 도와 드릴 것입니다. 이 서비스는 무료로 운영됩니다.

Russian Если у вас возникнут вопросы относительно страхового или медикаментного плана, вы можете воспользоваться нашими бесплатными услугами переводчиков. Чтобы воспользоваться услугами переводчика, позвоните нам по телефону 1-800-452-4413. Вам окажет помощь сотрудник, который говорит по-русски. Данная услуга бесплатная.

Arabic إننا نقدم خدمات المترجم الفوري المجانية للإجابة عن أي أسئلة تتعلق بالصحة أو جدول الأدوية لدينا. للحصول ليس عليك سوى الاتصال بنا على 1-800-452-4413. سيقوم شخص ما يتحدث العربية بمساعدتك. هذه خدمة مجانية على مترجم فوري،

Hindi हमारे स्वास्थ्य या दवा की योजना के बारे में आपके किसी भी प्रश्न के जवाब देने के लिए हमारे पास मुफ्त दुभाषिया सेवाएँ उपलब्ध हैं. एक दुभाषिया प्राप्त करने के लिए, बस हमें 1-800-452-4413 पर फोन करें. कोई व्यक्ति जो हिन्दी बोलता है आपकी मदद कर सकता है. यह एक मुफ्त सेवा है.

Italian E disponibile un servizio di interpretariato gratuito per rispondere a eventuali domande sul nostro piano sanitario e farmaceutico. Per un interprete, contattare il numero 1-800-452-4413. Un nostro incaricato che parla Italianovi fornirà l'assistenza necessaria. È un servizio gratuito.

Portuguese Dispomos de serviços de interpretação gratuitos para responder a qualquer questão que tenha acerca do nosso plano de saúde ou de medicação. Para obter um intérprete, contacte-nos através do número 1-800-452-4413. Irá encontrar alguém que fale o idioma Português para o ajudar. Este serviço é gratuito.

French Creole Nou genyen sèvis entèprèt gratis pou reponn tout kesyon ou ta genyen konsènan plan medikal oswa dwòg nou an. Pou jwenn yon entèprèt, jis rele nou nan 1-800-452-4413. Yon moun ki pale Kreyòl kapab ede w. Sa a se yon sèvis ki gratis.

Polish Umożliwiamy bezpłatne skorzystanie z usług tłumacza ustnego, który pomoże w uzyskaniu odpowiedzi na temat planu zdrowotnego lub dawkowania leków. Aby skorzystać z pomocy tłumacza znającego język polski, należy zadzwonić pod numer 1-800-452-4413. Ta usługa jest bezpłatna.

Japanese 当社の健康 健康保険と薬品 処方薬プランに関するご質問にお答えするために、無料の通訳サービスがあります。通訳をご用命になるには、1-800-452-4413 にお電話ください。日本語を話す人者が支援いたします。これは無料のサービスです。

Hmong Peb muaj cov kev pab cuam txhais lus pab dawb los teb tej lus nug uas koj muaj hais txog ntawm peb li kev noj qab haus huv los sis lub phiaj xwm tshuaj kho mob. Kom tau txais tus kws pab cuam txhais lus, tsuas yog hu rau peb ntawm 1-800-452-4413. Muaj cov paub lus Hmoob tuaj yeem pab tau koj. Qhov no yog pab dawb.

Ukrainian Ми надаємо безкоштовні послуги перекладача, щоб відповісти на будь-які запитання щодо нашого плану лікування чи надання лікарських засобів. Щоб скористатися послугами перекладача, просто зателефонуйте нам за номером 1-800-452-4413. Вам може допомогти хтось, хто розмовляє Українською. Це безкоштовна послуга.

Navajo D77 ats'77s baa lhly3 47 doodago azee' bee aa lhly3 b7na'7d7[kidgo 47 n1 ata' hodoonih77 h0l=. Ata' halne'4 biniiy4go, koj8' 1-800-452-4413 b44sh bee hod77lnih. Diné k'ehj7 y1[ti'i n7k1 adoolwo]. D77 t'11 j77k'eh bee an1'1wo.

Punjabi ਪੰਜਾਬੀ ਸਾਡੀ ਸਿਹਤ ਨਾਂ ਡਰੱਗ ਪਲਾਨ ਬਾਰੇ ਤੁਹਾਡੇ ਕਿਸੇ ਵੀ ਸਵਾਲ ਦਾ ਜਵਾਬ ਦੇਣ ਲਈ ਸਾਡੇ ਕੋਲ ਮੁਫਤ ਦੁਆਰੀਏ ਸੇਵਾਵਾਂ ਉਪਲਬਧ ਹਨ। ਇੱਕ ਦੁਆਰੀਆ ਲੈਣ ਲਈ, ਸਾਨੂੰ 1-800-452-4413 'ਤੇ ਕਾਲ ਕਰੋ। ਪੰਜਾਬੀ ਬੋਲਣ ਵਾਲਾ ਕੋਈ ਵੀ ਵਿਅਕਤੀ ਤੁਹਾਡੀ ਮਦਦ ਕਰ ਸਕਦਾ ਹੈ। ਇਹ ਇੱਕ ਮੁਫਤ ਸੇਵਾ ਹੈ।

Khmer យើងមានសេវាអ្នកបកប្រែផ្ទាល់មាត់ដោយឥតគិតថ្លៃដើម្បីឆ្លើយសំណួរនានា ដែលអ្នកអាចមានអំពីសុខភាព ឬគម្រោងឱសថរបស់យើង។ ដើម្បីទទួលបានអ្នកបកប្រែផ្ទាល់មាត់ម្នាក់ សូមទូរស័ព្ទទមកយើងខ្ញុំតាមលេខ 1-800-452-4413។ អ្នកណាម្នាក់ដែលនិយាយភាសាខ្មែរអាចជួយអ្នកបាន។ សេវានេះមិនគិតថ្លៃនោះទេ។

Mien Yie mbuo mbenc duqv maaih tengx wang-henh nzie faan waac mienh liouh dau waac bun muangx dongh nzunc baav meih maaih waac naaic taux yie mbuo gorngv taux yie nyei heng-wangc jauv-louc a'fai ndie-daan. Liouh lorx zipv longc faan waac nor, douc waac lorx taux yie mbuo yiem njiec naaiv 1-800-452-4413. Maaih mienh gorngv benx Mienh waac haih tengx nzie duqv meih. Naaiv se benx wang-henh nzie weih jauv-louc oc.

Lao ພວກເຮົາມີນາຍພາສາໂດຍບໍ່ເສຍຄ່າເພື່ອຕອບຄໍາຖາມຕ່າງໆທີ່ທ່ານອາດຈະມີກ່ຽວກັບສຸຂະພາບ ຫຼື ແຜນການຢາຂອງພວກເຮົາ. ເພື່ອໃຫ້ໄດ້ຮັບນາຍພາສາ, ພຽງແຕ່ໂທຫາພວກເຮົາທີ່ເບີ 1-800-452-4413. ມີຜູ້ຮູ້ ພາສາລາວ ສາມາດຊ່ວຍທ່ານ. ມີແມ່ນບໍລິການໂດຍບໍ່ເສຍຄ່າ.

Armenian Մեզ մոտ հասանելի են անվճար թարգմանչական ծառայություններ՝ մեր առողջապահական կազմակերպիչներին հետ կապված Ձեր ցանկացած հարցին պատասխանելու համար: Թարգմանիչ լինելու համար պարզապես զանգահարեք մեզ 1-800-452-4413 հեռախոսահամարով: Ձեզ կօգնի հարցերն իմացող թարգմանիչը: Ծառայությունն անվճար է:

Farsi ما خدمات مترجم شفاهی رایگان ارائه می‌دهیم تا به هر گونه سوالی که در مورد طرح سلامت یا داروی ما دارید پاسخ دهیم. برای داشتن مترجم شفاهی، کافیت با ما به شماره 1-800-452-4413 تماس بگیرید. کسی که فارسی صحبت می‌کند می‌تواند به شما کمک کند. این یک خدمت رایگان است.

Thai ภาษาไทย เรามีบริการล่ามฟรีเพื่อตอบคำถามของคุณเกี่ยวกับสุขภาพหรือแผนด้านยาของคุณ หากต้องการบริการล่าม โปรดโทรหาเราที่ 1-800-452-4413 มีคนที่สามารถพูดภาษาไทยได้เพื่อช่วยเหลือคุณ บริการนี้เป็นบริการฟรี

Multi-Language Insert
Multi-Language Interpreter Services

English We have free interpreter services to answer any questions you may have about our health or drug plan. To get an interpreter, just call us at 1-800-776-4466. Someone who speaks English can help you. This is a free service.

Spanish Tenemos servicios de intérprete sin costo alguno para responder cualquier pregunta que pueda tener sobre nuestro plan de salud o medicamentos. Para hablar con un intérprete, por favor llame al 1-800-776-4466. Alguien que hable español le podrá ayudar. Este es un servicio gratuito.

Chinese Mandarin 我们提供免费的翻译服务，帮助您解答关于健康或药物保险的任何疑问。如果您需要此翻译服务，请致电 1-800-776-4466。我们的中文工作人员很乐意帮助您。这是一项免费服务。

Chinese Cantonese 您對我們的健康或藥物保險可能存有疑問，為此我們提供免費的翻譯服務。如需翻譯服務，請致電 1-800-776-4466。我們講中文的人員將樂意為您提供幫助。這是一項免費服務。

Tagalog Mayroon kaming libreng serbisyo sa pagsasaling-wika upang masagot ang anumang mga katanungan ninyo hinggil sa aming planong pangkalusugan o panggagamot. Upang makakuha ng tagasaling-wika, tawagan lamang kami sa 1-800-776-4466. Maaari kayong tulungan ng isang nakakapagsalita ng Tagalog. Ito ay libreng serbisyo.

French Nous proposons des services gratuits d'interprétation pour répondre à toutes vos questions relatives à notre régime de santé ou d'assurance-médicaments. Pour accéder au service d'interprétation, il vous suffit de nous appeler au 1-800-776-4466. Un interlocuteur parlant Français pourra vous aider. Ce service est gratuit.

Vietnamese Chúng tôi có dịch vụ thông dịch miễn phí để trả lời các câu hỏi về chương sức khỏe và chương trình thuốc men. Nếu quý vị cần thông dịch viên xin gọi 1-800-776-4466 sẽ có nhân viên nói tiếng Việt giúp đỡ quý vị. Đây là dịch vụ miễn phí.

German Unser kostenloser Dolmetscherservice beantwortet Ihren Fragen zu unserem Gesundheits- und Arzneimittelplan. Unsere Dolmetscher erreichen Sie unter 1-800-776-4466. Man wird Ihnen dort auf Deutsch weiterhelfen. Dieser Service ist kostenlos.

Korean 당사는 의료 보험 또는 약품 보험에 관한 질문에 대해 드리고자 무료 통역 서비스를 제공하고 있습니다. 통역 서비스를 이용하려면 전화 1-800-776-4466 번으로 문의해 주십시오. 한국어를 하는 담당자가 도와 드릴 것입니다. 이 서비스는 무료로 운영됩니다.

Russian Если у вас возникнут вопросы относительно страхового или медикаментного плана, вы можете воспользоваться нашими бесплатными услугами переводчиков. Чтобы воспользоваться услугами переводчика, позвоните нам по телефону 1-800-776-4466. Вам окажет помощь сотрудник, который говорит по-русски. Данная услуга бесплатная.

Arabic إننا نقدم خدمات المترجم الفوري المجانية للإجابة عن أي أسئلة تتعلق بالصحة أو جدول الأدوية لدينا. للحصول

ليس عليك سوى الاتصال بنا على 1-800-776-4466. سيقوم شخص ما يتحدث العربية بمساعدتك. هذه خدمة مجانية على مترجم فوري،

Hindi हमारे स्वास्थ्य या दवा की योजना के बारे में आपके किसी भी प्रश्न के जवाब देने के लिए हमारे पास मुफ्त दुभाषिया सेवाएँ उपलब्ध हैं. एक दुभाषिया प्राप्त करने के लिए, बस हमें 1-800-776-4466 पर फोन करें. कोई व्यक्ति जो हिन्दी बोलता है आपकी मदद कर सकता है. यह एक मुफ्त सेवा है.

Italian E disponibile un servizio di interpretariato gratuito per rispondere a eventuali domande sul nostro piano sanitario e farmaceutico. Per un interprete, contattare il numero 1-800-776-4466. Un nostro incaricato che parla Italianovi fornirà l'assistenza necessaria. È un servizio gratuito.

Portuguese Dispomos de serviços de interpretação gratuitos para responder a qualquer questão que tenha acerca do nosso plano de saúde ou de medicação. Para obter um intérprete, contacte-nos através do número 1-800-776-4466. Irá encontrar alguém que fale o idioma Português para o ajudar. Este serviço é gratuito.

French Creole Nou genyen sèvis entèprèt gratis pou reponn tout kesyon ou ta genyen konsènan plan medikal oswa dwòg nou an. Pou jwenn yon entèprèt, jis rele nou nan 1-800-776-4466. Yon moun ki pale Kreyòl kapab ede w. Sa a se yon sèvis ki gratis.

Polish Umożliwiamy bezpłatne skorzystanie z usług tłumacza ustnego, który pomoże w uzyskaniu odpowiedzi na temat planu zdrowotnego lub dawkowania leków. Aby skorzystać z pomocy tłumacza znającego język polski, należy zadzwonić pod numer 1-800-776-4466. Ta usługa jest bezpłatna.

Japanese 当社の健康 健康保険と薬品 処方薬プランに関するご質問にお答えするために、無料の通訳サービスがあります。通訳をご用命になるには、1-800-776-4466 にお電話ください。日本語を話す人者が支援いたします。これは無料のサービスです。

Hmong Peb muaj cov kev pab cuam txhais lus pab dawb los teb tej lus nug uas koj muaj hais txog ntawm peb li kev noj qab haus huv los sis lub phiaj xwm tshuaj kho mob. Kom tau txais tus kws pab cuam txhais lus, tsuas yog hu rau peb ntawm 1-800-776-4466. Muaj cov paub lus Hmoob tuaj yeem pab tau koj. Qhov no yog pab dawb.

Ukrainian Ми надаємо безкоштовні послуги перекладача, щоб відповісти на будь-які запитання щодо нашого плану лікування чи надання лікарських засобів. Щоб скористатися послугами перекладача, просто зателефонуйте нам за номером 1-800-776-4466. Вам може допомогти хтось, хто розмовляє Українською. Це безкоштовна послуга.

Navajo D77 ats'77s baa lhly3 47 doodago azeé' bee aa lhly3 b7na'7d7[kidgo 47 n1 ata' hodoolnih77 h0l=. Ata' halne'4 biniiy4go, koj8' 1-800-776-4466 b44sh bee hod77lnih. Diné k'ehj7 y1[ti'i n7k1 adoolwo[. D77 t'11 j77k'eh bee an1'1wo.

Punjabi ਪੰਜਾਬੀ ਸਾਡੀ ਸਿਹਤ ਨਾਂ ਡਰੱਗ ਪਲਾਨ ਬਾਰੇ ਤੁਹਾਡੇ ਕਿਸੇ ਵੀ ਸਵਾਲ ਦਾ ਜਵਾਬ ਦੇਣ ਲਈ ਸਾਡੇ ਕੋਲ ਮੁਫਤ ਦੁਆਰਾ ਸੇਵਾ ਉਪਲਬਧ ਹਨ। ਇੱਕ ਦੁਆਰਾ ਲੈਣ ਲਈ, ਸਾਨੂੰ 1-800-776-4466 'ਤੇ ਕਾਲ ਕਰੋ। ਪੰਜਾਬੀ ਬੋਲਣ ਵਾਲਾ ਕੋਈ ਵੀ ਵਿਅਕਤੀ ਤੁਹਾਡੀ ਮਦਦ ਕਰ ਸਕਦਾ ਹੈ। ਇਹ ਇੱਕ ਮੁਫਤ ਸੇਵਾ ਹੈ।

Khmer យើងមានសេវាអ្នកបកប្រែផ្តល់មាត់ដោយឥតគិតថ្លៃដើម្បីឆ្លើយសំណួរនានា ដែលអ្នកអាចមានអំពីសុខភាព ឬគម្រោងឱសថរបស់យើង។ ដើម្បីទទួលបានអ្នកបកប្រែផ្តល់មាត់ម្នាក់ សូមទូរស័ព្ទមកយើងខ្ញុំតាមលេខ 1-800-776-4466។ អ្នកណាម្នាក់ដែលនិយាយភាសាខ្មែរអាចជួយអ្នកបាន។ សេវានេះមិនគិតថ្លៃនោះទេ។

Mien Yie mbuo mbenc duqv maaih tengx wang-henh nzie faan waac mienh liouh dau waac bun muangx dongh nzunc baav meih maaih waac naaic taux yie mbuo gorngv taux yie nyei heng-wangc jauv-louc a'fai ndie-daan. Liouh lorx zipv longc faan waac nor, douc waac lorx taux yie mbuo yiem njiec naaiv 1-800-776-4466. Maaih mienh gorngv benx Mienh waac haih tengx nzie duqv meih. Naaiv se benx wang-henh nzie weih jauv-louc oc.

Lao ພວກເຮົາມີນາຍພາສາໂດຍບໍ່ເສຍຄ່າເພື່ອຕອບຄໍາຖາມຕ່າງໆທີ່ທ່ານອາດຈະມີກ່ຽວກັບສຸຂະພາບ ຫຼື ແຜນການຢາຂອງພວກເຮົາ. ເພື່ອໃຫ້ໄດ້ຮັບນາຍພາສາ, ພຽງແຕ່ໂທຫາພວກເຮົາທີ່ບີ 1-800-776-4466. ມີຜູ້ຮູ້ພາສາລາວ ສາມາດຊ່ວຍທ່ານ. ບໍ່ແມ່ນບໍລິການໂດຍບໍ່ເສຍຄ່າ.

Armenian Մեզ քոտ հասանելի են անվճար թարգմանչական ծառայություններ՝ մեր առողջապահական կազմակերպիչներին հետ կապված Ձեր ցանկացած հարցին պատասխանելու համար: Թարգմանիչ ունենալու համար պարզապես զանգահարեք մեզ 1-800-776-4466 հեռախոսահամարով: Ձեզ կօգնի հարցերին իմացող թարգմանիչը: Ծառայությունն անվճար է:

Farsi ما خدمات مترجم شفاهی رایگان ارائه می‌دهیم تا به هر گونه سوالی که در مورد طرح سلامت یا داروی ما دارید پاسخ دهیم. برای داشتن مترجم شفاهی، کافیت با ما به شماره 1-800-776-4466 تماس بگیرید. کسی که فارسی صحبت می‌کند می‌تواند به شما کمک کند. این یک خدمت رایگان است.

Thai ภาษาไทย เรามีบริการล่ามฟรีเพื่อตอบคำถามของคุณเกี่ยวกับสุขภาพหรือแผนด้านยาของคุณ หากต้องการบริการล่าม โปรดโทรหาเราที่ 1-800-776-4466 มีคนที่สามารถพูดภาษาไทยได้เพื่อช่วยเหลือคุณ บริการนี้เป็นบริการฟรี



LANGUAGE ASSISTANCE NOTICE

English ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Call 1-800-452-4413 (TTY: 711), 8:00 a.m. to 8:00 p.m., seven days a week. The call is free.

中文 Chinese 请注意：如果您说中文，可以免费获得语言协助服务。请拨打 1-800-452-4413 (听障和语障专线：711)，每周七天办公，早上 8:00 至晚上 8:00。此电话为免付费专线。

한국어 Korean 주: 귀하가 한국어를 사용하시는 경우, 무료로 언어 지원 서비스를 이용하실 수 있습니다. 1-800-452-4413 (TTY: 711) 번으로 주 7 일, 오전 8 시부터 오후 8 시까지 전화하실 수 있습니다. 이 전화는 무료입니다.

Русский Russian ОБРАТИТЕ ВНИМАНИЕ! Если Вы говорите по-русски, мы можем предложить Вам бесплатные услуги языковой поддержки. Звоните по телефону 1-800-452-4413 (TTY: 711) с 8:00 до 20:00 без выходных. Звонок бесплатный.

فارسی Farsi

توجه: اگر به زبان فارسی صحبت می کنید، خدمات امداد زبانی بدون اخذ هزینه در اختیار شما می باشد. با شماره 1-800-452-4413- 4413 (TTY: 711)، از ساعت 8:00 صبح تا 8:00 شب در هفت روز هفته تماس بگیرید. این تماس رایگان است.

भाषा Hindi ध्यान: यदि आप भाषा बोलते हैं, तो आपके लिए भाषा सहायता सेवाएं नि:शुल्क उपलब्ध हैं। फ़ोन करना 1-800-452-4413 (TTY: 711), सुबह 8:00 बजे से शाम 8:00 बजे तक, सप्ताह के सातों दिन। फ़ोन करना फ़्री है।

Lus Hmoob Hmong LUS CEEV: Yog koj hais Lus Hmoob, muaj kev pab txhais lus pub dawb rau koj. Hu rau 1-800-452-4413 (TTY: 711), 8:00 teev sawv ntxov txog 8:00 teev tsaus ntuj, xya hnuv hauv ib lub as thiv. Qhov hu xov tooj no yog hu dawb xwb.

Español Spanish ATENCIÓN: Si usted habla español, hay a su disposición servicios de asistencia de idiomas sin costo. Llame al 1-800-452-4413 (TTY: 711), de 8:00 a.m. a 8:00 p.m., los siete días de la semana. La llamada es gratuita.

Tiếng Việt Vietnamese LƯU Ý: Nếu quý vị nói tiếng Việt, chúng tôi sẽ cung cấp miễn phí dịch vụ hỗ trợ ngôn ngữ cho quý vị. Gọi số 1-800-452-4413 (TTY: 711), 8 giờ sáng đến 8 giờ tối, bảy ngày trong tuần. Cuộc gọi này miễn phí.

Tagalog PAUNAWA: Kung nagsasalita kayo ng Tagalog, may mga available na lib्रेng serbisyo ng tulong sa wika para sa inyo. Tumawag sa 1-800-452-4413 (TTY: 711), 8:00 a.m. hanggang 8:00 p.m., pitong araw sa isang linggo. Libre ang tawag.

العربية Arabic

تنبيه: إذا كنت تتحدث اللغة العربية، يتوفر لك خدمات المساعدة اللغوية المجانية. اتصل على الرقم 1-800-452-4413 (TTY: 711)، من الساعة 8:00 صباحًا إلى 8:00 مساءً طوال أيام الأسبوع. علمًا بأن هذه المكالمات مجانية.

ພາສາລາວ Laotian ສິ່ງສຳຄັນ: ຖ້າທ່ານເວົ້າພາສາລາວແມ່ນມີບໍລິການຊ່ວຍເຫຼືອທາງດ້ານພາສາບໍ່ເສຍຄ່າໃຫ້ທ່ານ. ໂທຫາເບີ 1-800-452-4413 (TTY: 711), 8:00 ໂມງເຊົ້າ ຫາ 8:00 ໂມງແລງ, ເຈັດວັນຕໍ່ອາທິດ. ການໂທແມ່ນບໍ່ເສຍຄ່າ.

日本語 Japanese 注意事項：日本語を話される場合、無料の言語支援をご利用いただけます。1-800-452-4413 (TTY: 711) まで、お電話にてご連絡ください。毎日午前 8 時から午後 8 時まで受け付けています。通話は無料です。

ภาษาไทย Thai

เรียน หากคุณพูดภาษา ภาษาไทย เรามีบริการความช่วยเหลือด้านภาษาให้แก่คุณโดยไม่มีค่าใช้จ่าย โทร 1-800-452-4413 (TTY: 711) 8:00 น. ถึง 20:00 น. ได้ตลอดเจ็ดวันต่อสัปดาห์ โทรฟรี ไม่มีค่าใช้จ่าย

ਪੰਜਾਬੀ Punjabi ਸਾਵਧਾਨ : ਜੇ ਤੁਸੀਂ ਪੰਜਾਬੀ ਬੋਲਦੇ ਹੋ, ਤਾਂ ਤੁਹਾਡੇ ਲਈ ਮੁਫਤ ਭਾਸ਼ਾ ਸਹਾਇਤਾ ਸੇਵਾਵਾਂ, ਉਪਲਬਧ ਹਨ | ਕਾਲ ਕਰੋ 1-800-452-4413 (TTY: 711), ਸਵੇਰੇ 8:00 ਵਜੇ ਤੋਂ ਸ਼ਾਮ 8:00 ਵਜੇ ਤੱਕ, ਹਫ਼ਤੇ ਦੇ ਸੱਤ ਦਿਨ ਹਫ਼ਤੇ ਦੇ ਸੱਤ ਦਿਨ. ਕਾਲ ਫ੍ਰੀ ਹੈ |

ខ្មែរ Khmer ចាប់អារម្មណ៍: បើសិនអ្នកនិយាយភាសាខ្មែរ សេវាជំនួយភាសា គឺមានសំរាប់អ្នក ដោយឥតគិតថ្លៃ។ ហៅ 1-800-452-4413 (TTY: 711) ម៉ោង 8:00 ព្រឹក ដល់ 8:00 យប់ ប្រាំពីរថ្ងៃមួយអាទិត្យ។ គឺឥតគិតថ្លៃទេ។

Հայերեն Armenian ՈՒՇԱԴՐՈՒԹՅՈՒՆ՝ Եթե խոսում եք հայերեն, Ձեզ տրամադրվելի են անվճար լեզվաբան օգնություն ծառայություններ: Ձանգահայեր 1-800-452-4413 (TTY՝ 711) համարով, 8:00-ից 20:00, շաբաթը յոթ օր: Հեռախոսազանգն անվճար է:

Українська Ukrainian ЗВЕРНІТЬ УВАГУ! Якщо Ви розмовляєте українською, ми можемо запропонувати Вам безкоштовні послуги мовної підтримки. Телефонуйте 1-800-452-4413 (TTY: 711) з 8:00 до 20:00 без вихідних. Дзвінок безкоштовний.

Mienh Mien TOV JANGX LONGX OC: Beiv taix meih gorngv Mienh waac nor, ninh mbuo gorn zangc duqv mbenc nzoih wang-henh nzie weih faan waac bun meih muangx maiv zuqc feix liuc cuotv zinh nyaanh. Douc waac lorx taux 1-800-452-4413 (TTY: 711), 8:00 diemv ziangh hoc lungnh ndorm mingh taux 8:00 ziangh hoc lungnh muonz, yietc norm liv baaiz se koi nzoih siec hnoi. Naaiv norm douc waac gorn se wang-henh longc maiv zuqc feix liuc cuotv zinh nyaanh.

Notes



Blue Shield of CA
PO Box 4317
Woodland Hills, CA 91365-4317

PRESORTED
BOUND PRINTED
MATTER
U.S. POSTAGE PAID
BSC